

A Comparative Study of Placement Test (PT), Proficiency Scores (PRS) and Students' Self Perception of English Language Skills in A University in United Arab Emirates

Zita Lobo, Omnia Ibrahim, Omar Al Jadaan

Professor and Chairperson, Department of General Education

Ras Alkhaimah Medical and Health Sciences University, Ras Alkhaimah, UAE.

Email:Zita@rakmhsu.ac.ae

Department of English, Ras Alkhaimah Medical and Health Sciences University, Ras Alkhaimah, UAE. & College of Language and Translation. Sadat Academy for Management Sciences ,Cairo-Egypt

Email:omnia@rakmhsu.ac.ae

Department of Computer Sciences, Ras Alkhaimah Medical and Health Sciences University, Ras Alkhaimah, UAE.

Email:ojadaan@rakmhsu.ac.ae

ABSTRACT: *As Educators it is vital to learn the limitations, and requirements of the students and design or revise a curriculum to fill the lacunae. This study aimed to compare the students' performance in their proficiency and placement tests and their own self perception of their English language skills. The study was conducted in RAK Medical and Health Sciences University located in The United Arab Emirates. The participants were first year students from Medicine, Pharmacy, Dental and Nursing colleges. Questionnaires were distributed among the students to analyse their needs in their English course. The results are compared to their proficiency and placement test results and needs analyses tries to find areas of weakness or strength of the students to tailor courses according to their needs or to provide the students with suitable instruction. The results of the questionnaires showed that students' self-perception of their skills corresponded with their expression of their linguistic requirements for their professions.*

KEYWORDS: Proficiency, Placement Test, self-perception, English for Specific Purposes (ESP), English as a second language (ESL), English placement test scores (EPTS), English Needs Analysis (ENA)

INTRODUCTION

In a multicultural university, students come from various linguistic backgrounds and abilities in the language of instruction, which is English. The diverse curriculum also brings with it the challenges of adjusting to a collegiate level of instruction. As Educators it is vital to learn the limitations, and requirements of the students and design or revise a curriculum to fill the lacunae so that the students by the end of a course will reach the goals of their education. This study aimed to compare English proficiency tests scores, English placement test scores and the students' perception of their linguistic skills. It also aimed to examine whether there is a significant difference between self-perception and reality in linguistic skills and abilities of the students [1]. The study focused on the following questions:

1. What is the perception of students about their own linguistic needs as students of medicine and other health sciences?
2. Is there a correlation between placement test scores, proficiency test scores and self-perception analysis scores of students?

LITERATURE

English has become an indispensable medium of instruction in the Middle East, especially in the UAE in the fast-paced educational scenario. Students seeking education in professional courses are vastly interested in the practical use of the English language to become competent in their profession which presupposes their procurement of good job placements too. The English as a second language (ESL) needs assessment is different from a placement test. A placement test categorizes students into what level of English they speak, which class they should be in or which book they should use. Placements into classes are based on levels, yet categorical distinctions can be detected only through a thorough needs analysis assessment. A needs assessment looks a little more closely to find gaps, or in other words, identify areas where a student may be lacking in their skills or knowledge and forging a way to meet those needs through a successful course plan. By surveying students about their background needs and goals, teachers can provide students with the specific language training and learning resources required in their courses and future careers. “increasing need for effective training is not limited to any industry or to the size of an organization. It may appear to be an obvious need for a large company involved with the latest technological developments, but it can also be a requirement in smaller, more traditional organizations [2].

Medical education relies largely on linguistically demanding courses. It undoubtedly demands a high-level proficiency in the skills, competencies and capabilities of the English language. To master these skills, vast research suggests various approaches to language teaching. A primarily communicative approach seems most suitable as competence in communication forms the basis of medical and health sciences professions. Language competence that includes vocabulary, pronunciation and grammar, sociolinguistic competence and strategic competence and socio cultural competence delineated into the curriculum .

It is imperative to assess critically students’ prior linguistic knowledge and skills. Getting to understand the students helps educators to fill in any conceptual gaps. A realistic idea of one’s abilities and skills is required for motivation to find excellence in studies through their ‘own terms of reference for training needs analysis [3] . Students of medical and health sciences disciplines come with a perception of their linguistic abilities and proficiency in the language. In a study that discussed the students’ need of their first language to learn English, it is noticed that students are aware of their needs from the courses. They prefer the interference of their first language in skills like general vocabulary, specialist vocabulary and grammar. Whereas, when it comes to skills of speaking, writing or any skill that requires expressing oneself in the profession, they preferred a native speaker or an English only class. This shows that students are aware that there are some skills in English

that should be practiced without the interference of their first language which will enable them to communicate in English better or give them the required fluency they are looking for [4]. In other words, students perceive what they need as well as their abilities.

Self-motivation, the ability to move ahead with confidence and enthusiasm [5] generates from clearly perceived ideas of one's capabilities. According to the Self-perception theory, attitudes and beliefs are influenced by observations of one's own behaviour [6]. Student's self-perception can be influenced by several factors other than self-schema like their self-perception could be influenced by perceived consequences of reporting their self-proficiency as basic learners.

Globalization and the influx of the internet have progressively altered the approaches to the teaching and learning of the English language [7]. Textbooks have developed in accordance with the changing needs of the learners. However, there are still some problematic issues yet to be tackled when it comes to certain groups with specified needs. For example, the specific needs of the medical and health sciences language for efficient and professional communication. Studies indicate that there is a close relation between perceived proficiency and attitude of students toward the English language, teachers' motivation and classroom environment [8]. Social scientists believe that Self-concept is very important for the prediction of academic progress [9]

As in the concept of self-esteem, there is a relation between self-concept and academic achievement. Low self-concept can lead to low academic achievement and high self-concept can lead to high academic achievement [10]. It is observed in a recent study published by the UCLES learning outcomes are poor despite education reform projects. "Many students leave secondary school with an A1 or A2 level, Common European Framework of Reference for Languages (CEFR), of English when B1 or B2 has been stipulated in national language policy; and many students leave university with an A2 or B1 level of English when B2 or C1 is needed in order to meet the requirements of employers or for entry into higher education" [11].

Therefore, this study took into consideration the learners self-perception of their levels, their English proficiency tests scores, and their performance in English placement test and analyzed to provide us with a realistic analysis to move forward, to revise the existing English courses in accordance to their needs. This study also acknowledges the fact that student self-assessment can be problematic without students thorough awareness of capabilities [12]. Considerations of their academic and professional needs language programs must consistently customize as there is no 'one size fits all form of English' [13]. An earlier study on the learning preferences of the students this university confirmed the obsolescence of didactic lectures [14]. English learning programs which focus on learner centrality and other principles with integrated learning experience designed with latest curriculum principles that move with changing times is a major aim of this study [15].

METHODOLOGY

The study is descriptive and correlational selected from a sample size of approximately 500 students from the first year university. The sample was from five programs from 4 disciplines namely medicine, dental, pharmacy and nursing. The nursing discipline had undergraduate program and added bridging program of registered nurses. The sample students are exposed to an English course in the first year. Therefore, this study aimed at a deeper understanding of their perception of their own linguistic abilities and the lacunae that has to be filled by the course contents that will make the students independent to proficient users of the language.

English Proficiency and Placement tests

1. Students are admitted in the MBBS program with a minimum proficiency score of IELTS 6 and its equivalent scores in TOEFL paper based or IBT. The level of intrinsic motivation is very high among this group. A large majority of students English language proficiency score ranges from 6 IELTS band score and above. The placement test scores range from 48/100 to 89/100 in this group. Around 10 % score below 60% in this group.

2. Students are admitted in the RNBSN program with a minimum proficiency score of IELTS 5 and its equivalent scores in TOEFL paper based or IBT. This group is bridging the gap as the name suggests between a diploma degree and the undergraduate program. They are all registered nurses who are already into the nursing profession and the main motivation for taking up the program is of an extrinsic motivation of higher salary and awareness of the requirement of better performance in the workplace. They arguably have a clearer view of the linguistic and communication requirement of the workplace. The placement test scores of the students range from 39/100 to 89/100.

3. Students are admitted in the BPHARM program with a minimum proficiency score of IELTS 5 and its equivalent scores in TOEFL paper based or IBT. This cohort of students, as the demographic details of the students reflect, are exposed to a limited exposure of the English language. They have taken English as a foreign language in high school. The placement test scores of these students range from 24/100 to 90/100.

4. Students are admitted in the BDS program with a minimum proficiency score of IELTS 5 and its equivalent scores in TOEFL paper based or IBT. A large majority of students English language proficiency score ranges from 5 IELTS band score and above. The placement test scores range from 16/100 to 90/100.

5. Students are admitted in the BSN program with a minimum proficiency score of IELTS 5 and its equivalent scores in TOEFL paper based or IBT. The majority of the class belong to the primarily Arabic speaking students whose proficiency score range basic users A2-B1 by CEFR (common European framework reference). This cohort is also joined by candidates who are from non-scientific stream of education in high school. As a result, their exposure to general scientific language is also limited. A large majority of students English language proficiency score is below IELTS band score of 5. The placement test scores range from 9/100 to 77/100.

RESULTS AND FINDINGS

1. Distribution of the students in each program:

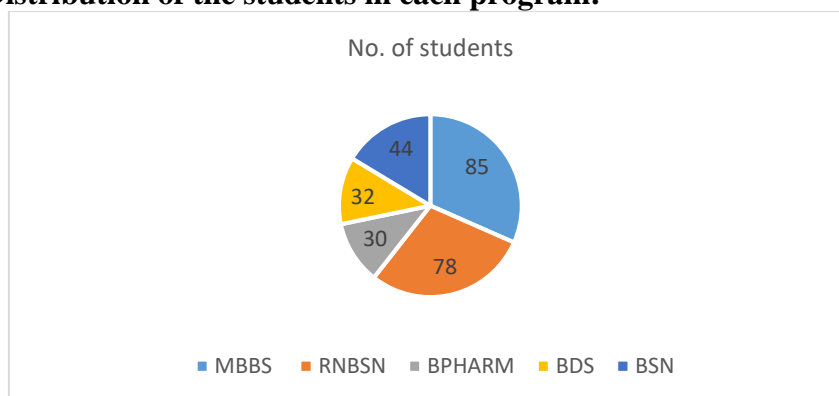


Figure 1 Student's distribution

With a total of 269 students 85 belonged to MBBS (medical program) 78 students belonged to RNBSN, 30 from Pharm, 32 from BDS and 44 students from BSN program. All the students are non-native speakers of English language, the percentage of Arabic language among the programs are as follows, 51.4% in MBBS, 66.7% in RNBSN, 93.3% in BPHARM, 93.3% BDS, and 97.7% in BSN, and the rest are Indian speaking languages. Majority of the students are female 76%.

NEEDS ANALYSIS

The concept of self and self-awareness of abilities and in this context the evaluation of linguistic abilities of students is very important for teachers to observe whether there is a distinction in the self-perception and a difference in the proficiency scores. According to CEFR (Common European Framework Reference) Beginner would include level A1 and A2, Intermediate would include B1 to B2 and Advanced and proficient users include C1 and C2 levels users of English

PROGRAM	Skill level	Speaking			Listening			Pronunciation/Accent			Presentation		
		B	I	A	B	I	A	B	I	A	B	I	A
PROGRAM	MBBS	0	26	59	0	15	70	0	29	56	0	30	55
	RNBSN	0	49	29	0	53	25	1	65	12	0	66	12
	BPHARM	0	13	17	0	18	12	3	14	13	2	20	8
	BDS	1	12	19	1	13	18	0	15	17	0	19	13
	BSN	1	29	14	0	23	21	0	30	14	1	31	12

Table 1 Self-perception of skills in Speaking, Listening,

Pronunciation/accent and presentation of students from all programs.

	Skill level	Gen Vocabulary			Specialist vocabulary			General Writing			Journal		
		B	I	A	B	I	A	B	I	A	B	I	A
PROGRAM	MBBS	0	26	59	1	50	34	0	21	64	3	39	43
	RNBSN	0	60	18	0	64	14	1	66	11	10	64	4
	BPHARM	1	18	11	3	22	5	1	15	14	1	22	7
	BDS	0	13	19	0	20	12	0	13	19	1	14	17
	BSN	2	29	13	3	30	11	2	26	16	7	26	11

Table 2. Self-perception of skills in General Vocabulary, Specialist Vocabulary, General Writing and Journal writing of students from all programs

***B- beginner, I- Intermediate, A- Advanced**

The first question in the survey in the needs analysis was on the importance of English for specific purposes in comparison to English for general use. Students showed that a custom designed course is more appropriate to their profession instead of a general course. This is reflected in the above percentage. Most of the students from the four colleges showed a preference to English for Specific purpose course over a general English course with percentages ranging from 78% and above. This means that students of medical sciences realise the need to be more focused on their specialty rather than learning English in general.

PROGRAM	HIGHEST	78-95 is the overall range of all programs
MBBS	88-12	
RNBSN	95-5	
BPHARM	87-13	
BDS	78-22	
BSN	82-18	

Table 3. Students' interests in taking English course that focuses on "English for Specific Purposes compared to English for General Purposes?"

In the question regarding language priorities, namely the question on it is further evident that the medical and health sciences students' priority is learning and focusing on specialist vocabulary. The priority of the specialist vocabulary, in all four colleges, ranged from 95% to a full 100%. Almost every student in every discipline agrees that professional Lexis is vital. Followed equally by fluency, accuracy, and expanding general vocabulary. Of course achieving big scores is a practical priority of the students Close on heels in the higher range of priorities is pronunciation, improved listening and reading and writing.

With the structural peculiarities of the terminology. medical terms consist mostly of one word or a word group and one or several adjuncts, prefixes, suffixes specifying or modifying the meaning of the main element. Multiword terms are a salient feature of medical and health sciences terminology.

The priority to be a fluent speaker and expanding their general vocabulary came with a very high percentage range of 99% to 87%. Although the priority of improving listening, reading, pronunciation and writing have a high percentage in the four colleges, yet they come in the tail of the list after specialist vocabulary, fluent speaking and expanding general vocabulary. This result is worth reflecting, as fluency in speaking cannot be achieved without improving the other linguistic skills first. Therefore, it is clear that the students of all colleges are not aware of the progress of skills and what needs to follow which skill. As teachers of English would vouch that professional Lexis is best learnt when contextualized and delineated in reading writing and listening skills.

PROGRAM	Fluent speaker	Accurate	Expand General vocabulary	Specialist vocabulary
Range	(87—99)	(87-99)	(87-99)	(94-100)
MBBS	87-13	86-14	87-13	94-6
RNBSN	99-1	97-3	99-1	97-3
BPHARM	97-3	93-7	90-10	97-3
BDS	97-3	97-3	97-3	100
BSN	95-5	91-9	95-5	100

Table 4. Language Priorities

PROGRAM	Improve listening	Pronunciation	Improve reading	Writing	To improve English test scores
Range	(74-97)	(80-95)	(65-94)	(71-97)	(70-97)
MBBS	74-26	81-19	65-35	71-29	72-28
RNBSN	96-4	95-5	94-6	97-3	96-4
BPHARM	90-10	80-20	83-17	90-10	93-7
BDS	97-3	91-9	91-9	91-9	97-3
BSN	93-7	95-5	86-14	89-11	95-5

Table 5. Language Priorities

In Language skills, medical or specialist vocabulary tops the list with a very high percentage ranging from 93% to a full 100% in the four colleges, reaffirming the students' priority of specialist vocabulary. This is followed by the biology/medicine skill with the same percentage range. General science comes third. Priority to other skills followed with lower percentages like chemistry, essays writing skills, non-scientific skills or stories.

PROGRAM	Chemistry	Biology medicine	Medical vocabulary	Stories
Range	(59-94)	(86-100)	(90-100)	(43-72)
MBBS	81-19	92-8	96-4	56-44
RNBSN	71-29	86-14	90-10	72-28
BPHARM	93-7	93-7	93-7	50-50
BDS	94-6	100	100	72-28
BSN	59-41	100	100	43-57

Table 6. Language Skills

PROGRAM	General science	General Essays	Non scientific	Others
Range	(39-90)	(50-94)	(48-84)	(45-72)
MBBS	62-38	61-39	53-47	45-55
RNBSN	90-10	81-19	68-32	46-54
BPHARM	63-37	70-30	67-33	50-50
BDS	78-22	94-6	84-16	72-28
BSN	39-61	50-50	48-52	45-55

Table 7. Language Skills

As for the skills in speaking that includes fluency, vocabulary, grammar and pronunciation in different contexts in the health sciences professions. The top priority was speaking to foreign visitors and colleagues with a percentage that ranged from 84% to a full 100%. This is a logical need in a multicultural milieu to converse with a foreign person and understand the basic speaking transaction. The second priority was to taking part in discussions, giving presentations and taking part in conferences with percentage ranges from 77% to sometimes a full 100%. This is also logical in the academic context as giving presentations and attending conferences are important. Equal importance is given to taking part in discussions and taking part in conferences followed by the skill to give instructions. Engaging in small talk and speaking on the phone are given equal priority by the students.

PROGRAM	Speaking to foreign visitors	Speaking to foreign colleagues	Speaking on the phone	Taking part in discussions
Range	(84-100)	(86-98)	(63-96)	(77-100)
MBBS	84-16	86-14	75-25	87-13
RNBSN	96-4	95-5	96-4	99-1
BPHARM	90-10	90-10	63-7	177-23
BDS	100-	94-6	91-9	100
BSN	98-2	98-2	84-16	93-7

Table 8. Speaking Priorities

PROGRAM	Taking part in conferences	Giving presentations	Giving instructions	Small talk	Others
Range	(77-100)	(80-97)	(73-97)	(64-95)	(44-78)
MBBS	82-18	84-16	76-24	64-36	48-52
RNBSN	95-5	97-3	97-3	95-5	44-56
BPHARM	80-20	87-13	73-27	70-30	50-50
BDS	100	94-6	97-3	81-19	78-22
BSN	77	80-20	84-16	70-30	57-43

Table 9. Speaking Priorities

As for writing skills, students from all colleges gave priority to writing emails with a percentage ranging from 77% to 96%. This is due to the fact that emails have become a very important method of communication. The second priority was writing research papers, which is very crucial and important in any practical college, with a percentage ranging from 80% to 97%. Writing summaries, notes and translation came next with percentages ranging from 60% to 100%. But what is surprising is that writing reports did not come as one of the priorities although writing reports is one of the fundamental things any doctor or nurse should do. In the tail of the list came memorandums and glossary writing.

PROGRAM	Business Letters	Emails	Memorandums	Reports	Research papers
Range	(52-80)	(77-96)	(52-82)	(70-92)	(80-97)
MBBS	69-31	80-20	65-35	81-19	85-15
RNBSN	69-31	96-4	82-18	92-8	88-12
BPHARM	80-20	77-23	70-30	70-30	80-20
BDS	75-25	94-6	81-19	81-19	97-3
BSN	52-48	91-9	52-48	77-23	84-16

Table 10. Writing Priorities

PROGRAM	Summaries	Notes	Translations	Glossary	Others
Range	(72-100)	(60-97)	(67-97)	(66-85)	(31-81)
MBBS	72-28	68-32	67-33	66-34	48-52
RNBSN	85-15	94-6	94-6	85-15	31-69
BPHARM	73-27	60-40	77-23	70-30	53-47
BDS	100	97-3	97-3	81-19	81-19
BSN	91-9	93-7	84-16	82-18	64-36

Table 11. Writing Priorities

In listening skills, the skills that the students gave priority to were classroom skills. Listening to lectures, instructions, explanation by the teacher and teacher's talk came on top of their list of priorities with a percentage ranging from 82% to 100%.

Presentations and reports listening skills came next with a lower percentage of 77% to 100, a percentage that is lower but not very far from the previous ranges.

Program	Lectures	Instructions	Presentations	Reports	Explanation given by the teacher	Teacher talk	Other
Range	86-100	84-100	80-93	77-100	86-97	82-97	26-91
MBBS	86-14	84-16	80-20	82-18	86-14	82-18	61-39
RNBSN	96-4	96-4	90-73	95-5	97-3	97-3	26-74
BPHARM	93-7	87-13	87-13	77-23	90-10	90-10	60-40
BDS	100	100	91-9	100	94-6	94-6	91-9
BSN	86-14	90-5	93-7	89-11	93-7	93-7	82-18

Table 12. Listening Priorities

ANOVA test analysis

A one-way between subject's ANOVA was conducted to compare the student's scores of self-perception, placement test and English proficiency tests. There was a significant effect of amount of student's scores at the $p < .05$ level for all the programs and the results are as follows:

MBBS: [$F(2, 252) = 17.13, p = 0$]. Where the mean score of self-perception ($M = 3.85, SD = 0.41$) was significantly different than the Placement test ($M = 3.62, SD = 0.25$). However, the English proficiency test ($M = 3.39, SD = 0.13$).

BDS: [$F(2, 90) = 7.66, p = 0.0008$]. Where the mean score of self-perception ($M = 3.59, SD = 0.96$) was significantly different than the Placement test ($M = 2.80, SD = 1.09$). However, the English proficiency test ($M = 2.86, SD = 0.47$).

BPHARM: [$F(2, 84) = 4.25, p = 0.17$]. Where the mean score of self-perception ($M = 3.22, SD = 0.71$) was significantly different than the Placement test ($M = 3.19, SD = 0.75$). However, the English proficiency test ($M = 2.79, SD = 0.35$).

BSN: [$F(2, 129) = 29.53, p = 0$]. Where the mean score of self-perception ($M = 3.06, SD = 0.7$) was significantly different than the Placement test ($M = 2.20, SD = 0.58$). However, the English proficiency test ($M = 2.50, SD = 0.15$).

RNBSN: [$F(2, 231) = 1.356, p = 0.25$]. Where the mean score of self-perception ($M = 3.02, SD = 0.53$) was not significantly different than the Placement test ($M = 3.07, SD = 0.47$). However, the English proficiency test ($M = 2.95, SD = 0.41$).

Our results suggest that there is a significant difference between student self-perception, the placement test and English proficiency test except the RNBSN students due to their real life experience.

DISCUSSION

From the above analyses of the responses of the students, it is evident that health sciences' students gave priority to English for Specific Purposes (ESP) as a major component of their English course. This can be due to the fact that they are all aware of the importance of medical vocabulary and professional language in their medical

field. In the language skills also the medical vocabulary comes first in all the programs as a fundamental component of English for Specific Purposes.

Moreover, the topmost language priority of the majority of the students is being a fluent speaker in English without giving much importance to improving their listening, pronunciation, reading or writing. Their desire to be fluent speakers is mainly to speak to foreign visitors and understand the basic speaking transactions more than its importance to give presentations or to attend conferences which can also be of fundamental importance in their medical career. This reflects their being oblivious of the order of acquisition of skills. It is imperative to be fluent in other linguistic and lexical skills before fluency in speech and writing is achieved.

Similarly, the students gave priority in writing skills to writing correspondences like emails more than writing research oriented material that can in effect be a crucial part of their medical career. Likewise, they confined the listening skills priorities to classroom skills not to presentations or reports which may be more important in their medical profession than the present classroom. Students who were at advanced proficiency level correspondingly scored higher at placements tests administered by the English Language center of the university. The outcome of the needs analysis indicated that they were ready for a professional English course to support their professional needs as doctors, dentists, pharmacists and nurses. Yet in a few cases as stated earlier they are sometimes unaware or unclear of their linguistic needs as health care professionals and the revisited courses will take care of them. Therefore, the curriculum will require to identify conditions which must be met if students' judgements are to be useful, valid and reliable.

Implication to Research and Practice

Teaching English is a totally different situation in the Middle Eastern countries especially in the fast changing educational hub that is the United Arab Emirates. Extensive research on English language teaching both from the two major proficiency testing and training vendors AMIDEAST and British Council suggest constant changes with the constantly changing requirements. Research indicates polarities in the proficiency levels of candidates joining higher education. A case in point is one medical and health sciences university. On the one hand students join college with B1 level CEFR for languages. (Common European Frame Reference) after a year-long foundation courses in English and with several attempts at proficiency tests while on the other hand students are at C2 level. A research preceding the present study correlated the English Proficiency tests with other tests designed by the university for placement with multi-cultural and multilingual student population. With the dynamics of education system heterogeneity and polarities in linguistic abilities is an anticipated outcome [16]. A curriculum focused on the deliberate use of learning strategies based on the specific needs realized by the students will fulfill an outcome based education for a holistic professional growth of students. Constant re-visioning, rethinking will keep English educators pacing with the seismic changes and adjust to unprecedented teaching learning contexts.

CONCLUSION

While designing the curriculum, focus should be on discipline specific terminology, speaking situations, profession specific register students will be using both during their studies and in their professional career. These can contribute to the rest of the skills like fluency accuracy, pronunciation to improve reading and writing and as a result to improve their scores in the exams to make them better communicators in their professions. English teachers are visualized as facilitators of interactive learning providing opportunities to students to enhance their learning and to give feedback. In conclusion therefore, the needs analysis data has provided us to work towards a more dynamic approach to a contextualized course content to design training and learning resources to support students to learn in new and interesting ways.

Future Research and way forward

The impact or the effectiveness of courses designed as an outcome of the needs analyses is definite. A skill wise evaluation of the effectiveness of the courses designed as the way forward will complete the triangulated vision of needs responded by a curriculum and evaluation to check whether the needs were met with priority refinement. Moreover, the sudden transition from classroom learning with technological aids to online classroom made impended by the present covid-19 situation, will open opportunities for the teachers to adapt the curriculum of English teaching to online classes and blended learning.

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