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THE JAPAN ASSOCIATION OF COLLEGE ENGLISH TEACHERS

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JACET Kansai Journal

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編集者のつぶやき

大学英語教育学会関西支部紀要編集委員会は、*JACET KANSAI JOURNAL* No.17 をお届けいたします。14 本の投稿論文のうち最終査読を経て採択された 9 本の論文を提出された順に掲載しました。審査にご尽力くださった査読委員の先生方に心よりお礼申し上げます。また、賛助会員の皆様には、広告の掲載を通して支部活動に多大なご支援をいただきました。関係各位に厚くお礼申し上げます。加えて、野口支部長はじめ幹事のみなさんの惜しみないご協力にお礼申し上げます。編集委員の新田香織先生、佐藤恭子先生、八島智子先生、そして委員会と投稿者および査読者の間で締め切りを気にしながら迅速に対応してくださった事務局長の鎌倉義士先生にも感謝の意を表したいと思います。

さて、我々編集委員の仕事は 10 月から 6 ヶ月ほどに集中します。投稿論文の締め切り間近になると、たくさんの応募があったかどうか気がになります。締め切り日の翌日予想以上に多くの投稿があった場合は、その心配が査読委員が十分確保できるかというものに変わっていきます。近年どの大学も校務が増え、教員も多忙になってきています。そんな中で査読をお願いしなければなりません。いつも頼りにしている査読担当の先生方の優しい（時には厳しい）顔が浮かんできます。どうか多用等で断われませぬようにと祈りながら、編集委員会に臨みます。ここでは各論文をどの査読委員に依頼するのかをめぐって意見が交わされます。

査読結果が委員会に届けられた後もまた大変です。結果が同じであれば問題はありませんが、大きく違った場合は委員会ですدوするかの話し合い（主にメールで）が持たれます。メールでのやりとりを何度も繰り返した後、やっと目次とページ数が決定します。その間事務局長は絶えずメールを確認し、いかに対応するかの確な判断をしなければなりません。鎌倉先生、本当にお疲れさまでした。

このような状況を数年続けてきましたが、編集委員会にとって少しだけ余裕のある刊行日程に変更いたしました。応募される方は刊行規定をご確認ください。

JKJ 17 号が会員のみなさまにとって刺激ある研究紀要でありますことを編集者一同願っております。

JKJ 紀要委員会を代表して

小栗裕子

2015 年 3 月 7 日

A Two-Year Longitudinal Study of Listening Abilities and Affective Factors among Children Learning English in the Japanese EFL Context

Rieko Nishida
Osaka University

ABSTRACT

The present study describes a two-year longitudinal study of listening abilities and psychological factors, including intrinsic motivation, perceived autonomy, competency, and relatedness, Can-Do, and willingness to communicate in L2 and L2 ideal selves, among children aged between 10 and 12 years old learning English in the Japanese EFL context. In this study, in order to examine changes in students, a mixed method of quantitative and qualitative designs was adopted. The study was conducted between 2012 and 2014, and listening tests and questionnaires were administered to students in July 2012, February 2013, July 2013 and February 2014. The study revealed that students' listening abilities showed an increase throughout the course, and motivation and other psychological factors seemed to have been retained as well. In addition to quantitative studies, observation notes revealed six different patterns of classroom interactions.

Keywords: motivation, affect, longitudinal studies, elementary school students

I. INTRODUCTION

In 2011, “foreign language activities” commenced in all public elementary schools for 5th and 6th grade students across the country in Japan. As the purposes of “foreign language activities” are to “actively engage in communication in a foreign language” and “to deepen the experiential understanding of the language and cultures of Japan and foreign countries”, it can be said that the focus of “foreign language activity” is students’ affect in language learning, which includes motivation, willingness to communicate, interest in foreign countries and other affective factors. Several series of studies on motivation, willingness to communicate in L2 (hereinafter, L2WTC), interest in languages and cultures and other affective factors in cross-sectional studies among elementary school students have been carried out (Adachi, 2011a, 2011b; Carreira, 2006a, 2006b; Nishida, 2008, 2011, 2012; Nishida & Yashima, 2009, 2010), but further research is needed into affective factors and linguistic competency including listening and speaking, especially in a longitudinal manner. There is also a need for longitudinal analysis to gain a deeper understanding of the process of language learning as it occurs in “foreign language activities” in elementary schools, as there has been very little longitudinal analysis of how motivation and affective factors, as well as listening abilities, develop; nor has the way in which the process of learning changes during the course of studies been identified. These points clearly need further attention, as they appear to be so closely related to classroom practice in language learning.

II. LITERATURE REVIEW

In the L2 field, motivation research has been a subject of much interest to researchers and practitioners (e.g., Dörnyei, 1990, 2005; Gardner, 1985; Gardner, Masgoret, Tennant & Mihic, 2004, among others), as motivation is known to affect individuals' language learning. During the 1990s, the focus shifted to attempts to understand the actual language classroom in practice, and self-determination theory in particular has been adopted in L2 contexts as the theory is especially well-suited to the needs of practitioners. Deci and Ryan (1985, 2002) conceptualized self-determination theory, which focuses on human motivation, as a continuum from extrinsic motivation (less self-determined) to intrinsic motivation (most self-determined). Intrinsic motivation refers to learners' enjoyment in learning, with its rewards related to learning itself; it involves feelings of pleasure that are derived from the sense that one has freely chosen to perform an activity and develop competency, with engagement in learning being supported by others. Intrinsic motivation can be fulfilled when the three psychological needs of motivation (perceived autonomy, perceived competency and perceived relatedness) are enhanced. More recently, after the year 2000, the process of language learning, rather than the product, has received significant attention. Dörnyei & Ottó (1998) proposed a process model which emphasized dynamic characteristics and temporal variation in motivation in language learning. As learners' motivation shows continuous fluctuations over the course of time, the integration of the "time" factor can be crucial in understanding motivational changes among language learners. In this period, the new theory of 'future possible selves' was conceptualized as an L2 motivational theory: it elaborated two categories involved in language learning, the 'L2 ideal self' which refers to what a person hopes and wishes to become in the future, and the 'L2 ought to self', which refers to what a person feels obligated to become. When learners' self images are elaborative and vivid, it is said to enhance their motivational impact on 'future possible selves'.

Another affective factor involved in language learning, willingness to communicate (one of the constructs which lies within the area of individual differences in L2 learning), has received a lot of attention. In the case of Japan, this is partly because one of the focuses of foreign language activities as laid out by the Ministry of Education, Culture, Sports, Science & Technology (hereinafter, MEXT), is to foster a positive attitude toward communication, thus attracting the interest of both researchers and practitioners. Since the L2WTC model was proposed by MacIntyre, Clément, Dörnyei, and Noels (1998), it has stimulated a series of studies which included other learner characteristics associated with the L2WTC context, focusing on social support and language learning. In a Japanese university context, Yashima (2002) examined L2WTC, perceived competency, language learning motivation and international posture (defined as having an interest in foreign or international affairs and a readiness to interact with intercultural partners). In this model, perceived competency was strongly linked to L2WTC. In Yashima (2002) and Yashima, Zenuk-Nishide and Shimizu (2004), by using structural equation modeling, it was found that L2 learning motivation influenced L2 communication confidence which, in turn, influenced L2WTC. Based on Yashima (2002) and Yashima et.al. (2004), Nishida and Yashima (2009) conducted a

study focusing on L2WTC and interest in foreign countries in a Japanese elementary school context in which the structural equation model showed perceived competence is a predictor for L2WTC in children learning English.

III. OBJECTIVES OF THE STUDY

Although past studies investigated motivation and affect in language learning, these studies did not clarify students' changes in a longitudinal manner regarding listening, motivation and other affective factors among elementary school students. Also, while many of the past studies were conducted in a quantitative manner, a mixed design including quantitative and qualitative factors was needed in order to fully capture the development of students' language learning in a longitudinal manner.

The objectives of the present study were:

- 1) To capture how elementary school students' listening abilities, intrinsic motivation, psychological needs of motivation (perceived autonomy, competency and relatedness), interest in cultures and languages, L2WTC, Can-Do, and L2 ideal selves would change in two years, with the data collected in July 2012, February 2013, July 2013, and February 2014.
- 2) To carry out cluster analysis to identify the underlying individual characteristics in listening abilities as well as affective factors to see how these change in a longitudinal manner.
- 3) To briefly describe qualitative data to see how teachers would perceive students' changes in listening abilities and affective factors throughout the course.

IV. STUDY CONTEXT

1. The Study Context

The focus of this study was Public Elementary School A in Osaka Prefecture in Japan. The city was rather small and there were only 224 students in total aged between 6 and 12 years old (1st to 6th grade). During the period of the present research, an assistant language teacher (hereinafter, ALT) organized curricula for the City Board of Education for the 5th and 6th grades at School A where the ALT was visiting once a week, totaling 35 hours of foreign language activities. Also, at this school, the third and the fourth grade students made use of comprehensive study hours to study English for approximately 10 hours annually. All lesson plans were prepared for the ALT but the activities and games that students liked were decided in discussion with homeroom teachers (hereinafter, HRT).

2. Team-teaching Styles

The ALT was born in Korea and emigrated to Canada when she was a teenager. She had experience in teaching as a homeroom teacher at elementary school in the UK, and this was the first year for her to teach in a Japanese elementary school setting. She was also taking a CELTA course (Certificate in Teaching English to Speakers of Other Languages) and was enthusiastic about

teaching children and making all sorts of teaching materials for them. Team-teaching was carried out with the ALT and HRT in the class. Teacher A, the HRT, was rather shy in English lessons; his role was trying to explain in Japanese to students. He was able to team-teach with the ALT by using both Japanese and English. The HRT had a short meeting with the ALT and they knew their roles in the class; the ALT had the main role in teaching while the HRT had a subordinate role. In addition to the ALT and HRTs, depending on the day and the month, two to three volunteer students from one of the graduate schools in Osaka also assisted in the foreign language class.

3. Annual Curricula and Lesson Plans

Curricula were organized in Public Elementary School A to integrate topics from “Hi, friends! 1” and “Hi, friends! 2” (see Tables 1 & 2). Toward the end of the term, small projects were integrated including “making a picture book”, “group presentation project”, and “making a play”. Students in both 5th and 6th grades were involved in the projects and expressed their ideas in front of the class. In every lesson, lesson plans were organized as follows: greetings (5 min), review (5 min), main activities (10 min for introducing words and sentences, and 20 min for main tasks), and wrap up (5 min). Teaching material included the textbooks, DVDs, picture cards, and games. Students followed the lesson plans and seemed to like the materials that the ALT had created. As an example, following is a description of how the picture book project was conducted. “The Very Hungry Caterpillar” by Eric Carle (1969) was chosen as a model for the sixth grade to create their own picture book. In this book, a small caterpillar eats many different kinds of food from Monday to Saturday, and then it becomes a beautiful butterfly. Students in each group needed to think about “the very hungry something” becoming “the very beautiful something”, and what he/she eats for a week. One of the groups created a story in which “the very hungry mouse” becomes “the very big panda bear” by eating many different foods for a week. Six different students in a group drew a picture of an apple and bananas indicating “on Monday, he ate a big apple” and “on Tuesday, he ate two bananas”, respectively. Then on the presentation day, students presented their picture book in front of the class. While students were creating the picture books, teachers assisted students to read and write English words to be able to complete the book. They practiced how to pronounce the words and the sentences before presenting the books in front of the class.

Table 1. Annual Curricula for Grade 5

<i>Hi, friends! 1</i>		Key sentences
April		What's your name? Hello, my name is _____. Nice to meet you.
May	Lesson 1, 2	Hello! I'm happy! Learning "Hello" in different languages and learning emotional expressions.
June	Lesson 3	How many? Learning "numbers" in different languages.
July	Project 1: Picture Book Project. Based on "Brown Bear Brown Bear, What Do you see".	
Sept	Lesson 4	I like apples. I don't like apples. Expressing what you like and what you don't like.
Oct	Lesson 5	What do you like? Learning colors and shapes. Making a T-shirt.
Nov	Project 2: Group Presentation Project	
Dec	Lesson 6	What do you want? Learning alphabet. Big "A" and small "a".
Jan	Lesson 7	What's this? Pointing games. It's a --.
Feb	Project 3. Making a Play.	

Table 2. Annual Curricula for Grade 6

<i>Hi, friends! 2</i>		Key sentences
April		What's your name? Hello, my name is _____. Nice to meet you.
May	Lesson 1, 2	Do you have "a"? Yes, I do. No, I don't. My birthday is --.
June	Lesson 3	My birthday is --. I can--. I can't --. Can you --?
July	Project 1: Picture Book Project. Based on "The Very Hungry Caterpillar".	
Sept	Lesson 4	Direction: Go straight, turn right, turn left, where is the --? Let's go to Italy!
Oct		To make own T-shirts. What T-shirt? What shape? What color? How many starts?
Nov	Project 2: Group Presentation Project	
Dec	Lesson 5	I can./ I can't play--.. (play soccer, play baaseball, play the piano..)
Jan	Lesson 6	Let's try "clock". What time is it now? It's 10:30 p.m. What time do you go to school?
Feb	Lesson 7	Project 3. Making a Play.

V. METHOD

1. Participants

A total of 34 students participated in the study. When students took listening tests and questionnaires, they were in the fifth and sixth grade, aged between 10 and 12 years old. These students were in the same class when they were in the 5th and 6th grades. The same HRT, Teacher A, was in charge of these students for two years.

2. Procedures

A listening test according to the STEP Bronze test (ALC Press, 2007) was prepared based on students' abilities and understanding (Table 3). The listening tests consisted of 15 questions with the level adjusted according to the students' level of understanding, and included some challenging questions. The motivation questionnaire included the following scales: intrinsic motivation (3 items), perceived autonomy (4 items), perceived competency (4 items) and perceived relatedness (4 items), interest in cultures and languages (3 items), Can-Do (4 items), L2 WTC (2 items), and L2 Ideal selves (3 items) (see Table 4 for Cronbach's Alpha). A five-point Likert scale was used for the questionnaire items.

Table 3. Examples of Listening Test

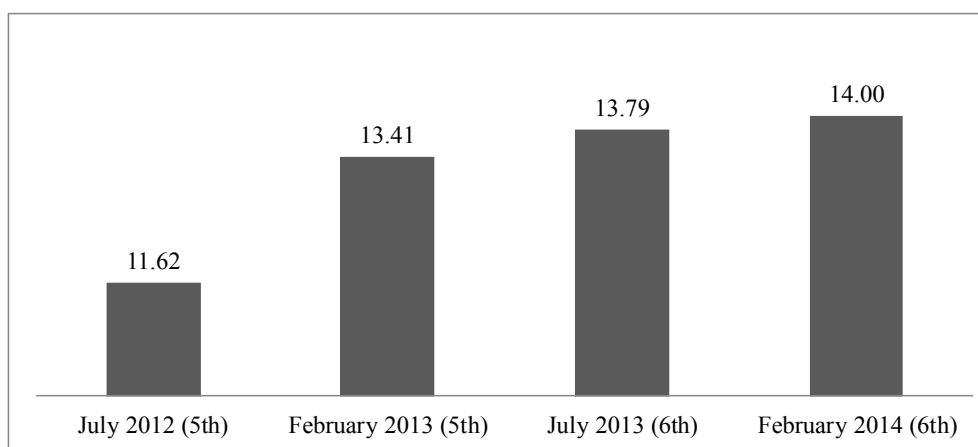
- 1) 1. This is a hippopotamus. 2. This is a sheep. 3. This is a house.
- 2) 1. I have two pineapples. 2. I have two pears. 3. I have two oranges.
- 3) 1. I play the violin. 2. I play the guitar. 3. I play the harmonica.

Table 4. The Scales and Cronbach's Alphas

	References	Jul-12	Feb-13	Jul-13	Feb-14
Perceived Autonomy	Hiromori (2006)	$\alpha.70$	$\alpha.81$	$\alpha.75$	$\alpha.69$
Perceived Competency		$\alpha.79$	$\alpha.85$	$\alpha.84$	$\alpha.86$
Perceived Relatedness		$\alpha.64$	$\alpha.86$	$\alpha.65$	$\alpha.77$
Intrinsic Motivation		$\alpha.94$	$\alpha.92$	$\alpha.84$	$\alpha.70$
Interest in Cultures and Languages	Nishida (2008)	$\alpha.71$	$\alpha.41$	$\alpha.64$	$\alpha.63$
Can-Do	Nakahira et.al. (2011)	$\alpha.69$	$\alpha.72$	$\alpha.49$	$\alpha.64$
L2WTC	Yashima (2002)	$\alpha.92$	$\alpha.74$	$\alpha.81$	$\alpha.72$
L2Ideal Selves	Ryan (2009)	$\alpha.84$	$\alpha.61$	$\alpha.77$	$\alpha.73$

VI. RESULTS OF THE QUANTITATIVE STUDY

To investigate the first research question, to capture how elementary school students' listening abilities, intrinsic motivation, psychological needs of motivation (perceived autonomy, competency and relatedness), interest in cultures and languages, L2WTC, Can-Do, and L2 ideal selves would change in two years, a statistical analysis was conducted with the data collected in July 2012, February 2013, July 2013, and February 2014. Descriptive statistics were estimated using SPSS ver.19. Listening abilities showed an increase throughout the course; in particular, there seemed to be a sharp increase between July 2012 and February 2013 when students were in the 5th grade. The results for July 2013 and February 2014 showed that students' listening abilities seemed to have been maintained through the 6th grade (see Figure 1). Also, although scores in most of the affective factors seemed to have been maintained throughout the course, perceived autonomy and intrinsic motivation seemed to have declined during the 6th grade (see Figures 2-3).

**Figure 1. Longitudinal Analysis of Listening Abilities Between April 2012 and March 2014**

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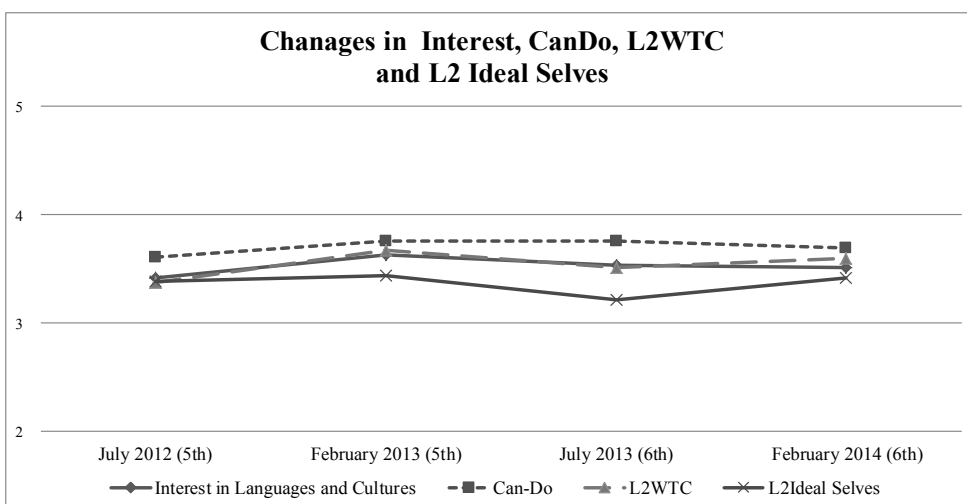
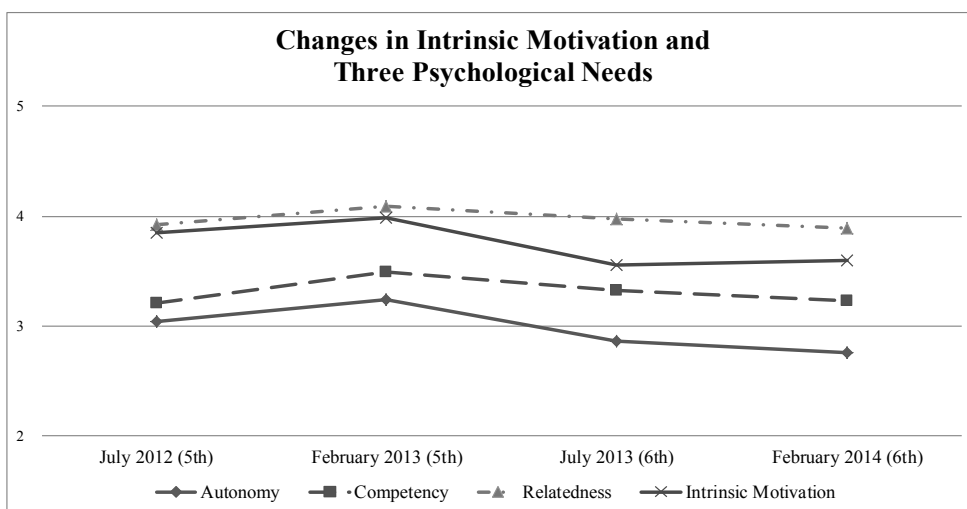


Figure 2. Changes in Intrinsic Motivation and Three Psychological Needs

Figure 3. Changes in Other Affective Factors

To investigate the second research question, to identify the underlying individual characteristics in listening abilities as well as affective factors to see how these change in a longitudinal manner, cluster analysis was conducted. Hierarchical cluster method in the use of Euclidean distance was applied and to decide the cut-off points, a dendrogram indicating the hierarchical clustering structure was decided. Four clusters were identified: Cluster 1 with 6 students, Cluster 2 with 4 students, Cluster 3 with 19 students and Cluster 4 with 5 students (see Table 5) (see Figures 4-12).

Cluster 1 (Figures 5-6) showed the highest listening and affective factors among the four clusters. In particular, listening maintained its level throughout the course after a sharp increase in February 2013, and scores in affective factors were maintained, but relatedness, intrinsic motivation,

interest in languages and culture and Can-Do showed decreasing tendencies after July 2013. Cluster 1 showed the highest scores in intrinsic motivation and the three psychological needs of motivation among the four clusters, with higher scores in motivation, the three psychological needs and other affective factors in July 2012, and February 2013, then showing a slight decline in July 2013 before recovering somewhat in February 2014.

Cluster 2 (Figures 7-8) revealed a sharp increase in listening. In July 2012, students showed a low score on listening ($M=8.25$), but a half year later, they showed a sharp increase ($M=11.50$), then their listening abilities showed constant increase toward the end of the year. Most of the affective factors including autonomy, competency, intrinsic motivation, interest in languages and culture, L2WTC and L2 ideal selves, on the contrary, showed a decreasing tendency throughout the course.

Cluster 3 (Figures 9-10) included 19 students, making up nearly 55 % of students in total. These students showed middling tendencies in both listening and affective factors. In July 2012, listening showed the second highest among four clusters, increasing afterwards. Most of the affective factors maintained their levels throughout the course. This cluster showed middle range scores on intrinsic motivation and the three psychological needs of motivation, and these were maintained throughout the course, though autonomy showed a decline after July 2013. As for other affective factors, Cluster 3 also showed middle range scores for these affective factors and these factors seemed to be maintained over the course of time.

Cluster 4 (Figures 11-12) also showed high scores on listening, with a slight decline afterwards. This cluster showed the lowest scores for intrinsic motivation and the three psychological needs of motivation among the four clusters, but it showed an increasing tendency in intrinsic motivation, and autonomy, while scores in relatedness and competency were maintained throughout the course. Cluster 4 also showed the lowest affective factors among the four clusters, but all these factors seem to have been enhanced over the duration of the course.

Table 5. Descriptions of Each Cluster

	Listening Affect		Descriptions of Each Cluster
Cluster 1 (6)	High	High	High in listening and affect.
Cluster 2 (4)	Low	Middle	Low in listening and high in affect, but showing a sharp increase in listening.
Cluster 3 (19)	Middle	Middle	Middle in listening and affect.
Cluster 4 (5)	Middle	Low	Middle in listening and low in affect, but showed increase in affect.

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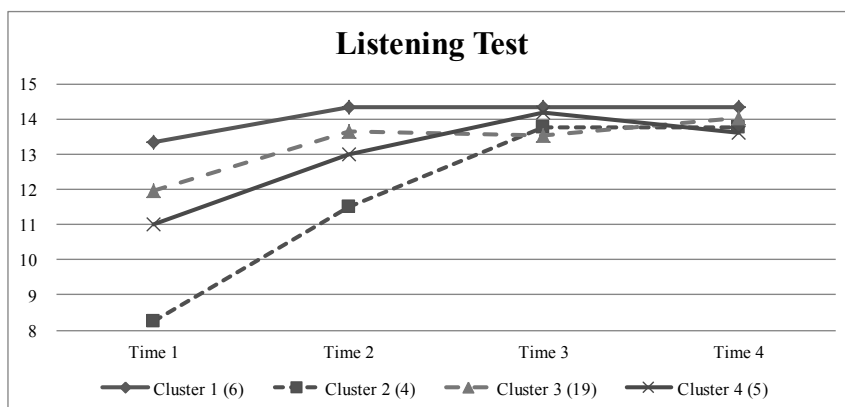


Figure 4. Changes in Listening Test on Each Cluster

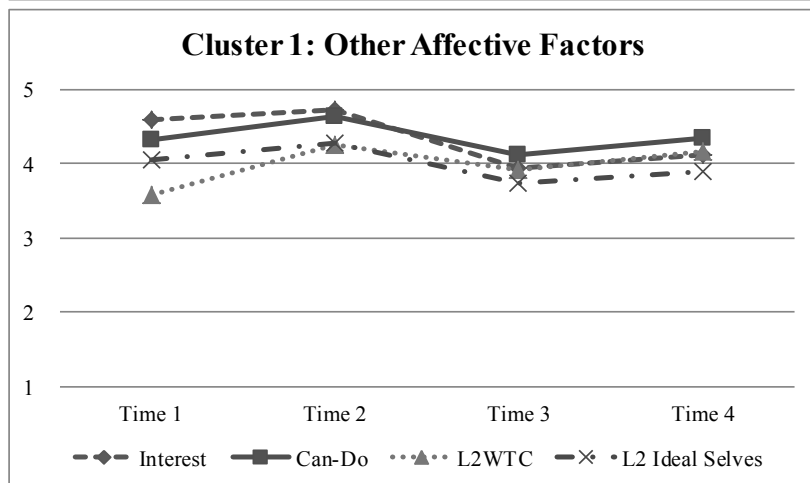
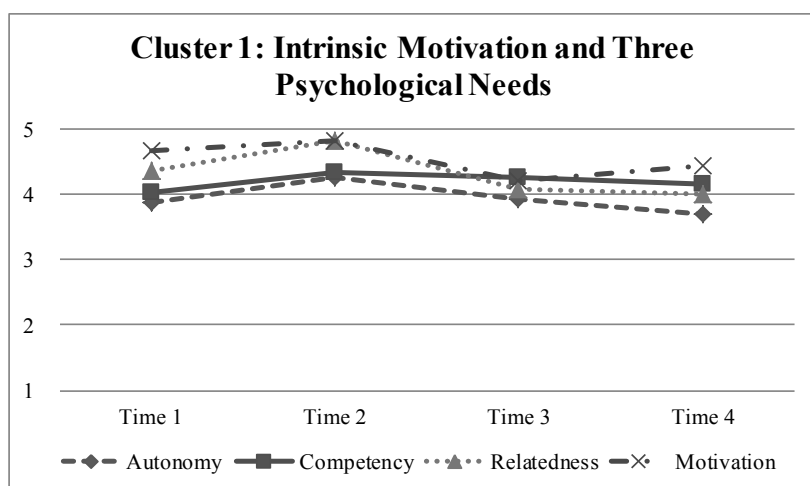


Figure 5. Cluster 1: Intrinsic Motivation and Three Psychological Needs

Figure 6. Cluster 1: Other Affective Factors

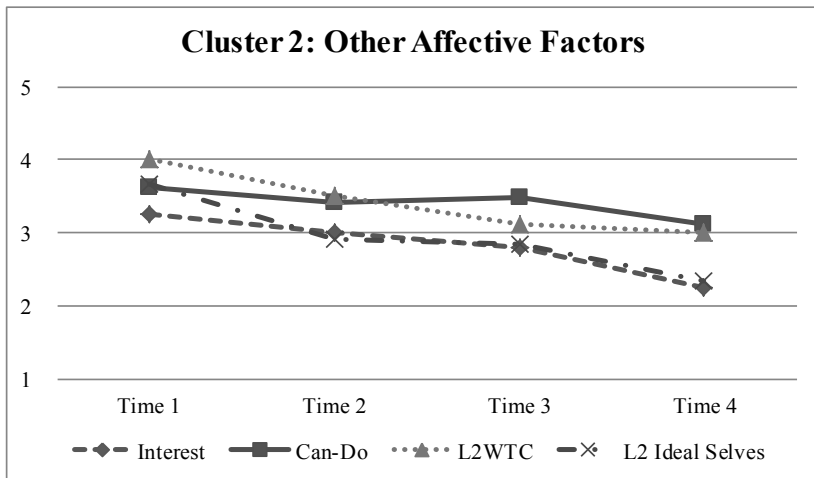
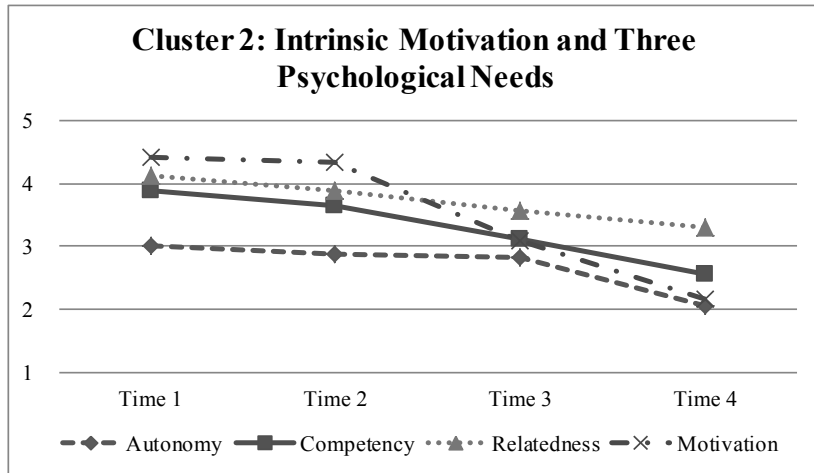


Figure 7. Cluster 2: Intrinsic Motivation and Three Psychological Needs

Figure 8. Cluster 2: Other Affective Factors

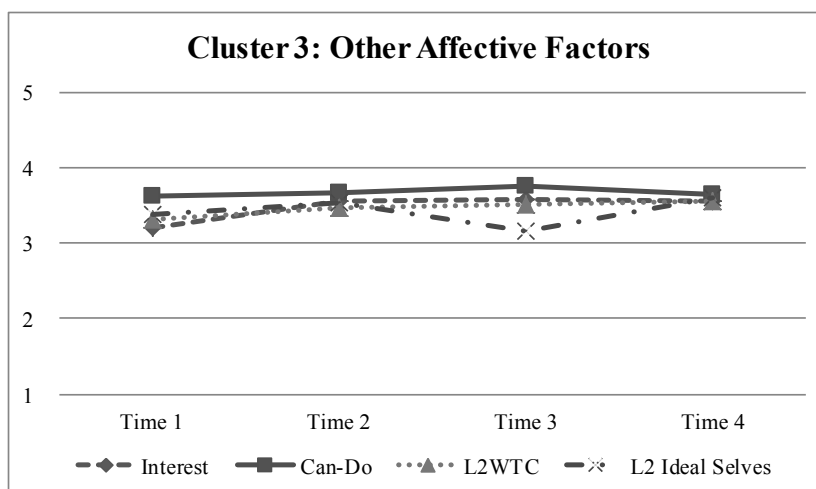
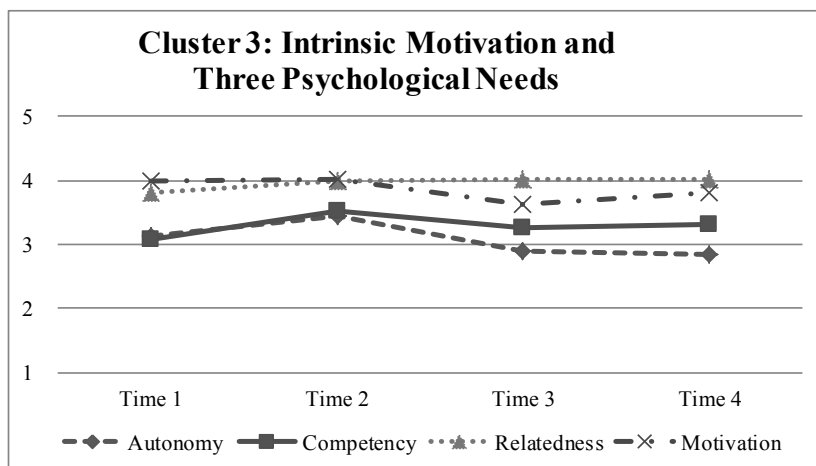


Figure 9. Cluster 3: Intrinsic Motivation and Three Psychological Needs

Figure 10. Cluster 3: Other Affective Factors

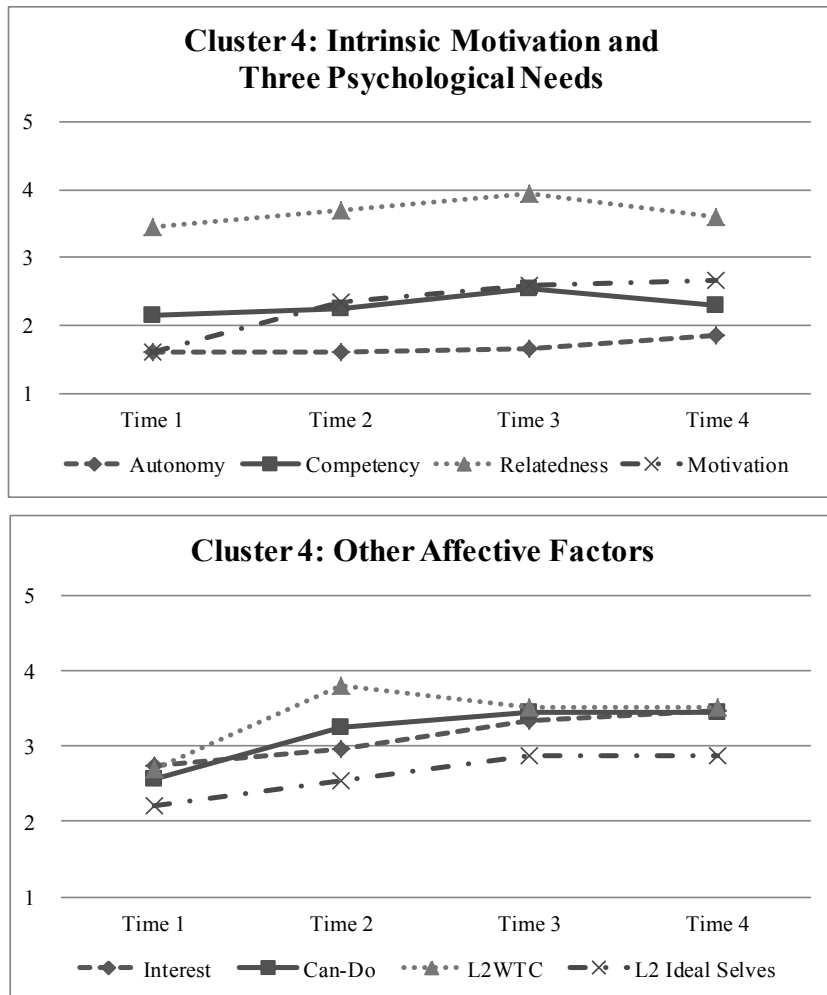


Figure 11. Cluster 4: Intrinsic Motivation and Three Psychological Needs

Figure 12. Cluster 4: Other Affective Factors

Repeated measurements of analysis of variance (ANOVA) were conducted and main effect within subject was observed in listening and intrinsic motivation (see Table 6). Factors concerning between subject, listening, autonomy, competency, intrinsic motivation, interest in languages and culture, Can-Do, and L2 ideal selves showed statistical differences among the four clusters (see Table 7).

Table 6. Mixed Design of Repeated Measurement of ANOVA: Within Subject

Within Subject (Main Effect)						
Factor	Type III Sum of Squares	<i>df</i>	Mean Square	<i>F</i>	<i>p</i>	η^2
Listening	126.11	1, 87	67.45	22.09	0.00	0.42
Autonomy	2.25	3, 90	0.75	3.07	0.03	0.09
Competency	1.51	3, 90	0.50	1.49	0.22	0.05
Relatedness	1.64	3, 90	0.55	3.07	0.03	0.09
Intrinsic Motivation	5.46	3, 90	1.82	4.82	0.00	0.14
Interest	0.60	3, 90	0.20	0.44	0.72	0.01
Can-Do	0.60	3, 90	0.20	0.70	0.55	0.02
L2WTC	1.59	3, 90	0.53	0.83	0.48	0.03
L2 Ideal Selves	0.62	3, 90	0.21	0.52	0.67	0.02

Table 7. Mixed Design of Repeated Measurement of ANOVA: Between Subject

Between Subject						
Factors	Type III Sum of Squares	<i>df</i>	Mean Square	<i>F</i>	<i>p</i>	η^2
Listening	51.38	3, 30	17.13	6.39	0.00	0.39
Autonomy	58.30	3, 30	19.43	54.71	0.00	0.85
Competency	38.85	3, 30	12.95	18.74	0.00	0.65
Relatedness	5.72	3, 30	1.91	1.71	0.19	0.15
Intrinsic Motivation	58.87	3, 30	19.62	32.75	0.00	0.77
Interest	27.15	3, 30	9.05	10.13	0.00	0.50
Can-Do	16.94	3, 30	5.65	9.05	0.00	0.48
L2WTC	5.93	3, 30	1.98	1.19	0.33	0.11
L2 Ideal Selve	23.47	3, 30	7.82	5.73	0.00	0.36

VII. RESULTS OF THE QUALITATIVE STUDY

To investigate the third research question, which was concerned with changes in classroom dynamics, observation notes and teachers' interviews were closely examined with a view to identifying aspects of these changes. Also, the flow of the lessons and the changes in dynamics in classroom interactions between teachers and students were identified and closely examined.

Observation notes of classroom lessons were made in every lesson, including impressions of the classroom atmosphere created by students and teachers, and teachers' and students' behavioral reactions, which were transcribed into a written format for analysis in a spread sheet. The observation notes included reflections on lessons and teaching materials and these were also closely examined in order to identify what was happening in the classroom. The transcriptions of observation notes were open-coded based on the use of Grounded Theory Approach, referring to Cobin and Strauss (2008), and similar ideas were abstracted to axial coding. Six main classroom interactions featuring the use of assistance by the ALT were identified, examples of which are given

below in Table 8.

Table 8. Axial Coding and Examples of Open-coding

Axial Coding	Examples of Open Coding
Teachers' Use of Gesture	"teachers' use of gesture with 'OK'", "Good and/or very good with thumbs up gesture", "a teacher uses gestures for 'what do you see' with her OK gesture on her eyes", "gesture use for facial and emotional expressions (e.g., hungry, angry, happy, sad, ..)
Teachers' Support in the Use of Japanese	"a teacher uses Japanese to explain English words and/or sentences", "a teacher uses Japanese to explain teachers' instruction of activities and/or games", "a teacher uses Japanese when students have trouble understanding what ALT was saying in the class".
Teachers' Emotional Support	"teachers praise students by saying "good job" and/or "very good", "teachers smile at students", "a teacher patted students' heads", "teachers give students some stamps and/or stickers".
Class-focused Support: Modeling-repetition	"ALT modeled sentences and students repeated after her", "ALT models words and students repeated after her".
Group-focused Support	"teachers look around the class to help group work", "teachers help students in a group to do a group presentation activity", "volunteers help students to pronounce words and/or sentences".
Individual-focused Support	"teachers help an individual student to say words and/or sentences in English", "a teacher helps a student in order to correct mispronunciation of words and/or sentences", "teachers help a student in order to enhance the student's participation in the activities".

1. Teachers' Use of Gesture (May 8, 2012)

"The ALT was trying to use gestures a lot. Especially when she tries to teach new words and sentences to students, she often uses gestures. For example, when she tries to teach 'expressions' to students including 'I'm hungry and I'm angry', she puts her hands on her stomach and/or made her angry face and puts her hand out stiffly. Then students imitated her when they tried to say 'I'm hungry' and/or 'I'm angry'."

When the ALT introduced new words and/or sentences, and when students were unable to understand these words and sentences, she tried to use gestures to express these words and sentences to students. Her gesture use and students repetition in the use of gesture were often seen when new words and sentences were introduced and this was gradually reduced as students acquired the language.

2. Teachers' Support in the Use of Japanese (June, 5, 2012)

"Although the HRT tried to use English only, she sometimes used Japanese to explain English words and/or sentences. For example, when students did not understand the word 'play' soccer, the HRT used the Japanese "Soccer wo surutoki ha play wo kuwaemasu" (When you use the word "soccer", you need to use "play"). But she used Japanese only when students did not understand what was happening; then the HRT used Japanese for them in order to truly understand how to say the words and sentences."

The HRT recognized that students were not able to understand the word "play", so she used Japanese to explain what students did not understand. On many occasions, the HRT and the ALT avoided using Japanese to explain the new words and sentences, but made use of gestures, picture cards, and/or handwriting on the blackboard to explain. Sometimes, and only when students were unable to understand the new words and/or sentences, they would use Japanese.

3. Teachers' Emotional Support (June 12, 2012).

"The teachers, both the ALT and the HRT, often praised students by saying 'very good' and 'good job'. Whenever students were able to say the words and/or sentences in English, they praised them. In addition to praising students verbally, the teachers smiled at students, patted them on the head, and/or held them when they were having trouble in learning."

When students had done enough repetitions and the ALT saw them doing well, she always praised them by saying "Good", "Very good", and/or "Good job" together with a thumbs up gesture. Teachers often confirmed students' progress in the class and students seemed to be pleased to receive their praise. As the observation notes indicate, teachers were trying to comfort students especially when they had trouble saying the words and sentences in English. They tried not to push them but supported them with a warm smile and praise.

4. Class-Focused Support: Modeling-Repetition (June 12, 2012)

"When the ALT tries to teach new words/or sentences, she modeled them and the students repeated them after her. She quite often did this modeling-repetition, until the students were used to saying the words and/or sentences. For example, when she tried to teach 'I can read a book', firstly, she showed them a picture card and said 'read a book', then she added 'I can read a book' as a sentence, then students repeated 'I can read a book'".

On this day, the ALT was trying to introduce new sentences using "I can/ I can't" to the students as well as several other new words and sentences. When new words and/or sentences were introduced to students, the ALT said "repeat after me", modeling them, and students repeated them several times, until the ALT saw the students were comfortable enough to say these words and/or sentences.

5. Group-Focused Support (June 5, 2013)

"After having enough modeling-repetition in the class, the HRT often focused practices within

the group to do group presentation activities and/or games. Then both the ALT and the HRT tried to look around the group to see if the group was doing well in activities and/or games”.

After practicing the words and/or sentences in the class, students were often divided into groups to use and/or practice English in games and/or activities within the group. Teachers often went around the class to look into the group to check that they were able to do the games and/or activities as a group.

6. Individual-Focused Support (June, 5, 2012)

“The ALT and HRT tried to focus on helping individual students to say the words and sentences when he/she had trouble saying something in English. For example, when the student A (Kazuma: pseudonymous) had trouble remembering ‘piano’, the ALT interacted with him by saying ‘So, Kazuma, what is it?’. Kazuma says ‘Organ’. ALT says ‘not Organ... pi..’. ‘Piano!’ Kazuma said happily. By giving him a hint, the student was able to say the words and/or sentences in English.”

In the class, teachers’ support with individual students was often observed. After practicing the words and/or sentences by modeling and repetition, students were divided into groups and/or picked out to use these words and/or sentences. On many occasions, students were able to say the words and/or sentences correctly. However, when they could not, the ALT helped individual students to be able to say the words and/or sentences.

VIII. DISCUSSION

The current study has yielded a number of findings on listening abilities as well as affective factors including intrinsic motivation, the three psychological needs of motivation (perceived autonomy, perceived competency and perceived relatedness), interest in languages and culture, Can-Do, L2WTC and L2 ideal selves over the period of two years. Quantitative results showed changes in students’ tendencies overall in listening abilities and affective factors, and also qualitative data showed teachers’ perspectives on students’ changes in linguistic and affective factors.

Quantitatively, the present study recorded an increase in listening abilities over the course of time. This increase was particularly apparent during the first grade, although listening abilities continued to show an increase throughout the course. The study result is meaningful, as there are only a few reports concerning listening and speaking among children learning English in a Japanese context. This lack of studies concerning linguistic abilities is partially due to the focus of “foreign language activities” stipulated by MEXT. “Foreign language activities” are supposed to focus on students’ affect, aiming to develop a “positive attitude toward English” and “to deepen understanding of other countries”. However, it would be beneficial to have data on the extent to which students’ linguistic abilities, including listening ability, are affected by “foreign language activities”, as “foreign language activities” will be an official subject in the year 2020 for the 5th and 6th grades (MEXT, 2014). In this study, the data showed that students’ listening abilities (based on a listening test) showed an increase in February 2013, half a year after initial testing. In the test, as

the questionnaire was carefully organized in consideration of the students' levels of understanding, most students showed high scores and growth in learning, which might have led to an increase in students' competency in learning as indicated in the quantitative results.

In the study, quantitatively, affective factors including intrinsic motivation, the three psychological needs of motivation (perceived autonomy, perceived competency, perceived relatedness), interest in language and culture, Can-Do, L2WTC and L2 ideal selves were also measured to identify students' changes in a longitudinal manner. Overall tendencies showed that most of the factors remained stable throughout the course, except perceived autonomy and intrinsic motivation. Throughout the course, perceived relatedness was the highest factor among all, and it perhaps is because students in the class were friendly to each other from the beginning as well as the relationship between teachers and students remaining good for 2 years. As an observer myself for the first year, the classroom was well controlled by teachers and the relationship between the HRT, ALT and volunteers and students was good and a warm and comfortable classroom atmosphere was created. Can-Do was the second highest factor, showing a slight increase in February 2013 and July 2013 (during the fifth and the sixth grades respectively); this level was retained through February 2014.

In order to identify individual differences, students were clustered to see underlying tendencies in listening ability, intrinsic motivation, the three psychological needs of motivation, interest in languages and cultures, Can-Do, L2WTC as well as L2 ideal selves, enabling a division into four groups. All four groups showed different patterns in listening, motivation and other affective factors over the course of time. The study results indicated that students in Cluster 1 showed the highest scores in listening and affect among the four clusters. Listening ability was maintained throughout the course, while motivation and other affective factors seemed to have been maintained, or showed decreasing tendencies throughout the course. Students in Cluster 2 scored low on listening and high on motivation and affect but revealed a sharp increase in listening over the course of time, while motivation and other affective factors revealed decreasing tendencies throughout the course. Cluster 3, involving nearly half the students in the class, showed middling tendencies in listening, motivation and other affective factors. Listening results were the second highest among the four clusters. Autonomy and competency seemed to have declined throughout the course, but the rest of the motivational and affective factors seemed to have retained their levels over the course of time. Cluster 4 revealed middle range scores on listening and low scores on affect, but motivation and other affective factors showed an increase throughout the course. These results indicated that there are many different underlying learner tendencies in the language class. As students have different individual characteristics in language learning, practitioners need to be conscious about how they can bring out students' listening abilities as well as enhancing students' motivation and affect throughout the course.

In order to see what was happening in the foreign language classroom from a qualitative point of view, the observation notes were closely analyzed. Regarding the changing dynamics of the language classroom, the notes indicated that changes had occurred in teacher-student interactional

patterns throughout the course. This included teachers' use of support with gestures and Japanese, and the use of support focusing on the class as a whole, groups and individual students. The focus of teachers' support in lessons from day to day and within each lesson tended to vary; for example, they might use modeling and repetition at the beginning of the lessons, focusing on the whole class; later, the focus of their assistance was changed to groups and individuals to allow them to be able to perform their activities and games. Also, at the beginning of the lessons, the ALT often used gestures in order to elicit student utterances, and the use of Japanese was sometimes observed when students were unable to say the words and sentences. By assisting students in this manner, students seemed to have developed and were able to use language to say what they wanted. Such processes were observed in every lesson, and throughout the course, and as students received sufficient assistance from teachers, this may have enhanced their listening abilities as well as motivation and other affective factors. Similar patterns were identified in the previous study (Nishida, 2013), and if these processes are consistent in the classroom where students' motivation and affect might be enhanced, further detailed analysis is needed, as it could benefit teaching practice. In this study, quantitative findings show an increase in students' motivation, affect and listening abilities: this is perhaps because of teachers' assistance in students' learning, as seen in the qualitative data. In each lesson, as well as the project-type learning, students were carefully assisted by the teachers. Teachers watched the class carefully to see which individual students were having trouble and needed help. As students were provided with assistance from teachers for every aspect of their foreign language learning, this might have increased their listening abilities as well as motivation and affect in language learning.

IX. CONCLUSION

In this paper, a year-long analysis of listening ability and affective factors was conducted to see the changes in students over the course of time using quantitative and qualitative data. The study identified the dynamic changes in students' abilities in listening and affect through teachers' use of language and emotional support. As the study identifies changes in students' learning processes, emphasizing the importance of teachers' use of support and suggests this can be one of the instrumental methods in improving both motivational factors and linguistic ability, it is hoped that the study results will provide both stimulation and encouragement for those involved in teaching languages to children.

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Gaps and Similarities between Medical Teachers' Expectations and Students' Self-assessed Needs for English

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ABSTRACT

In order to clarify the goal of medical English education, this study: 1) developed Can-Do Statements for English for Medical Purposes (EMP) and English for General Purposes (EGP), and 2) conducted questionnaire surveys to articulate students' needs and self-assessed abilities for EMP and general English proficiency, as well as teachers' expectations for EMP and EGP. According to our research, receptive skills, especially reading, were recognized as the most necessary by both students and medical teachers, whereas differences of opinion between them were found in such areas as perceived English needs for interactive situations. Among reading skills, abstract reading was the only skill that the teachers and the students had very different opinions about. Further, this study revealed medical teachers' expectations for the students' general English proficiency level. Analyzing the responses to the questionnaires based on the *TOEIC Can-Do Guide*, we found that students need a minimum score of 460 (230 each for Listening and Reading), with an ideal score of 860 (430 each for Listening and Reading) on the scale of TOEIC. These findings exert a beneficial impact on medical English education.

Keywords: English for Medical Purposes (EMP), needs, Can-Do Statements, self-assessed abilities

I. INTRODUCTION

The aim of this paper is to present a needs analysis result of medical English education by contrasting students' and medical teachers' needs from a multi-faceted point of view. It has been claimed that English for Specific Purposes (ESP) courses, including EMP, should be based on the needs analysis of the discourse community in question to determine teaching materials, methods, and curriculum (e.g., Dudley-Evans & St John, 1998; Miyama, 2000). Our needs analysis focuses

on the identification of the gaps (and similarities) between students' and medical teachers' needs, thereby providing a clue to the development of a better EMP course.

Dudley-Evans and St John (1998) mentions the following eight aspects of needs analysis:

- A. Professional information about the learners: the tasks and activities the learners are/will be using English for—target situation analysis and objective needs
- B. Personal information about the learners: factors that may affect the way they learn, such as previous learning experiences, cultural information, reasons for attending the course and expectations of it, attitude to English—wants, means, subjective needs
- C. English language information about the learners: what their current skills and language use are—present situation analysis
- D. The learners' lacks: the gap between (C) and (A)—lacks
- E. Language learning information: effective ways of learning the skills and language identified as lacking in (D)—learning needs
- F. Professional communication information related to (A): knowledge of how language and skills are used in the target situation—linguistic analysis, discourse analysis, genre analysis
- G. What is wanted from the course
- H. Information about the environment in which the course will be run—means analysis (p. 125, slightly modified)

Most of the previous analyses of needs for EMP, as far as the authors can see, have focused on (A): Hishida and Ohki (2000), for example, conducted an alumni survey of a total of 133 doctors who had 9-, 16-, or 19-year careers after graduation from a Japanese medical school, in order to investigate the actual situations where English is used in their practice. Although they also asked them what, based on their professional experience, should be included in undergraduate EMP courses, their answers are clearly not about their present needs. In this sense, Hishida and Ohki (2000) does not include a present situation analysis.

The importance of property (C) for the development of a better EMP course is clear: the proper curriculum of any language courses should fill the “gap” between the current skills of learners and the target skills. Yokoyama, Yamauchi, Nakano, Yasunami, and Kawakita (2005) is another needs analysis study, which contains information about the gap in needs between students and medical teachers. They conducted a survey of 300 undergraduates and 168 medical teachers in the form of a questionnaire and found that although the students and medical teachers shared an understanding that “English is necessary for a doctor,” the teachers felt more strongly that English is necessary than the students did. Furthermore, the students felt strongly that medical English is needed for comprehensive reading of articles, conversation, and making a presentation, whereas the teachers felt strongly that English is needed for conversation, presentation, and comprehensive reading of articles. They also reported that 67 % of the teachers feel that their students' level of

English is not sufficient to read textbook English, make an oral presentation, and comprehend spoken English.

Although Yokoyama et al.'s (2005) generalizations about the needs of both students and medical teachers and the gaps between them are correct, we can point out at least two problems. First, the study lacks analysis of the present situation: the authors do not provide information about the students' present English proficiency. Furthermore, we do not believe that their study successfully identified the levels of English proficiency that teachers think are necessary. They included one question for the medical teachers asking them what levels of English proficiency are necessary for their students; for reference, they used the levels provided by the existing standardized tests, such as STEP Eiken, TOEIC, and TOEFL. The problem is, however, that it is not probable that they provided the medical teachers with links between the performances on these standardized tests and abilities to perform a variety of everyday and medical language tasks in English; thus, the medical teachers may not have known what these proficiency levels really indicate.

The second problem with Yokoyama et al. (2005) is that their questionnaire items may be too general in some cases. For example, they asked the students to answer a question about what English skills they want to improve in college by choosing among skills in the areas of reading, speaking, listening, and writing. In actual situations, however, the needs for reading papers and reading abstracts could be different. To fully understand the needs that EMP education must fulfill, we need to examine the relevant types of situations in more detail.

Naruenatwatana and Vijchulata's (2001) study in Thailand is a good first step in solving these problems. Their question items are more concrete than those in other studies: they asked 297 students and 10 medical teachers about the need for "reading medical textbooks," "reading professional journals," "reading medical reports," and so on. The respondents were asked to rank the needs according to a 5-point scale. They used the same question items for both the students and the teachers so that they could see the differences/similarities between the two groups. With these detailed situation/scene setting skill items, they succeeded in identifying more EMP needs in more detail. However, they asked only 10 medical teachers, which would not be enough for a generalization about the needs of all medical teachers.

None of the studies seems to elucidate the gaps in objective English proficiency levels. We believe that information about both the gaps in subjective needs and objective needs is necessary to develop a proper curriculum. Incorporating the method adopted by Naruenatwatana and Vijchulata (2001), we utilized two sets of questionnaires: one is to ask about general English skills and the other to ask about English skills specific to medical situations. The items for general English are set to be compatible with an existing standardized English proficiency test, TOEIC, so that we can compare the needs of medical teachers and students' present English proficiency.

In sum, the present study utilized a new method to identify the gaps between medical students' English skill levels and the levels perceived as necessary by medical teachers; both the gaps in English skills specific to medical situations and the gaps in general English skills were

investigated.

II. METHOD

In order to comprehensively grasp the needs of medical English education, our research focused on such concerns as skill- and situation-specific needs, differences in needs within and among groups (of students and teachers), and correlations between students' proficiency levels and their and medical teachers' needs. To achieve this purpose, we conducted a total survey in relation to students' needs for EMP and EGP, teachers' needs for EMP and EGP, students' self-assessment about their English proficiency ("Can-Do"), and the objective level of their English proficiency (as indicated by TOEIC-IP scores). We thus worked on the following five tasks ("T" indicates task):

T1: Development of Can-Do Statements for EMP

T2: Development of Can-Do Statements for EGP

T3: Survey on students' needs and self-assessed abilities for EMP and EGP

T4: Survey on teachers' needs for EMP and EGP

T5: Measurement of the level of English proficiency of students

1. Participants

1.1 Students

Four hundred thirty-four students covering first to fourth years of a private medical college (all Japanese) participated in our survey. The students fell into three groups according to their level of English proficiency;¹ the number of students in each of the three groups is shown in Table 1.

Table 1. Classification of Students According to Their English Proficiency Level

Proficiency Level	L	M	H	total
Corresponding TOEIC-IP Score	<445	450–595	600–	
Students	162	173	100	435

1.2 Teachers

Ninety-one medical teachers from two private medical colleges (all Japanese) participated in our survey. According to what we got from the preliminary questions in the survey, the teachers' attributes are shown in Table 2:

Gaps and Similarities between Medical Teachers' Expectations and
Students' Self-assessed Needs for English

Table 2. Attributes of Teachers

Medical License Possession	Affiliation	Years of Experience						Total
		> 5	6–10	11–20	21–30	31 <	Other	
No	Clinical Medicine						1	1
	Basic Medicine						16	16
	General Education						3	3
	Subtotal						20	20
Yes	Clinical Medicine	13	4	13	16	4		50
	Basic Medicine	0	1	4	4	6		15
	General Education	0	1	0	0	1		2
	No response	0	0	1	2	0		3
	Subtotal	13	6	18	22	11		70
No response							1	1
Total	Clinical Medicine	13	4	13	16	4	1	51
	Basic Medicine	0	1	4	4	6	16	31
	General Education	0	1	0	0	1	3	5
	No response	0	0	1	2	0	1	4
	Total	13	6	18	22	11	21	91

2. Materials

2.1 Can-Do Statements for EMP (T1)

For a needs and self-assessment (“Can-Do”) analysis of medical English education, we developed Can-Do Statements for EMP by adapting the Can-Do Statements published as the *TOEIC Can-Do Guide* (Chauncey Group International, 2000; Powers, Kim, & Weng, 2008) by Educational Testing Service (ETS) to our design. The Can-Do statements list by ETS contains a total of 75 items under five skills—Listening, Reading, Interactive Skills, Writing, and Speaking. The *Guide* estimates the degree to which a score holder can perform particular tasks in English based on the range that holder’s score falls into. Table 3 is an example showing one task included in the Listening category.

Table 3. Task Performance Based on Score Range Categories

In Standard English, I can:	5–100	105–225	230–350	355–425	430–495
Understand explanations about how to perform a routine task related to my job	×	×	△	△	○

In Table 3, “×,” “△,” and “○” under each score range show to what degree a score holder of the Listening Comprehension section can perform the given task, meaning “cannot do,” “can do

with difficulty,” and “can do” respectively. Thus, those whose score is within the range of 5–100 or 105–225 “cannot” understand explanations about how to perform a routine task related to their job, while those with the score between 230–350 or 355–425 “can do it with difficulty.”

We first applied this Can-Do Statements questionnaire by ETS to medical and clinical situations, and, through the pilot survey conducted with 68 students and 15 teachers, reorganized it into a new questionnaire consisting of a total of 50 items under four skills (11 for Listening, 14 for Reading, nine for Writing, and 16 for Speaking) (see Appendix and Tanaka, Nakamura, & Nakagawa, 2013). Though not displayed on the questionnaire, each item can also be sorted into any of six “task-situations”—“Healthcare workers” (interacting with healthcare workers), “Patients” (interacting with patients), “Research/Conferences” (interacting in research and at academic conferences), “Words” (using medical vocabulary), “Classes” (using English in class), and “General/News” (using English for general purposes including such media literacy as listening to news reports) so that they could be analyzed in terms of both skill and situation factors. What characterizes this Can-Do Statement list is that it corresponds to quite detailed needs based on clinical and educational situations for medicine, and also covers a wide range of proficiency levels from using basic vocabulary to professional interaction.

2.2 Can-Do Statements for EGP (T2)

For our survey on needs for EGP, we translated Can-Do Statements by ETS into Japanese and sorted its 75 items into two groups based on skill—GRWI (Reading, Writing, and Interactive Skills, totaling 45 items) and GLS (Listening and Speaking, totaling 30). As for the EGP survey for teachers (for **T4**), to save them the time and effort required to answer all of the items and to ensure that we would obtain their responses without fail, we divided them into five groups, each of which was asked to answer an inventory that included 15 statements; each inventory consisted of three (out of the total of 15) tasks from each of the five skill groups.

2.3 The form of the questionnaire (for T3 and T4)

In order to collect data regarding students’ needs and self-assessed abilities (**T3**), the Can-Do Statements for EMP and Can-Do Statements for EGP were designed such that each respondent had to answer two types of questions (A: needs; B: self-assessed abilities) on a five-point scale. The following directions are provided in the questionnaire (note that the actually distributed questionnaire is printed in Japanese):

Gaps and Similarities between Medical Teachers' Expectations and Students' Self-assessed Needs for English

A. Regarding the following items, to what extent do you think it necessary for yourself to acquire each at the point of graduation (at the start of residency)?

B. Regarding the same items, to what extent do you consider yourself proficient in each at present?

	(I think) not necessary	(I think) rather not necessary	Can't say (Yes and No)	(I think) rather necessary	(I think) necessary
Mark sheet answer	a	b	c	d	e
Value (not displayed)	1	2	3	4	5

For the survey for teachers (**T4**), though, the same questionnaires as those for students were used, but the direction given was adjusted as follows:

Regarding the following items, to what extent do you think it necessary for undergraduates to acquire each at the point of graduation (at the start of residency)?

3. Procedure

A series of surveys were conducted in 2012 and 2013. Four hundred thirty-four students responded to the printed version of the Can-Do Statements for EMP for our investigation on students' needs and self-assessed abilities for EMP (**T3**). They also took either TOEIC-IP or CASEC (an online English assessment test whose score is closely correlated with that of TOEIC) so that we could have the same amount of corresponding data on the level of English proficiency (**T5**). The scores were divided into three proficiency groups in reference to the "indication of score" published by ETS (see 1.1).

As for students' needs and self-assessed abilities for EGP, we received 54 responses to GRWI and 50 to GLS from first-year students (**T3**).

Ninety-one teachers responded to our survey on teachers' needs by the Can-Do Statements for EMP and Can-Do Statements for EGP conducted by means of printed questionnaires and Survey Monkey (a web survey service) (**T4**).

III. RESULTS

1. Needs and self-assessed abilities for medical English

The tables below summarize the results of the questionnaires for medical English. Table 4 shows that the needs of the students were slightly higher (3.9) than those of the medical teachers (3.7), but both groups' needs for the four skills look similar. They both had stronger needs for receptive skills, such as listening and reading, than productive skills, such as speaking and writing. Table 5 shows some differences in needs by situation: needs in the area of English for communicating with patients and healthcare workers were rated slightly higher by the students

(3.9 and 3.8 respectively) than by the teachers (3.6 and 3.5 respectively). At the same time, the students reported they are better at receptive skills than at productive skills. Overall, judging by the needs and skills data, it can be said that the more necessary a skill is for the students, the better they are at it.

Table 4. Needs and Self-assessed Abilities in Total for the Four Skills

	Total	Listening	Reading	Speaking	Writing
Student needs	3.9	3.9	4.0	3.7	3.7
Teacher needs	3.7	3.8	4.1	3.5	3.5
Self-assessed abilities (students)	1.8	1.9	2.1	1.7	1.6

Table 5. Needs and Self-assessed Abilities by Situation

	General/ Words	News	Patients	Healthcare workers	Research/ Conferences	Classes
Student needs	4.0	3.9	3.9	3.8	3.7	3.8
Teacher needs	4.0	3.9	3.6	3.5	3.6	3.7
Self-assessed abilities (students)	2.0	2.1	1.8	1.7	1.7	2.0

Table 6 and Table 7 show the values of needs minus self-assessed abilities for each skill and situation. It can be said that the larger the value of needs for a skill or a situation is, the higher the actual necessity of teaching it is since this value reflects the gap between the needs for English skills and students' present English ability. Table 6 shows that the teachers felt strongly that reading should be taught more, but students thought that listening, speaking, and writing are more necessary. In line with the results shown in Table 5, Table 7 shows that the students felt more strongly than the teachers that English for interaction with patients and healthcare workers should be taught more.

Table 6. Student and Teacher Needs Minus Self-assessed Abilities (Four Skills)

	Listening	Reading	Speaking	Writing
Student needs – Student Can-Dos	2.0	1.9	2.1	2.1
Teacher needs – Student Can-Dos	1.8	2.0	1.8	1.9

Table 7. Student and Teacher Needs Minus Self-assessed Abilities (Situations)

	General/ Words	News Patients	Healthcare workers	Research/ Conferences	Classes	
Student needs –						
Student self-assessed abilities	2.0	1.8	2.1	2.1	2.0	1.8
Teacher needs –						
Student self-assessed abilities	2.0	1.7	1.8	1.9	1.9	1.7

The values in Table 8 (and later in this section) are deviation values that were calculated within each group. To know for which skill or situation a group feels more needs than other groups, it is necessary to standardize each group's score since raw average scores were different among the groups. To compare the groups' needs easily, deviations were adopted here.

Table 8 and Table 9 show the needs by student or teacher group and by skill or situation. First, it was found that student proficiency did not affect their needs for specific skills or situations very much except for the situation of interacting with patients. The students with middle or high proficiency felt the necessity to communicate with patients, although low proficiency students did not. Fujieda, Sakata, Tanaka, Nakamura, and Suzuki (2013) shows that medical teachers with less experience tend to respond that communicating with patients in English is important. The students in the present study, except for the low proficiency ones, seem to have the same opinion.

Second, regarding medical teacher needs, the younger teachers considered listening and communicating with patients a more necessary skill than the older teachers did. Plus, it was notable that experienced teachers felt more needs for teaching writing. It might also be a natural outcome that teachers of clinical medicine felt moderate needs for the use of English with patients.

Third, comparing the student needs and the needs of different teacher groups, it was found that the student needs are similar to those of the younger teachers and teachers of clinical medicine. When the teachers were grouped by experience, the correlation coefficient with the student needs of the teachers with up to five-year experience was the highest (.91), whereas that of the teachers with over 30-year experience was the lowest (.66). The other groups divided by their length of experience clearly showed the same tendency: the younger teachers' needs were closer to the students' needs. It was also interesting that the students' needs were closer to those of the teachers of clinical medicine. The correlation coefficient between them was .92, whereas the coefficient of the teachers of basic medicine was .68 and the coefficient of the teachers of general education was .78.

Table 8. Needs by Student or Teacher Group and Skill

	Listening	Reading	Speaking	Writing
Students with TOEIC-IP -445	56	61	42	41
Students with TOEIC-IP 450–595	57	60	45	38
Students with TOEIC-IP 600-	55	61	45	39
Teachers with up to 5 years' experience	59	58	40	43
Teachers with 6–10 years' experience	57	60	42	41
Teachers with 11–20 years' experience	50	64	42	44
Teachers with 21–30 years' experience	51	63	45	40
Teachers with over 30 years' experience	46	63	40	51
Teachers of clinical medicine	54	62	43	41
Teachers of basic medicine	50	63	38	49
Teachers of general education	51	63	39	47

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Table 9. Needs by Student or Teacher Group and Situation

	General/ Words	News	Patients	Healthcare workers	Research/ Conferences	Classes
Students with TOEIC-IP -445	65	57	47	41	39	50
Students with TOEIC-IP 450–595	64	54	58	44	38	43 ²
Students with TOEIC-IP 600–	63	55	55	41	35	51
Teachers with up to 5 years' experience	64	60	51	45	41	39
Teachers with 6–10 years' experience	63	59	51	36	47	44
Teachers with 11–20 years' experience	61	63	44	39	43	51
Teachers with 21–30 years' experience	65	49	46	37	44	58
Teachers with over 30 years' experience	62	61	41	43	40	52
Teachers of clinical medicine	65	56	50	38	41	49
Teachers of basic medicine	64	57	39	42	44	54
Teachers of general education	63	62	41	44	42	48

Table 10 shows that spoken uses of English may be limited to certain situations. The teacher needs show especially clearly that they may have few opportunities for communicating in English either with healthcare workers or with medical doctors at research conferences.

Table 10. Speaking Needs by Situation

	Words	Patients	Healthcare workers	Research/Conferences	Classes
Student needs	50	51	42	38	41
Teacher needs	55	46	35	37	41

Table 11 shows that medical doctors may not have many opportunities to write papers in English. Together with the results shown in Table 12, it can be said that to reach the minimum goal, students have to focus on their receptive skills first.

Table 11. Writing Needs by Situation

	Words	Healthcare workers	Research/ Conferences
Student needs	50	38	33
Teacher needs	53	40	42

Table 12 shows that the students and teachers have different opinions towards the needs of English for medical records. At the same time, the opinions also vary according to the teachers' experience. It may reflect a recent trend in which doctors have to make the records more understandable to patients.

Table 12. Item Scores:
“Understand the Abbreviations and Acronyms of Medical Terms Written in the Medical Record”

Students	Teachers	Teachers (years of experience)				
	(whole)	-5	6–10	11–20	21–30	31–
62	53	55	47	51	49	60

Table 13 shows that the students and teachers have very different opinions towards the needs of English for reading abstracts of papers. This difference may have been caused by the students' incomplete knowledge of medical practice.

Table 13. Item Scores:
“Read and Understand an Abstract”

Students	Teachers
53	66

2. Degree of general English proficiency that medical teachers expect from medical students

This study utilized ETS's Can-Do Statements to investigate the needs of medical teachers for their students' general English proficiency (for the details of the procedure, see 2.2). The following tables show the Can-Do Statements whose teacher needs scores are higher than four in our questionnaire, arranged in the descending order of the needs scores.

**Table 14. Needs of Medical Teachers for English Tasks Relating to TOEIC-IP Reading
Comprehension**

Statements	Needs of Med- teachers	TOEIC Reading Score				
		5-100	105-225	230-350	355-425	430-495
read and understand simple, step-by-step instructions	4.47	×	△	△	○	○
read office memoranda written to me in which the writer has used simple words or sentences	4.33	×	△	△	○	○
read, on storefronts, the type of store or services provided (e.g., "dry cleaning," "book store")	4.29	△	△	○	○	○
read and understand traffic signs	4.22	△	△	△	○	○
read and understand a train or bus schedule	4.18	△	△	△	○	○
write a postcard to a friend describing what I have been doing on my vacation	4.12	×	△	△	○	○
find information that I need in a telephone directory	4.06	×	△	△	△	○
fill out an application form for a class at night school	4.06	×	×	△	△	○
write a one- or two-sentence thank-you note for a gift a friend sent to me	4.00	×	△	△	○	○

**Table 15. Needs of Medical Teachers for English Tasks Relating to TOEIC-IP Listening
Comprehension**

Statements	Needs of Med- teachers	TOEIC Listening Score				
		5-100	105-225	230-350	355-425	430-495
understand simple questions in social situations such as "How are you?"	4.59	△	△	△	○	○
introduce myself in social situations and use appropriate greeting and leave-taking expressions	4.53	×	△	△	△	○
understand someone speaking slowly and deliberately, who is giving me directions on how to walk to a nearby location	4.47	△	△	△	○	○
state simple biographical information about myself (e.g., place of birth, composition of family)	4.29	×	△	△	△	○
order food at a restaurant	4.17	×	△	△	△	△
understand a person's name when she or he gives it to me over the telephone	4.16	×	△	△	△	△
understand someone who is speaking slowly and deliberately about his or her hobbies, interests, and plans for the weekend	4.11	×	×	△	△	○
understand a co-worker discussing a simple problem that arose at work	4.00	×	×	△	△	△

These tables indicate whether examinees who obtained a certain TOEIC-IP score of Listening or Reading Comprehension "can do" or "cannot do" each of the given English tasks. As indicated in the tables, to at least perform all the tasks expected by the medical teachers even with

difficulty, all medical students must obtain a score higher than 230 in each TOEIC-IP section. Further, to perform these tasks easily, they must have high levels of English proficiency (430 in each section or higher because several listed tasks such as “order food at a restaurant,” “understand a person’s name when she or he gives it to me over the telephone,” and “understand a co-worker discussing a simple problem that arose at work,” are accomplished with difficulty even by advanced students).

On the other hand, most of the students who took a TOEIC-IP exam in our survey did not meet the teachers’ expectations for English proficiency. Fourth year students’ average score of TOEIC-IP Listening Comprehension was 240.6. Overall, a significant majority of senior students (more than 90%) received a score lower than 430. Further, two-fifths of the students (41%) obtained a score lower than 230; they cannot perform some of the English tasks expected by the medical teachers.

A similar pattern was found in TOEIC-IP Reading Comprehension; the average score was 214.7. Few students (less than 10%) can do all the English tasks expected by the medical teachers easily. Among the medical students, a majority (54%) obtained less than 230. These results show that slightly more than half of them cannot carry out highly expected English tasks.

IV. DISCUSSION

1. Perceived medical English needs and self-assessed abilities

In terms of skill areas, the overall observations about the needs for medical English were similar for the students and the teachers; both showed stronger needs for receptive skills than productive skills, especially reading (Table 4). It is understandable that receptive skills are more strongly needed in an EFL context, such as in Japan, as the opportunities to use productive and interactive English skills on a regular basis are limited. With English being the *de facto* lingua franca in scientific research, reading in English is a necessary skill to stay up-to-date with current medical information. The strong inclination of the teacher needs toward reading was consistent with the results of previous studies (Yokoyama et al., 2005), which called for improvements of students’ reading comprehension skills in medical English education in Japan.

High self-assessed reading ability ratings by the students probably reflect their learning experience in the past. English education in the Japanese school system tends to put emphasis on grammar and reading skill development, as the largest portion of entrance examination questions are occupied by them. It is possible that the students feel more confident about their reading ability because they think that they have had a lot of practice in reading through their English learning experiences up to college. It is notable, however, that there is still a relatively large gap between the teacher needs and student self-assessed abilities in this skill area (Table 6), suggesting even higher expectations on the side of the teachers.

In terms of communicative situations, “Words” and “General/News” categories were perceived as high-needs situations by both groups (Table 5). The fact that all descriptors in the “Words” category across all skill areas received high needs scores in both groups indicates the

importance of acquiring medical vocabulary as the foundation of medical English education. As learning medical vocabulary is one of the most taxing areas for students with non-Latin-related L1 background (Chia, Johnson, Chia, & Olive, 1999), its teaching should be started early and continued throughout the curriculum. Recent corpus-based medical word list studies can shed light on the learning and teaching of specialized vocabulary (Wang, Liang, & Ge, 2008). High scores in the "General/News" category suggest that both the teachers and the students recognize the needs of good command of English in this more accessible, less specialized area. Authentic medical news reports intended for the general public together with multimedia resources readily available online can serve as good materials that can be taught by language teachers in courses with oral/aural training components.

The students' needs in interactive situations ("Patients" and "Healthcare workers" categories) were higher than the teachers' needs. The reason can be that the students, who have no or very limited experience in actual medical practice, assumed that interacting with foreign patients and other healthcare professionals using English is somewhat commonplace in today's medical field. The teachers, on the other hand, are more familiar with the actual situations in Japanese hospitals and medical institutions, and think that such cases are relatively rare, leading to their relatively low needs scores. We should be cautious to draw conclusions, though, as the younger and clinically oriented teacher subgroup showed a similar pattern with the students' needs in a more detailed analysis of teacher needs (Sakata, Tanaka, Fujieda, Suzuki, & Nakamura, in press). Language needs can be influenced by social factors such as an increasing number of foreign patients, changes toward more patient-oriented medical practices, and increasingly available information in English online. Further investigation is necessary to see if English needs vary depending on the medical teachers' specialty and experience. The same can be said about the responses to one particular item, "Understand the abbreviations and acronyms of medical terms written in the medical record" (Table 12), as it can be a reflection of the recent proliferation of digital medical record systems and the increased tendency of diagnostic information disclosure to patients.

One area that the teachers and the students had very different opinions about was abstract reading (Table 13). Abstracts in research journals comprise a particular genre that has a distinct discourse structure. Nowadays, scientific research articles written in languages other than English are often required to be accompanied by an abstract in English, and these abstracts are likely to be digitally archived in databases for later retrieval. Reading abstracts efficiently to find relevant information is very likely to be a necessary skill for medical students. This genre of academic reading component can be a good candidate to be included in a medical English curriculum; while medical teachers can assist in selecting suitable abstracts and providing relevant background information, language teachers can help facilitate reading strategies focusing on linguistic features by drawing on growing research in genre analysis led by ESP specialists (Swales, 1990, 2004; Salager-Meyer, 1991, 1992, 1994).

2. Students' responses by general English proficiency level

The comparison of the three student proficiency groups showed that the group with the lowest proficiency rated the needs to interact with foreign patients lower than the other groups (Tables 8 and 9). Although a more detailed qualitative analysis needs to be conducted to investigate the linkage between the perceived medical English needs and general English proficiency level, it is possible that students with lower proficiency generally have lower motivation to study English. Such students tend to give lower rating for the items involving interaction with patients in English. Possible implications from this consideration for designing medical English curricula are to offer some elective courses that focus on contextualized interactive oral communication skills for more motivated students while maintaining core required courses that emphasize medical terminology and reading.

3. Expected general English proficiency

The questionnaire with TOEIC Can-Do Statements revealed the level of general English proficiency expected of students by the medical teachers. In order to be able to carry out highly rated tasks, students need to have a minimum score of 460 (230 each for Listening and Reading) with an ideal score of 860 (430 each for Listening and Reading). These are very rough figures, and TOEIC is not designed to gauge medical English proficiency; however, the responses of the medical teachers, who are familiar with the target discourse community, to a widely known English language test can give some insights to English curriculum developers and language teachers. These rough figures can be used, for example, as a guideline to assess if the medical students are ready to proceed from general to more specific English learning.

4. Limitations of the study and future directions

As the research design of the present study required the use of the same medical English questionnaires with the students and teachers to gauge the “gap” between the perceptions of the two groups, the students had to answer items that they may not be familiar or have no experience with. Thus, the students' can-do scores in particular should be interpreted carefully as they may not necessarily represent the students' actual ability. The Can-Do Statements for EMP is a newly developed tool that needs to be refined and validated with other medical populations. In order to make the list truly valuable in actual teaching contexts, each descriptor should be linked to concrete tasks that can be performed or practiced in class.

V. CONCLUSION

By administering the two types of can-do list questionnaires and TOEIC-IP test, the present study investigated: 1) the gap between medical students' and medical teachers' perceived needs for medical English use in Japan, 2) the differences in the perceived needs for medical English by three general English proficiency groups of medical students, and 3) the level of general English proficiency expected by medical teachers. While receptive skills, especially reading, were

recognized as the most necessary by both groups, some gaps were seen in such areas as perceived English needs for interactive situations and recognition for abstracts as an important genre. Further investigation suggested differences in perceived needs by teacher experience groups as well as by student proficiency groups. Although the link between general English proficiency and medical English proficiency needs to be researched in future studies, the expected general proficiency level suggested by the medical teachers can serve as a general guideline for medical students who embark on more specialized English study.

Notes

1 The cutting points here are for dividing students as evenly as possible by their relative proficiency. Therefore, they are not in line with the TOEIC proficiency criteria. The purpose of the grouping is to observe the students' differences of needs for English by their relative proficiency.

2 This value looks odd and is difficult to explain. We need to add, however, that there were only two items for this situation (Classes). There were many items student proficiency interacted with in the whole questionnaire, but the other situations have more items so individual items did not affect the outcome very much.

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Gaps and Similarities between Medical Teachers' Expectations and
Students' Self-assessed Needs for English

Appendix

Can-Do Statements for EMP (English version)

Skill	Situation	Descriptor (In English, I can ...)
L01	Word	· understand the names of body parts in everyday language when I hear them
L02	Word	· understand the names of clinical departments and specialized fields in medicine when I hear them
L03	Word	· understand the names of diseases when I hear other healthcare workers mention them
L04	Word	· understand the anatomical names of body parts mentioned by other healthcare workers
L05	Healthcare Workers	· understand the conditions of patients that other healthcare workers are discussing
L06	Patients	· understand an explanation of symptoms, medical history, and lifestyle when I listen to a patient
L07	General/News	· understand by listening the content of medical news and radio programs and medical lectures intended for general public
L08	Healthcare Workers	· understand job-related explanations and instructions given or discussed by other healthcare workers (including doctors, nurses, physical therapists, and technicians)
L09	Research/Conferences	· understand oral presentations given by other researchers and doctors at medical conferences
L10	Word	· understand the medical abbreviations and acronyms mentioned by other healthcare workers
L11	Healthcare Workers	· understand how to use medical equipment by listening to the instructions
R01	Word	· read and understand the names of diseases
R02	Word	· read and understand the names of body parts in everyday language
R03	Research/Conferences	· read and understand an abstract (a short summary of a research paper)
R04	Word	· read and understand the anatomical names of body parts
R05	Word	· read and understand the names of clinical departments and specialized fields in medicine
R06	Research/Conferences	· read and understand the general structure of a medical research paper
R07	Class	· read textbooks written in English
R08	General/News	· read and understand articles related to medicine in magazines and newspapers intended for general public
R09	Healthcare Workers	· read a medical case report and understand the case (i.e., the patient's condition)
R10	Research/Conferences	· understand research results (including statistical processes, tables, and graphs) in a medical research paper
R11	Healthcare Workers	· read and understand prescriptions
R12	General/News	· read and obtain new treatment information on the Internet
R13	Word	· understand the abbreviations and acronyms used in medical records
R14	Healthcare Workers	· read and understand medical equipment manuals
S01	Word	· pronounce the names of clinical departments and specialized fields in medicine

S02	Word	· pronounce the names of diseases
S03	Word	· pronounce the anatomical names of body parts
S04	Patients	· pronounce the names of body parts in everyday language that patients can understand
S05	Patients	· orally inform a patient about his/her appointment
S06	Patients	· greet the patient and converse smoothly
S07	Class	· give an oral presentation in a class that relies on group work and/or PBL style instruction
S08	Research/Conferences	· give an oral presentation about my own research at a conference (excluding Q & A)
S09	Research/Conferences	· orally summarize the content of a research paper in a presentation to other researchers and doctors
S10	Patients	· orally explain a condition and its treatment options to a patient
S11	Healthcare Workers	· orally instruct other healthcare workers (such as doctors, nurses, physical therapists, and technicians) to carry out an examination
S12	Research/Conferences	· orally respond to questions at a conference
S13	Research/Conferences	· orally explain the effects of a medicine to a patient
S14	Research/Conferences	· discuss specialized issues such as the condition of a patient and treatment options with other researchers and doctors
S15	Healthcare Workers	· explain the condition of a patient to other healthcare workers over the phone
S16	Healthcare Workers	· orally notify other healthcare workers (such as doctors, nurses, physical therapists, and technicians) about a patient, and give treatment instructions
W01	Word	· write the anatomical names of body parts and the names of diseases
W02	Word	· write the names of body parts using everyday language
W03	Word	· write medical abbreviations and acronyms
W04	Research/Conferences	· write the abstract of a research paper
W05	Healthcare Workers	· write emails with specialized content to other researchers and doctors
W06	Healthcare Workers	· write medical records
W07	Healthcare Workers	· write a medical referral letter to another hospital or doctor
W08	Research/Conferences	· write a medical research paper
W09	Healthcare Workers	· write prescriptions

知覚動詞 *feel* の主語省略に関する意味論的分析

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ABSTRACT

This study discusses the subject ellipsis in English, revealing that a semantic factor such as “referentiality” of the subject has a relationship with the occurrence of the subject ellipsis, in addition to the pragmatic factors. To that end, two investigations using *COHA* (*Corpus of Historical American English*) were conducted. The first one is to investigate the change of grammatical patterns with the verb *feel* from the early 1800s to 2000s. The second one is to find grammatical patterns where the subject ellipsis frequently occurs. As a result, the former investigation shows that the patterns have chronologically shifted from sentences with SUBJECT-VERB-OBJECT to those with SUBJECT-VERB-COMPLEMENT. In addition, the highly subjectivized patterns where conceptualizers are not linguistically expressed (Langacker, 2011) have increased with the passage of time. The latter one shows that the subject ellipsis often occurs with the subject “*it*”, especially “Impersonal *it*” (Langacker, 2011) after recovering the unexpressed subject based on the immediate and situational context. Considering the properties of vagueness which “Impersonal *it*” has, it is possible to say that “Impersonal *it*” has less information or lower referentiality. Thus, this paper reveals that “referentiality” of the subject has one of the factors which causes the subject ellipsis.

キーワード：主語省略、主語の指示性、主体化、「非人称の *it*」、曖昧性

1. はじめに

英語は一般的に文法的な主語を必要とする言語と認識されているが、特定の文脈では主語が省略される用法も見られる (Carter & McCarthy, 2006)。たとえば (1) のように、知覚動詞を含む文では、主語省略が生じることがある。

- (1) a. “That’s a long way.” “Yeah, *feels* like it.”
b. “*Feels* good to have them on again, doesn’t it?”¹

これまでに、主語省略が生じる要因として、元の文に復元が可能であること (可復元性) (久野, 1978)、直近のコンテキストや場面のコンテキスト、会話スタイル、また定型表現との共起関係、などの語用論的な要因が考えられてきた (Carter & McCarthy, 1995)。一方、本研究では、知覚動詞 *feel*² の「構文変化」や、「主体化」の文法的、意味的变化に注目することで、主語省略は語用論的な要因だけでなく、主語の指示性 (referentiality) の低さ

が関わることを意味論的な立場から明らかにする。本稿では、指示性³ に関しては「実在物に境界線があり個別化して存在する場合、その実在物は指示性がある」という Payne (2011) の定義を採用する。

2. 先行研究 — 主語省略に関する語用論的分析と問題点

主語省略が生じる要因に関しては、これまでに、主に語用論の立場から研究が進められてきた。例えば、Thomas (1979) は主語省略が生じる要因について「言葉の経済性⁴」(Zipf, 1949) や定型表現との共起関係が重要であると語用論の点から述べている。Carter & McCarthy (1995) は、親しい間柄との会話、直近のコンテキストや場面のコンテキストが主に主語省略と関係する要因であると示している。Nariyama (2004, p. 255) は、定型表現における、主語省略 *it* について (例: [It] doesn't matter. [It] looks good.)、「主語 *it* の省略文では主語 *it* の観点からではなく、話者の観点から表現されている」と述べている。

このように従来は、可復元性、言葉の経済性、コンテキスト、定型表現との共起や会話スタイルなど、主に語用論の観点から主語省略が論じられてきた。しかし、これらの観点だけでは、次の三つの問題が解決できない。一つ目に、なぜ主語省略が心理的な状態を表すような特定の動詞と共起するのかが説明できない (例: Hope so.)。二つ目に、同一の知覚動詞においても、用いられる文型の違いによって、なぜ省略の生じ方が違うのかが説明できない。三つ目に、主語省略の現象で、復元される主語には、会話の参与者である一人称や二人称だけでなく、三人称の *it* も生じる点が報告されているが (Nariyama, 2004, Carter & McCarthy, 2006)、なぜ主語 *it* に省略が生じやすいのかが説明できない。

本稿では、これらの問題の中でも、上記で示した三番目の問題である *it* の主語省略に注目し、なぜ主語 *it* に省略が生じやすいのか、についてコーパスを使用して意味論的観点から考察する。本稿では「客観の主体化—話し手あるいは話し手の発話時における場所や話し手と密接にかかわる現状が参照点として客観に入り込むこと」(深田, 2001, p. 74) という Langacker の「主体化」(1999) に注目して *feel* の構文変化を調査し、主語の「指示性」と主語省略の関係を捉えていく。

3. 方法論

本稿では、主語省略を動機付ける意味的な要因を考察するために、COHA (Corpus of Historical American English) を用いて、二種類の調査を行った。COHA は 4 億語からなる言語コーパスで、1810 年から 2009 年における通俗小説、ノンフィクション、詩、雑誌等の書き言葉におけるアメリカ英語が収録されている。データ収集としては 1810 年から調査が可能であるが、1810 年代における資料の収録数が *feel* に関して 64 件と少なく、調査のためのデータとして使用するには不適切と判断し、1820 年から 1859 年、2000 年から 2009 年までを調査対象とした。図 1 は COHA で示された 1810 年から 2009 年までの動詞 *feel* の出現頻度を表にしたものである。

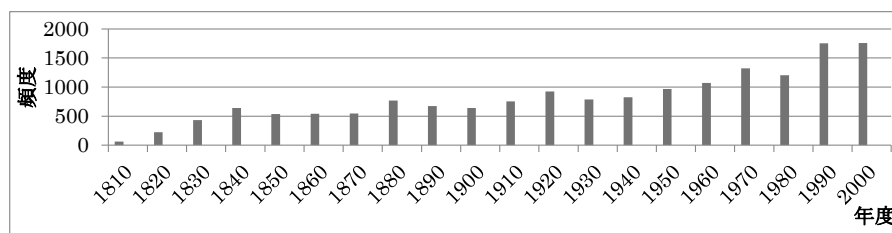


図 1. *feel* の年代別出現頻度 (COHA)

図 1 を見ると、*feel* の頻度は近代で増加しているように見える。しかし、各年代ではコーパスの規模が異なるため、*feel* の出現頻度が増加しているかどうかは明らかではない。そこで、数値の分母を各年代間で共通にするために、COHA で示された各年代での *feel* の 100 万語内での出現頻度を図 2 に示した。図 1 と図 2 で示された数値を基に、表 1 と表 2、図 3 と図 4 における 100 万語内での出現頻度の数値を算出した。

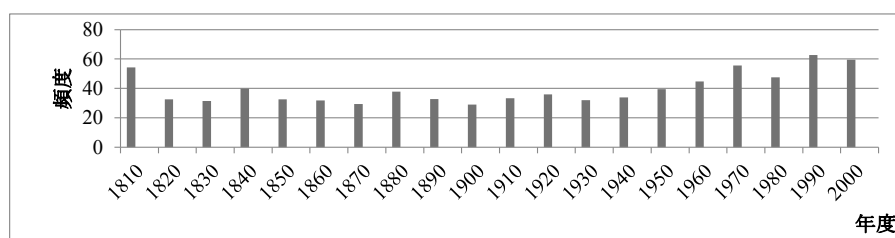


図 2. 動詞 *feel* の 100 万語あたりの出現頻度 (COHA)

調査 1 では動詞 *feel* の構文変化をみるために、調査 2 では *feel* の主語省略をみるために調査を行った。

4. 調査

4.1 調査 1：動詞 *feel* の構文変化についてのデータ

調査 1 では COHA を使用し 1800 年代初期から 1850 年代、また 2000 年代における動詞 *feel* の構文変化を調査する。調査の結果、*feel* を含む構文は以下のパターンが観察された。

(2) *feel* の構文パターン

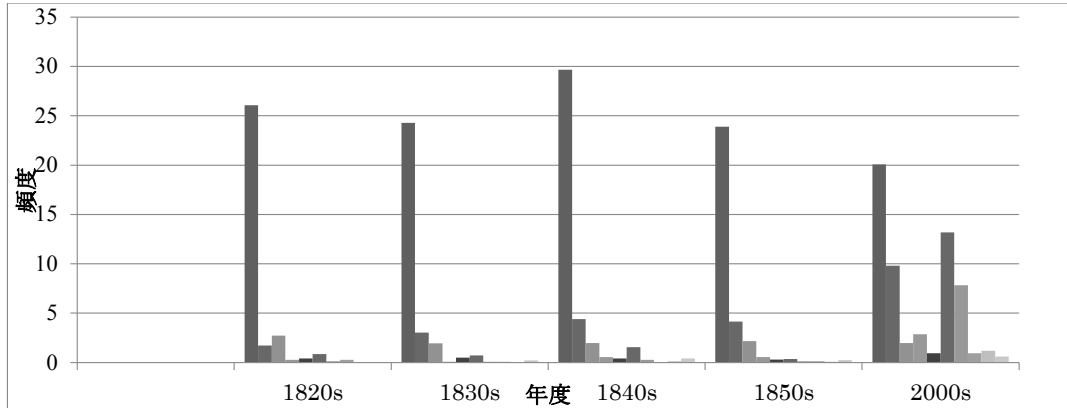
- ① A + *feels* + noun (例：He feels its hot impress.)
- ② A + *feels* + adj. (例：She feels good.)
- ③ A + *feels* + adj. phr. (例：She feels prepared to...)
- ④ A + *feels like*... (例：She feels like a solemn duty.)
- ⑤ A + *feels as if*... (例：He feels as if he is a king.)
- ⑥ It (that, etc.) *feels* + adj. (例：It feels good.)
- ⑦ It (that, etc.) *feels like*... (例：It feels like an hour.)

- ⑧ *It feels as if...* (例 : *It feels as if they are dabbling.*)
 ⑨ *It feels + adj. + to...* (例 : *It feels good to be home.*)
 ⑩ Others (*前置詞句が補語句となるもの)
 (A = 有生物主語、adj. = 形容詞、phr. = 句)

上記の ① から ⑤ は主語の位置に有生物が現れている。一方、⑥ から ⑨ は無生物主語の例である。本稿では、これらの例に対して、1820 年代から 1850 年代と 2000 年代における動詞 *feel* の構文変化を調べたところ、表 1 の結果になった。各列の上段、または左側に示された数値はそれぞれの構文の出現頻度を表す。一方、括弧内の数値は 100 万語あたりの構文の出現頻度を表す。図 3 は表 1 で示されている *feel* の 100 万語あたりの構文別出現頻度をグラフで示したものである。

表 1. 動詞 *feel* の年代別構文変化 (COHA)

構文 \ 年度	1820s	1830s	1840s	1850s	2000s
1. A + <i>feels</i> + noun	181 (26.06)	340 (24.48)	209 (29.67)	398 (23.88)	338 (20.08)
2. A + <i>feels</i> + adj.	12 (1.72)	42 (3.02)	31 (4.40)	69 (4.14)	165 (9.80)
3. A + <i>feels</i> + adj. phr.	19 (2.73)	27 (1.94)	14 (1.98)	36 (2.16)	33 (1.96)
4. A + <i>feels</i> like	2 (0.28)	1 (0.07)	4 (0.56)	9 (0.54)	48 (2.85)
5. A + <i>feels as if</i>	3 (0.42)	7 (0.50)	3 (0.42)	5 (0.30)	16 (0.95)
6. <i>It (that, etc.) feels</i> + adj.	6 (0.86)	10 (0.72)	11 (1.56)	6 (0.36)	222 (13.19)
7. <i>It (that, etc.) feels like</i>	1 (0.14)	1 (0.07)	2 (0.26)	2 (0.12)	132 (7.84)
8. <i>It feels as if</i>	2 (0.28)	1 (0.07)	0	2 (0.12)	16 (0.95)
9. <i>It feels</i> + adj. + <i>to</i>	0	0	1 (0.14)	1 (0.06)	20 (1.18)
10. Others	0	3 (0.21)	3 (0.42)	4 (0.24)	10 (0.59)
合計	226 (32.49)	432 (31.08)	278 (39.41)	532 (31.92)	1,000 (59.39)



(各年代で 10 本の棒グラフは、左側から、表 1 の 1 から 10 までの構文に対応する)

図 3. 動詞 *feel* の 100 万語あたりの構文別出現頻度 (COHA)

4.2 調査 1：動詞 *feel* の構文変化についての考察

1800 年代前半と 2000 年代で使用されている構文の種類を比較してみると、(2) における ① の SVO 型の構文から ② から ⑨ までの SVC 型を中心とした構文に全体的に変化していると言える。言い換えれば 1820 年代から 1850 年代の間では SVO 型である *A + feels + noun* (例：He feels its hot impress.) 構文が多く使用されているが、2000 年代で使用されている構文の種類は SVC 型を中心に多様化していることが分かる。その多様化が見られる中で、特に主語が *it*, *that* 等で始まる構文、つまり (2) における ⑥ の *It (that, etc.) feels + adj.* (例：It feels good.) 構文や、⑦ の *It (that, etc.) feels like...* (例：It feels like an hour.) 構文が増加していることが分かった。

ただし、同様に *it* で始まる ⑧ *It feels as if...* (例：It feels as if they are dabbling.) や ⑨ *It feels + adj. + to...* (例：It feels good to be home.) 構文のように、比較的、複雑で長い構文では頻度数の大幅な増加が見られないことから、現代では簡潔で短い構文が使用されている傾向があると言える⁵。

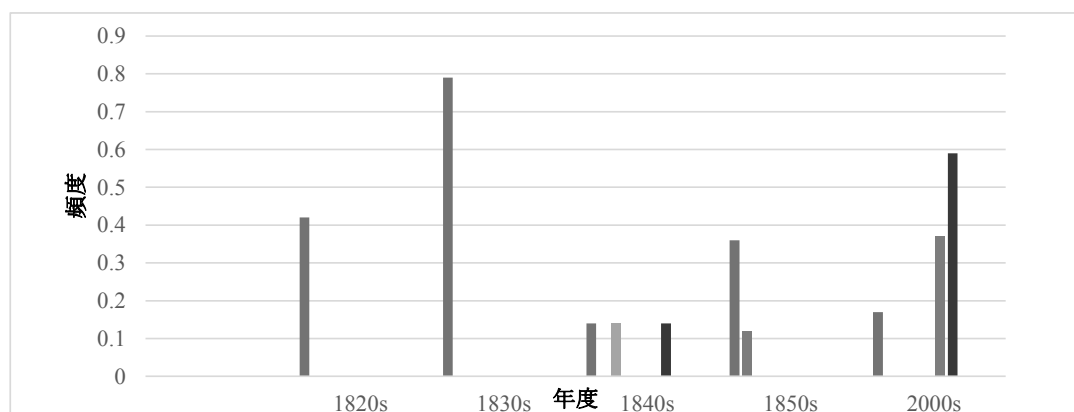
上記のように *it* で始まる主語を持ちながらも 2000 年代で増加があまり見られない構文もあるが、全体としてみると、1800 年代前半と比較して 2000 年代で、*A + feels + noun* から概念化者が言語化されない、*It (that, etc.) feels + adj.* や *It (that, etc.) feels like* 構文へ推移する傾向がみられる⁶。

4.3 調査 2：主語省略と動詞 *feel* の構文との関係についてのデータ

調査 2 は調査 1 の動詞 *feel* がとる構文の歴史的変化調査の結果に基づいて、*feel* が出現する構文と主語省略の関係を調査したものである。表 2 と図 4 は、その調査結果を表している。

表 2. 主語省略と動詞 *feel* の構文との関係 (COHA)

構文 \ 年度	1820s	1830s	1840s	1850s	2000s
1. A + <i>feels</i> + noun	3 (0.42)	11 (0.79)	1 (0.14)	6 (0.36)	3 (0.17)
2. A + <i>feels</i> + adj.	0	0	0	2 (0.12)	0
3. A + <i>feels</i> + adj. phr.	0	0	1 (0.14)	0	0
4. A + <i>feels like</i>	0	0	0	0	0
5. A + <i>feels as if</i>	0	0	0	0	0
6. <i>It (that, etc.) feels</i> + adj.	0	0	0	0	7 (0.37)
7. <i>It (that, etc.) feels like</i>	0	0	1 (0.14)	0	10 (0.59)
8. <i>It feels as if</i>	0	0	0	0	0
9. <i>It feels</i> + adj. <i>to</i>	0	0	0	0	0
10. Others	0	0	0	0	0
合計	3/226 (0.42)	11/432 (0.79)	3/278 (0.42)	8/532 (0.48)	20/1000 (1.13)



(各年代で 10 本の棒グラフは、左側から、表 2 の 1 から 10 までの構文に対応する)

図 4. 主語省略と動詞 *feel* の構文との関係 (100 万語あたりの出現頻度) (COHA)

数値の算出、並びに数値の表示法は調査 1 と同様の方法で実施した。表 2 における各列の左側の数値は頻度を表し、括弧内の数値は 100 万語に対する出現頻度が示されている。調査 2 では主語の復元作業を行ったが、その方法は、コーパスから収集した例文が収録されている文脈全体を参照することで、主に直近のコンテキストや場面のコンテキストに基づき、省略前の主語を導き出す方法を取った。

4.4 調査 2：主語省略と動詞 *feel* の構文との関係についての考察

調査によると、1820 年代から 1850 年代では主に (2) における ① の A + *feels* + noun の

構文で省略が生じているが、2000年代では A + *feels* + noun よりも ⑥ の *It (that, etc.) feels* + adj. や ⑦ の *It (that, etc.) feels like* の構文で省略がより多く生じていることがわかった。⑥ と ⑦ の構文の増加を説明するために二つの理由が可能性として挙げられる。

第一の理由としては、単純に *It (that, etc.) feels* + adj. と *It (that, etc.) feels like* 構文の生じている出現頻度が増加したために、主語省略の頻度も連動して増加した可能性が考えられる。しかし、調査1で2000年代に、②の A + *feels* + adj. 構文の生じた頻度が100万語あたり、9.80件（表1を参照）であるが、調査2では同じ構文が0件（表2を参照）であることを考慮すると、構文の出現頻度の増加に伴い、主語省略の頻度も必ずしも高くなるとは限らないことがわかる。従って、構文の生じる数値と主語省略の数値とは連動する可能性は低いと考えられる。

二つ目の理由としては、主語省略は主体化の進んだ構文で生じる可能性があると考えられる。Langacker (1999) の主体化の議論では、概念化者が言語化されない表現は、概念化者が現場や出来事の中に深く入り込んでいるため、言語化される表現と比べて、主体化が進んでいるとしている。すなわち、2000年代に *It (that, etc.) feels* + adj. と *It (that, etc.) feels like* の構文で（表2の構文6と構文7）、合計17件の主語省略が生じていたが、下記の例(3)から(6)が示すように、主語省略が生じている全ての文では主語の位置に知覚対象が現れ、概念化者が言語化されないという点で主体化が進んだ表現であった。背景化された概念化者は主語ではなく、to me または to us のような形で復元することができる。例文(3)から(6)における矢印右側の文は左側の例文を直近のコンテキストや場面のコンテキストに基づき文頭の主語を復元し、概念化者も言語化された場合の文を表現している。

- (3) Usually feels great, while we're doing it. > (*It, etc.*) usually feels great (to us)...
- (4) Feels fine. What's your name? > (*It, etc.*) feels fine to (to me).
- (5) Feels like sweat slipping beneath my breast. > (*It, etc.*) feels like sweat slipping... (to me).
- (6) Feels like my arm's about to fall off. > (*It, etc.*) feels like my arm's about to fall off (to me).

さらに、これらの主体化の進んだ文で、復元された主語が何を示しているかを調査してみると、多くの主語が漠然とした状況や経験された出来事、つまり曖昧性を持つ「非人称の it⁷」であり、具体的な指示対象を持つ主語は少なかった。この点から、主語が具体的な指示物を表す場合より、主語が曖昧性を持つ「非人称の it」の場合に主語省略が生じやすいことがわかる。下記(7)から(10)の例でも同様の振る舞いが見られる。

- (7) Street breathing up your legs. Can't even get no breeze from them big church fans at St. Jack's⁸. Feels like a dog's licking you.

(7)の下線部は「(前の混雑の状況は、人が多くて人と接触し)まるで犬になめられているような気分がする」という意味を表している。この文では、漠然とした場の状況を示し

た言葉が省略されている。また文中に概念化者も表現化されていない。

- (8) Once I found her lying on the grass in a random-looking sprawl, the palms of her hands turned up to the drizzle. “The Corpse,” she explained later. “Feels wonderful”.

(8) の先行文脈では、「ヨガのポーズには不可解な名前が付けられている」という内容の話がされている。(8) では、「(話者である) 私は彼女が草の上に横たわっていた」姿を見た。後に、彼女は、そのポーズは「死体」とであると説明し「素晴らしい気分だ」と述べている。つまり、省略された主語は実在物ではなく、ポーズをしていた時の彼女の気分を表している。例 (8) は (7) と同様に to me、to us などの概念化者の表現はされていない。

- (9) Robert heaved a sigh and sat down beside me. “Looks bad”. “Feels worse”.

(9) の先行文脈では、ロバートと話者である私が話をしている、その内容についてロバートは自分の感想として、上記の例のように「悪そうだ」、「気分はもっと悪い」と述べていることから、実在物についてではなく、前に語られた話についての話者の気持ちを表している。また、概念化者の表現もない。

- (10) More food? Wonderful. I am famished. Feels like I am eating for twelve. Set it down here.

(10) の例は知人の家族の呼びかけに対して、「もっと食べ物があるの。素晴らしいわ。お腹がぺこぺこよ。12 時（昼食）に食べているような感じだ。」と答えており、食べ物そのものや、何らかの実在物を示すのではなく、食べる状況について述べている。(8) や (9) の例と同様に概念化者 to me や to us の表現も示されていない。これらの例を分析すると、復元された主語は具体的な指示物を表すよりも、漠然とした状況や気持ちを表すなど、曖昧性を持つ「非人称の it」と省略が生じやすいことがわかる。

次に表2 の構文1である A+feels+noun 構文の主語省略に注目してみる。この構文では、特に 1830 年代で主語省略が多く生じていることがわかる。しかし、省略が生じている文の種類を調べてみると、11 件中、詩が 5 件、小説が 5 件、雑誌が 1 件であった。調査では合計 11 件の省略が生じていたが、詩を除くと 6 件となる。詩は独特の文体を持ち、本稿が対象としている文体である、「書き言葉で生じる談話」とは性質が異なっているものである。

構文1 に関して他の年代についても同様の調査をすると、1820 年代では 3 件中 2 件、また、省略頻度がやや多い 1850 年代では、6 件中 3 件が詩であることがわかった。これらのことから次の二つのことが言える。

一つ目に、1820 年代から 1850 年代における主語省略は、詩で生じていることが比較的多い。二つ目に、1830 年代の A+feels+noun 構文について、一見すると主語省略の頻度が高いように見えるが、詩を除いた、実際に調査対象となる構文の主語省略頻度（つまり 6 件、または 100 万語内で生じる数値は 0.43 件）から判断すると、省略頻度は、さほど高

い数値ではないことがわかる。

本節の結果をまとめると次のようになる。まず、物を主語に取る SVC 型構文において、主語省略は次のような二つの場合に生じる。第一に、具体的な物を示す実体、または具体的な指示物を表す *it* を主語に取る場合。第二に、具体的な物を示さず、状況や経験した出来事を表す主語、または曖昧性をもつ「非人称の *it*」を主語に取る場合。本調査の結果は、後者で省略が生じやすい点を示唆している。次節では主語の示す指示対象に注目して動詞 *feel* を分類する。

5. 主語省略と「主体化」

4 節のコーパス調査の結果、調査 1 から SVC 型の構文の中でも、主語 *it* (具体的な指示物を表す *it* と、具体的な指示物を表さない *it* を含む) で始まる構文が、近年で増加していることを確認した。調査 2 から主語省略は具体的な物を表す主語よりも、具体的な物を表さない、特に「非人称の *it*」、により頻繁に生じていることがわかった。

これらの調査結果から、知覚動詞の先行研究における分類を精緻化することができる。従来、知覚動詞の研究では、知覚動詞は三種類 (経験、活動、知覚) に分類され、知覚の SVC 型の文型は一つにまとめられていた (Ibarretxe-Antuñano, 1999, p. 45)。

しかし調査 1 から、*feel* の SVC 型には「人 + *feels* + *adj.*」のように、経験者が主語になるものと (例 : *He feels good.*)、「物 + *feels* + *adj.*」のように、経験者が背景化され、知覚対象が主語になるものにわかれる点が示される。また、調査 2 から、知覚対象が主語となる場合であっても、主語が具体的な物である場合と (例 : *This pen feels good.*)、漠然とした状況を表す場合 (例 : *It feels good.*) とでは、文法的、意味的振る舞いが違うことが確認された。両者を比べた場合、主語省略は後者でより頻繁に起こることから、両者は文法的、意味的に異なる特徴を持つ構文として分類できる。以上のことから、*feel* は図 5 のように表すことができる。

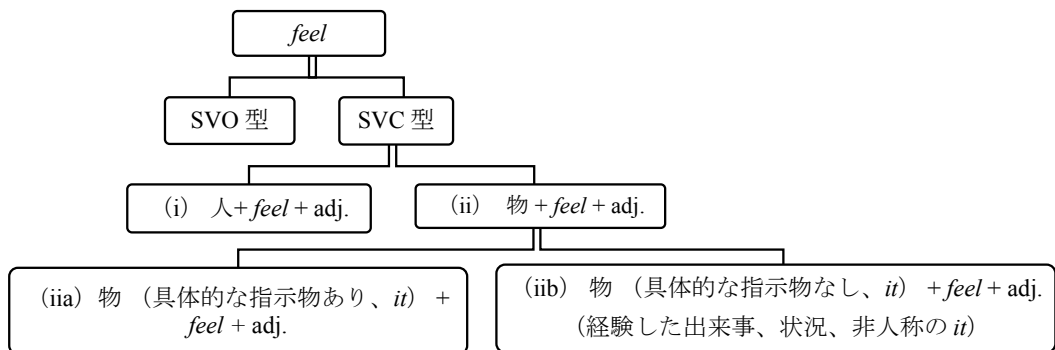


図 5. *feel* の SVC 型の分類 (adj. = 形容詞)

図 5 が示すように、従来 SVC 型としてまとめられていた構文には以下のように三つのパターンがあることがわかる。

(11) (i) 人 + *feel* + adj.

(iia) 物（具体的な指示物あり、*it*）+ *feel* + adj.

(iib) 物（具体的な指示物なし、*it*）+ *feel* + adj.

〔* (iia)、(iib) のパターンは表 1 と表 2 においては構文 6 の中に含まれる〕

これらの構文を比較すると、調査 1 から、三つのパターン全てにおいて、1800 年代初期と比べ 2000 年代で、100 万語内に出現する構文の頻度に増加が見られる（表 1、図 3）。しかし、特に (iia) 型と (iib) 型のように、「主体化」（知覚者の背景化）が進んだ構文で著しい増加が観察される。つまり、時代が進むにつれ、「非人称の *it*」を含む「物主語」の使用頻度が目立って増加している。「人主語」から「物主語」への変化は Langacker (1999, p. 301-302) の主張する「主体化」に見られる 4 つのパラメーターの希薄化の 1 つ「焦点の変化⁹」と合致する。

また調査 2 では、(iib) のパターンの「非人称の *it*」のような具体的な指示物を持たない主語で、より省略が生じていることから、主語の指示性 (referentiality) の低さが主語省略の一要因であることがわかった。すなわち、具体的な指示物を持たない主語の場合、主語が表す指示対象は境界線が無く個別化されない点で指示性が低くなるが、この場合、漠然とした状況を指すことから、意味情報が少ないため、省略がされやすくなると考えられる。

6. 結論

本稿における調査の結果、以下の二つの示唆が得られた。第一に、調査 1 では *feel* は、時代の流れの中で SVO 型中心から SVC 型へと変化している点が明らかになった。さらに、SVC 型の中では、主語に有生物をもつ構文から（例：He feels good.）、概念化者 to me、to us 等が言語化されない「主体化」した構文中心へと推移した（例：It feels good.）点が明らかになった。

第二に、調査 2 では、主語省略は図 5 の (iia) の具体的な指示物を示す主語の場合よりも、(iib) の具体的な指示物を示さない主語で、より多く生じていることがわかった。これらの主語では、「非人称の *it*」をはじめ、主語が表す対象が漠然として情報量が少ないことから、主語の指示性 (referentiality) が低いといえる。その点から、主語省略は指示性の低い主語に生じやすいといえる。

以上の結果から、本稿の調査では、主語省略には可復元性やコンテキスト等の語用論的な要因だけでなく、主語の指示性 (referentiality) のような意味論的な要因が関わる点を明らかにした。主語省略が生じる要因をまとめると表 3 のようになる。

表 3. 主語省略が生じる要因

語用論的要因
可復元性
直近のコンテキスト、場面のコンテキスト
会話スタイル（例：親しい間柄での会話）
言葉の経済性
定型表現との共起



意味論的要因
主語の指示性の低さ

最後に今後の課題を記す。本稿では、経験者が背景化され、知覚対象が主語となる構文（例: This pen feels good. It feels good.）に焦点をあて調査を行ってきた。今後の課題として、知覚対象が主語の位置に現れるという点で、本稿において論じた構文と同様の特性を持つ中間構文に注目することで、主語省略の要因に構文がどのように関与しているかをさらに分析していきたい。

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注

- ¹ 本稿のすべての例は COHA からの引用である。
- ² 本研究では、「人主語」から「物主語」への変化が主な考察対象であるため、動詞 *feel* 全体ではなく、*feels* を対象とした。*feel* 全体の調査は今後の課題とする。
- ³ 指示性には「客観的指示性 (objective referentiality)」と「談話的指示性 (discourse referentiality)」の二種類がある (Payne, 2011, p. 365) とされている。本稿で述べる指示性は、前者の「客観的指示性」のことを示す。指示性については 5 章でも述べる。
- ⁴ 「言葉の経済性」(Zipf, 1949) とは「人は身近にある問題を解決する際に」、「起こりうる労働消費の平均率を最小限にしようとする」という考えを基に言葉に対して応用したものの。主後省略が生じる要因の一つと考えられる。
- ⁵ これは Zipf (1949) の述べる「言葉の経済性」と関連すると思われる。
- ⁶ 知覚動詞において、経験者から刺激へと主語が移行するこの現象は、文法的にみると、目的語が主語の位置に現れる現象として捉えることができる。同様に、目的語が主語位置に現れる構文に中間構文がある (本田, 2005)。中間構文と知覚動詞構文の関連については非常に興味深く、現在調査中であり、今後の課題とする。
- ⁷ 「非人称の it」は「最も漠然として境界の無いもの」または「曖昧である」と定義される (Langacker, 2011, p. 204)。本稿で論じた主語省略が頻繁に生じる「経験した出来事、状況」を表す実体は、具体的な指示物を持たない点が、「非人称の it」と共通している。また、「非人称の it」は、全く同じではないものの、Bolinger (1977) でも「状況の it」(ambient it) (p. 77-87) として述べているが、本稿では Langacker (1999) の提唱する「主体化」を用いて分析をしているため、「非人称の it」(Langacker, 2011, p. 204) を採用する。
- ⁸ *Can't even get* で始まるこの文も省略を含む文である。直近のコンテキストや場面のコンテキストにより判断すると、この文では、*you* が省略されていると考えられる。
- ⁹ Langacker (1999, p. 301) は「主体化」には少なくとも 4 つの「希薄化」—「状態の変化」、「焦点の変化」、「領域の転換」、「活動または潜在力の場の変化」が観察されると述べている。その中で「人主語」から「物主語」や「it 主語」への変化は、「焦点の変化」、または「プロファイルの変化」と言える。
- * 本稿は日本英語学会国際春季フォーラム第 7 回大会 (2014 年 4 月 19 日、20 日、同志社大学) での口頭発表に加筆、修正を加えたものである。本研究をまとめるに際して、大谷直輝先生、深田智先生により、貴重なご指摘やご助言を賜った。そして、匿名の査読者の方々から有益で建設的なご意見を頂いた。ここに記して、感謝申し上げたい。なお、本稿の不備、誤りは全て筆者の責任である。