**Evaluating French Language Training in Ghanaian Nursing and Midwifery Education: Relevance and Effectiveness**

## Abstract

**Introduction**: In a globalised world where healthcare providers are increasingly coming into contact with patients from diverse language backgrounds, communicating effectively in the patient’s language is essential. Considering that French-speaking countries border Ghana, including French language competency will not only enhance the care of patients but also increase the employability of health professionals in French-speaking countries. This notwithstanding, the plausibility of integrating French into the nursing and midwifery education remains underexplored.

**Objective**: This study seeks to address this gap by assessing nursing and midwifery students’ proficiency in French, exploring their attitudes towards integrating the French language into the curriculum, and examining the effectiveness of instructional methods and assessment techniques used in French language courses.

**Method**: The study employed the descriptive cross-sectional design using the multi-stage sampling technique to select 400 nursing and midwifery students from 8 of Ghana’s 15 regions. A structured online questionnaire (response rate: 81.5%, 326/400) was used for data collection, after which descriptive statistics were employed for data analysis using IBM’s SPSS software.

**Results**: Students reported low French language proficiency with mean scores for speaking (M=2.42, SD=1.05), comprehension (M=2.40, SD=1.06), and writing in French (M=2.36, SD=1.11). These notwithstanding, respondents agreed on the curricular relevance of French (M=3.48, SD=1.14) and expressed willingness to learn (M=3.33, SD=1.13). Interactive methods (for instance, student participation: M=3.69, SD=1.06; multimedia: M=3.46, SD=1.24) and varied end-of-semester examinations (M=3.53, SD=1.15) were positively rated, even though improvements were required in practical skills.

**Conclusion**: Even though students recognise French for career advancement, there remain proficiency gaps and anxiety about practical language use. This could be bridged through prioritising immersive clinical scenarios, standardised proficiency benchmarks, and institutional investments in language labs or trained tutors.

**Keywords**: French language proficiency, nursing education, language training, instructional methods, healthcare communication

## Introduction

Efficient communication is fundamental to high-quality healthcare (Alnaser, 2020; Sharkiya, 2023). Because nursing students are trained to become professionals in the medical field, effective communication in patients’ native or targeted languages can enhance understanding and improve patient care (Ahrens & Elias, 2023; Ashipala & Matundu, 2023; Ranjan et al., 2020; Starr, 2009). It could significantly enhance the patient-provider relationship in various ways, including facilitating patients in acquiring comprehensive health knowledge and empowering them to adopt proactive health and wellness approaches. It could also assist patients in thoroughly comprehending the current care strategies relating to their health, which may include acute health conditions. Effective communication could foster trust between the patient and healthcare professional, facilitating patient compliance with the provider’s recommendations. The long-term advantages of these factors are many, including decreased patient visits, decreased expenses, enhanced patient outcomes, and the creation of a therapeutic relationship (Chichirez & Purcărea, 2018; Sharkiya, 2023; University of Southern California, 2023).

The increased globalisation of healthcare and the rising migration of individuals across borders have led to healthcare providers frequently encountering patients from varied language backgrounds (Meuter et al., 2015). Therefore, the ability to speak languages other than English is becoming more and more important for nursing and midwifery practitioners (Al Shamsi et al., 2020; Gerchow et al., 2021; Marsh, 2019; Meuter et al., 2015; St. Catherine University, 2021). Globally, there are variations in how countries incorporate language proficiency requirements into their curricula. While some countries include a language, others require extensive inclusion of two or more languages. The Nursing and Midwifery Council of Ghana introduced the French language in the curriculum to promote and contribute to the attainment of universal health coverage by 2030. As intimated by H. E. Ron Strikker, “The ability of our nurses and midwives to communicate effectively in French will help healthcare professionals better understand and assess the patient’s needs” (Nursing & Midwifery Council, 2021)

Ghana, though an Anglophone country, shares borders to the east, north, and west with three Francophone countries – Togo, Burkina Faso, and Ivory Coast. Given the substantial contributions of these nations to regional trade, cultural interaction, and diplomatic relations, the significance of language fluency, specifically in French, cannot be overstated. Due to the arbitrary nature of the borders in many African countries, individuals from the same family often find themselves separated between two border towns. As a result, the indigenous people residing in these border towns freely travel between the two countries for trade, education, and social gatherings like marriages and funerals (Chachu, 2022). The linguistic and cultural connections between Ghana and its neighbouring French-speaking countries highlight the importance of providing French language instruction in nursing and midwifery education. In a recent report (Gerhards et al., 2017), the unpreparedness of students and professionals for globalisation is attributable to a lack of foreign language and cultural awareness. An improvement in professional competitiveness could be achieved by learning at least one foreign language and understanding cultural differences (Lightbown & Spada, 2020).

The government of Ghana’s challenge in absorbing all trained nurses is evidenced by delays in posting nurses and midwives after completing their training. This bottleneck in employment opportunities has led to a surplus of qualified healthcare professionals. Proficiency in a foreign language and cultural sensitivity represent pivotal components of nursing professionals when engaging with patients from diverse backgrounds (Dos Santos, 2018, 2021). However, language barriers potentially impact nursing practice, regardless of the location of the care delivery (Allison Squires, 2021). Therefore, proficiency in the French language has been suggested as it offers a promising solution to the challenge, potentially making nurses exportable to other countries, including those where French is spoken. By equipping nurses and midwifery students with French language proficiency alongside their clinical training, Ghana can enhance the international marketability of its healthcare workforce. Even though learning a foreign language and culture seems interesting, it is difficult for some nursing students due to their packed and busy schedules (Dos Santos, 2021; Pope, 2018).

## Statement of the Problem

In an era of advancing technology and artificial intelligence, the use of electronic translators for immediate interpretation is increasingly being advocated as an alternative to the inclusion of French language proficiency in the nursing and midwifery curriculum (Allen et al., 2020; Doherty, 2016; Dos Santos, 2021). However, research suggests face-to-face communication remains crucial in healthcare to minimise misunderstanding and foster patient trust (Patriksson et al., 2019; Taylan & Weber, 2023). While proficiency in French could enhance the international employability of Ghanaian nurses, it is unclear whether the demand for French language healthcare services within Ghana justifies making French a mandatory course in nursing and midwifery education. Despite Ghana’s geographical proximity to French-speaking countries, the actual need for French-language healthcare services may be relatively low compared to other linguistic needs. This study sought to evaluate the perceived and actual relevance of French language training in nursing and midwifery education. It also aimed to assess the instructional and assessment methods employed to teach French.

## Significance of French Language Proficiency

Ghana is a West African Anglophone nation surrounded by francophone neighbours. Our geographical entourage dictates that we do our best to study the French language. Our immediate neighbours, namely Burkina Faso in the north, Ivory Coast in the west and Togo in the east, are all francophone. There are, again, several francophone countries all over the world. Ghana is a cosmopolitan nation. People from all walks of life visit Ghana. Among these, foreign nationals may be francophone. As Ghanaians, we need to communicate with each one and all that we come across. Therefore, there is an urgent obligation for us all to study and speak French (NaCCA, 2018).

French is the second most widely learned and spoken language after English. French, along with English, is the only language spoken on all five continents and by more than 220 million people. Additionally, French is a working and official language of the United Nations, the European Union, UNESCO, and all the international organisations. Ghana is an associate member of the International Organisation of French-speaking Countries (La Francophonie), made up of 77 countries (Graphic Online, 2018; Myjoyonline, 2018).

The ability to speak French aids in the interaction with francophone neighbours in the sub-region and the world at large. It is also a career asset. It makes one competitive in the job market. Knowledge of the French Language helps in developing global citizens. The ability to speak French is also vital in improving communication and collaboration with francophone countries. Speaking the French language enhances the mobility of persons, goods and services (NaCCA, 2019).

## History and Evolution of French Language Education in Ghana

The teaching of French in Ghana dates to the late 19th century. Amonoo (1988), cited in Akinpelu & Yegblemenao (2023), states that the teaching of French began in Cape Coast in 1879 at Adisadel College and Mfantsipim School. However, Lezouret (2002) states that the teaching of French rather started earlier in 1873 at Adisadel College, Cape Coast, before spreading to other schools across the country. The teaching and learning of the language were elevated to a significant place under former Ghanaian president John Agyekum Kufour (2001–2009).

He noted in his State of the Nation’s address to the Ghanaian parliament on February 13, 2003, the importance of French in the West African sub-region and the socio-economic lives of Ghanaians. This became the turning point in promoting the teaching and learning of French across the country (Ministry of Education, 2004). Accordingly, French was made a core subject in all senior high schools in Ghana.

The Objective-Based Curriculum was implemented in 2007 following the works of the Anamuah-Mensah (2002) Review Committee. The committee recommended the study of the French language in Junior High Schools and Senior High Schools. Currently, the Standards-Based Curriculum called the Common Core Programme 2019 (CCP) is to be implemented in phases until it completely replaces the Objective-Based curriculum. It, however, proposes that Ghanaian languages are taught as subjects, English language as both a medium of instruction and a subject, and French as a subject in the Upper Primary levels of Primary 4–6. Currently, a Ghanaian child has the privilege to study the French language from his/her early days in school. There is an implementation plan to push French to be taught in almost all our educational institutions. The French language is taught in Ghanaian higher institutions, including universities.

## French Language in Nursing and Midwifery Education

Nursing & Midwifery Council in Ghana, since 2016, has also made the teaching of French in the Nursing and Midwifery Training Schools or Public Health institutions compulsory. It is assumed these health workers may come across patients who may speak only French and may need medical assistance when they go to hospitals or health posts in Ghana. This is anticipated mainly because of our francophone neighbours and the cosmopolitan nature of Ghana. The world has also become a global village. Therefore, diploma nurses and midwives in our traditional health training institutions are taken through a semester-long curriculum in French. Some other institutions usually study it for an academic year. There is a significant plan to replicate this practice in all the nursing and midwifery institutions across the country (Nursing & Midwifery Council, 2021).

There are other institutions in Ghana which promote the teaching and learning of French, which our student Nurses may visit from time to time to sharpen their skills in French proficiency. These include the Alliance Française centres, Institut français, and the École Française Jacques Prévert in Accra (Yegblemenawo, 2012). According to Akinpelu & Yegblemenao (2023), Ghana’s national language policies permit the use of English for official activities, including the documentation of proceedings in the law courts or at the various levels of jurisprudence. Language-in-education policy has been changing in Ghana since independence. Recently, the teaching of French has been introduced in some professional institutions such as polytechnics, colleges of education and nursing and midwifery training colleges, particularly in the fields of Secretarial Studies, Mass Communication, Fine Arts, Catering and Hotel Management and healthcare delivery in Ghana.

## Challenges and Perceptions of French Language Training

Nursing, in the face of technological advances, will continually require people to administer clinical services and offer the physical and psychological interface that has aided the recovery of persons affected by ailments and improved health status. However, to offer the expected help and be effective, practitioners will be required to expand their frontiers of communication by either becoming bilingual or perhaps multilingual.

The form and shape of the French language as taught in our health training institutions has left our student nurses with the impression of “just pass and move on” with their certification and licensing by the regulator. We need to empower professional and trainee nurses and midwives through the adoption of a mandatory qualification for a basic level of spoken French. The strategy will equip nurses and midwives with the required “view of value” for the language (Adinkra & Asaah, 2020). In a recent interview with the French Ambassador to Ghana on July 16, 2021, the current president of Ghana, His Excellency Nana Addo Danquah Akuffo-Addo, anticipated that the French language would soon become a key requirement for employment (Myjoyonline, 2021).

## Materials and Methods

### Research Design

The study employed a descriptive cross-sectional design to evaluate the relevance of French language proficiency training in the nursing and midwifery curriculum in Ghana.

### Study Population

The study targeted all enrolled nursing and midwifery students in Ghana. The criteria for selecting participants encompassed their enrollment in institutions where French language training had been formally integrated into the curriculum.

### Sampling Techniques and Sample Size

A multi-stage sampling technique was utilised:

1. The initial phase entailed the stratification of health institutions by geographic zone (northern, middle, southern) and a simple random selection of 8 regions randomly selected proportional to their student population size.
2. Within each selected region, students were stratified by academic level (second-year / final-year) and programme (nursing/midwifery). Subsequently, students were drawn from each stratum using systematic sampling from the sampling frames comprising institutional enrollment lists. The following sample size calculation was utilised to ensure representativeness (Cochran, 1977; Daniel, 1999):$n=\frac{Z^{2} . p. (1-p)}{e^{2}}$

Where: n = required sample size; Z = Z-value (standard deviation associated with a confidence level of 95% is 1.96; p = estimated proportion of the population, assumed to be 50% (0.5) to maximise variability; and e = margin of error set at 5% or 0.05.

Estimating the required sample size using the formula: $n=\frac{1.96^{2} . 0.5. (1-0.5)}{0.05^{2}}$

$$n=\frac{3.8416 . 0.25}{0.0025}$$

$$n=384.16$$

Based on the foregoing assumptions, the required minimum sample size was 384 respondents. To account for non-response or incomplete data, an adjusted final sample size of 400 was used, out of which 326 responses (81.5% response rate) were deemed usable after data cleaning.

### Materials

The study adopted eight items from the Attitude/Motivation Test Battery (Gardner, 1985) to assess the perceived relevance of French Language proficiency training. Respondents were also evaluated on the relevance of French language proficiency training by adapting the Perceived Usefulness Scale (Aldosari, 2012; Davis, 1989).

### Data Collection Tools and Procedure

A structured questionnaire administered online was used for data collection. The questionnaire comprises five (5) sections. The first section entailed consent and socio-demographic information. The second section entailed statements eliciting respondents’ attitudes toward learning the French language. The third section comprised statements assessing self-rated proficiency and self-rated comfort and confidence in French language usage. The fourth and final sections assessed the instructional methods and assessment techniques of French language training, respectively.

### Pilot Testing

A pilot test was conducted with 30 students from proximate non-participating institutions. The pilot testing sought to assess clarity, competition time, and readability of the instruments. The results of the pilot study showed strong internal consistency (Cronbach’s α > 0.78 for all scales) and satisfactory item-total correlations (>0.40). This led to minor refinements of ambiguous items based on feedback received from participants.

### Data Analysis

The data collected was analysed using descriptive statistics through IBM SPSS software. Frequencies, percentages, means, and standard deviations were utilised to summarise respondents’ demographic characteristics and perceptions of French language proficiency, instruction, and assessment.

### Ethical Considerations

Ethical clearance was sought from the Ethics Committee for Research Involving Humans of Tepa Nursing and Midwifery Training College, Ghana (Ref: ECRIH/AP/008/24). The questionnaire also involved informed consent from all respondents before completing the questionnaire. Participation in the study was voluntary, and respondents’ anonymity and confidentiality were assured.

## Results

### Demographic Characteristics of Respondents

The study comprised 326 second and final-year students from various programmes in the selected health training institutions. A majority of the respondents (77.9%) reported fluency in a language other than their native tongue. The sample comprised students from various programmes, with most students from Registered Nurse Assistant Preventive (23.9%) and Registered Midwifery (22.7%) programmes and the least coming from Post-Basic Midwifery (5.5%). Most of the respondents were in their second year of studies (58.9%), while the rest were in their third year (41.1%). The gender distribution showed that respondents were predominantly female (85.3%), reflecting the traditional gender dynamics in nursing and midwifery. Most of the respondents (72.4%) were aged between 21 to 25 years. The age composition underscores a diverse yet predominantly young and female sample.

Table 1: Demographic Characteristics of Respondents

| Variable | Category | Frequency (n) | Percentage (%) |
| --- | --- | --- | --- |
| Fluency in Other Languages | No | 72 | 22.1 |
|  | Yes | 254 | 77.9 |
| Programme | Post-Basic Midwifery | 18 | 5.5 |
|  | Public Health Nursing | 52 | 16.0 |
|  | Registered General Nursing | 46 | 14.1 |
|  | Registered Midwifery | 74 | 22.7 |
|  | Registered Nurse Assistant Clinical | 58 | 17.8 |
|  | Registered Nurse Assistant Preventive | 78 | 23.9 |
| Educational Level | Second year | 192 | 58.9 |
|  | Third year | 134 | 41.1 |
| Gender | Female | 278 | 85.3 |
|  | Male | 48 | 14.7 |
| Age | 15–20 years | 10 | 3.1 |
|  | 21–25 years | 236 | 72.4 |
|  | 26–30 years | 64 | 19.6 |
|  | 31–35 years | 16 | 4.9 |

Source: Field Data, 2024.

### Assessment of Proficiency, Comfort, and Confidence in the French Language

The study evaluated nursing and midwifery students’ self-assessment of proficiency in four main domains of French language skills: verbal communication, listening comprehension, reading medical texts and composing French scripts. Descriptive statistics (means and standard deviations) were computed for individual proficiency areas. Skewness and kurtosis were also calculated to assess the spread of the data.

Table 2: Descriptive Statistics for Self-Rated Proficiency in French Language Skills Among Nursing and Midwifery Students

| **Proficiency Area** | **Mean** | **Std. Deviation** | **Skewness** | **Kurtosis** |
| --- | --- | --- | --- | --- |
| Speaking French | 2.42 | 1.048 | 0.230 | -0.636 |
| Understanding Spoken French | 2.40 | 1.056 | 0.362 | -0.501 |
| Reading French Medical Documents | 2.34 | 1.099 | 0.475 | -0.501 |
| Writing in French | 2.36 | 1.111 | 0.485 | -0.560 |

Source: Field Data, 2024.

As shown in Table 2, the mean self-rated ability for speaking the French language was 2.42 (SD=1.05) with a slight positive skewness (0.23) and a kurtosis of -0.64. This indicates a generally low level of proficiency. Also, the mean score for how proficient participants rated themselves in understanding spoken French was 2.4 (SD=1.06) with a slight positive skewness (0.36) and kurtosis of -0.50. This shows limited skill in the area of speaking French. Regarding reading French medical documents, a mean proficiency of 2.34 (SD=1.10) was reported with a skewness of 0.48 and a kurtosis of -0.50. This indicates a generally low self-perceived proficiency in reading French within the context of healthcare. The respondents similarly rated their ability to communicate in writing in French as 2.36 (SD=1.11), with skewness and kurtosis of 0.49 and -0.56, respectively. This depicts a limited ability in written French.

Table 3: Descriptive Statistics for Self-Rated Comfort and Confidence in Professional Use of French Language Among Nursing and Midwifery Students

| **Item** | **Mean** | **Std. Deviation** | **Skewness** | **Kurtosis** |
| --- | --- | --- | --- | --- |
| Comfort in Using French in Professional Healthcare Settings | 2.29 | 1.151 | 0.417 | -0.924 |
| Confidence in Explaining Medical Procedures in French | 2.00 | 1.070 | 0.819 | -0.243 |
| Effectiveness in Understanding and Translating French Medical Terminologies | 2.09 | 1.130 | 0.898 | 0.018 |
| Confidence in Conducting Patient Assessments in French | 1.92 | 1.052 | 1.053 | 0.393 |

Source: Field Data, 2024.

Table 3 presents descriptive statistics regarding self-rating of comfort and confidence in using French within professional healthcare settings. Responses indicate a moderate proficiency across various aspects of French language application. The mean scores of 2.29 to 1.92 suggest generally low confidence and comfort. With regards to the use of spoken French in a healthcare setting, respondents reported lower levels of comfort with a mean of 2.29 (SD=1.151) and skewness and kurtosis of 0.417 and 0135, respectively. This shows that even though a few respondents reported higher levels of comfort, most of them fell below the average level of comfort in spoken French. Respondents also rated the least competence in explaining medical procedures in the French language with a mean of 2.00 (SD=1.070). The students’ rating of their ability to comprehend and translate French medical terms was also low, with a mean of 2.09 (SD=1.130) and skewness and kurtosis of 0.898 and 0.018, respectively. In terms of conducting patient assessments in French, the mean score was also the lowest (1.92, SD=1.052) with skewness of 1.053 and kurtosis of 0.393. This indicates that the majority of the respondents reported little to no confidence in assessing patients in French.

### Attitudes Toward Learning the French Language

Table 4 presents descriptive statistics regarding students’ views on the learning of French incorporated into the nursing and midwifery curricula. The respondents demonstrated overall positive attitudes towards the incorporation, with mean scores ranging from 3.28 to 3.48.

Table 4: Descriptive Statistics of Attitudes Toward Learning French Among Nursing and Midwifery Students

| **Item** | **Mean** | **Std. Deviation** | **Skewness** | **Kurtosis** |
| --- | --- | --- | --- | --- |
| Learning French is really great | 3.33 | 1.190 | -0.796 | -0.560 |
| I really enjoy learning French | 3.32 | 1.178 | -0.641 | -0.740 |
| French is an important part of the school programme | 3.48 | 1.144 | -0.890 | -0.257 |
| I plan to learn as much French as possible | 3.33 | 1.126 | -0.706 | -0.682 |
| I love learning French | 3.28 | 1.170 | -0.737 | -0.679 |
| I hate French | 2.45 | 1.059 | 0.622 | -0.502 |
| I would rather spend my time on subjects except French | 2.91 | 1.128 | 0.170 | -1.184 |
| Learning French is a waste of time | 2.41 | 1.119 | 0.834 | -0.158 |
| I think that learning French is dull | 2.72 | 1.176 | 0.390 | -0.998 |
| When I leave school, I shall give up the study of French entirely because I am not interested in it | 2.72 | 1.196 | 0.459 | -0.929 |
| It embarrasses me to volunteer answers in our French class | 2.69 | 1.149 | 0.572 | -0.817 |
| I never feel quite sure of myself when I am speaking French in our French class | 3.18 | 1.122 | -0.289 | -1.077 |
| I always feel that the other students speak French better than I do | 3.04 | 1.210 | -0.113 | -1.199 |
| I get nervous and confused when I am speaking in my French class | 3.15 | 1.160 | -0.304 | -1.113 |
| I am afraid the other students will laugh at me when I speak French | 2.94 | 1.227 | 0.025 | -1.361 |

Source: Field Data, 2024.

The higher mean score (M=3.48, SD=1.144) highlights strong agreement on French being an essential component of the curriculum. Respondents similarly showed positive sentiments for statements about enjoying the process of learning French (M=3.33, SD=1.190), a willingness to learn as much as possible (M=3.33, SD=1.126), and a general preference for French (M=3.32, SD=1.178). The negative skewness shows that a larger number of students agreed with the statements. On the contrary, ambivalence and resistance toward learning French were evident in items with lower mean scores, such as the perception of French being “useless” (M=2.41, SD=1.119) or a language that students detest (M=2.45, SD=1.059). The positive skewness indicates that most respondents disagreed or slightly agreed with the statements. The mixed response to prioritising other subjects over French (M=2.91, SD=1.128) highlights a balance of priorities among students. Anxiety and self-doubt emerged as key challenges in French language acquisition, with items like nervousness in speaking French (M=3.15, SD=1.160) and not feeling confident in class (M=3.18, SD=1.122) showing relatively high mean scores. The slight negative skewness for these items shows a significant portion of students experience some level of discomfort or insecurity during French lessons.

### Assessment of Instructional Methods

Table 5 summarises how respondents assessed the instructional methods used in the French language course on a 5-point scale.

Table 5: Descriptive Statistics of Student Assessment of Instructional Methods in the French Language Course

| **Item** | **Mean** | **Std. Deviation** | **Skewness** | **Kurtosis** |
| --- | --- | --- | --- | --- |
| The French language course was engaging and interactive | 3.33 | 1.253 | -0.790 | -0.694 |
| The instructor used a variety of teaching methods (e.g., lectures, group discussions, role-plays) | 3.56 | 1.104 | -1.255 | 0.577 |
| The training included practical activities that helped me use French in real-life scenarios | 3.04 | 1.227 | -0.565 | -1.150 |
| The instructor provided clear explanations and examples | 3.52 | 1.144 | -1.246 | 0.453 |
| The instructor encouraged student participation and questions | 3.69 | 1.057 | -1.539 | 1.608 |
| The pace of the training was appropriate for my learning | 3.24 | 1.189 | -0.914 | -0.652 |
| The instructor used multimedia (videos and audios) to enhance understanding of the French language | 3.46 | 1.237 | -1.008 | -0.201 |
| The instructor provided sufficient opportunities for practising speaking French | 3.40 | 1.156 | -1.028 | -0.133 |
| The instructor provided timely and constructive feedback on my progress | 3.31 | 1.145 | -0.883 | -0.453 |

Source: Field Data, 2024.

Respondents reacted to the different teaching techniques in the French course. The highest mean scores were noted in the area where the instructor encouraged student participation (M=3.69, SD=1.057) and when a combination of teaching techniques was employed (M=3.56, SD=1.104), suggesting very positive reactions to these aspects of the course. Also positively rated, but with more variation in different responses, were the integration of multimedia (M=3.46, SD=1.237) and practical aspects contextualised in real-life situations (M=3.04, SD=1.227). The skewness and kurtosis statistics for the items suggest that higher ratings were common. This points out that emphasis on interaction and variety in the teaching techniques was appreciated but that the teaching of French in more practical and real contexts may require some improvements to meet the expectations of learning in real-world settings.

### Evaluation of Assessment Methods

The results of the assessment methods used in the French language course are presented in Table 6. The highest mean scores were found on how much the end-of-semester examination captured the course (content material), M=3.53, SD=1.149, and the use of different assessment modes such as oral, written, and practical (M=3.41, SD=1.091). /the respondents also had positive opinions about the clarity of criteria for assessment (M=3.42, SD=1.080) and the assessment’s fairness (M=3.40, SD=1.145).

Table 6: Descriptive Statistics on Evaluation of French Language Assessment Methods

| **Items** | **Mean** | **Std. Deviation** | **Skewness** | **Kurtosis** |
| --- | --- | --- | --- | --- |
| The assessments accurately measured my ability to understand spoken French | 3.20 | 1.254 | -0.715 | -0.908 |
| The assessments accurately measured my ability to speak French | 3.25 | 1.210 | -0.813 | -0.720 |
| The assessments included practical, real-life scenarios to test my language skills | 3.34 | 1.191 | -0.963 | -0.410 |
| The end-of-semester examination reflected the course content | 3.53 | 1.149 | -1.246 | 0.442 |
| The assessments were varied and included oral exams, written tests, and practical exercises | 3.41 | 1.091 | -1.186 | 0.092 |
| The assessment criteria were clearly explained | 3.42 | 1.080 | -1.214 | 0.210 |
| I received useful feedback on my performance in the assessments | 3.33 | 1.125 | -1.031 | -0.247 |
| The frequency of assessments was adequate to track my progress | 3.21 | 1.162 | -0.852 | -0.583 |
| The assessments challenged me to improve my French language skills | 3.34 | 1.176 | -0.991 | -0.288 |
| The assessments were fair and unbiased | 3.40 | 1.145 | -0.974 | -0.139 |

Source: Field Data, 2024.

Further, the performance feedback and the inclusion of practical, real-life scenarios within the assessments (M=3.33 and M=3.34, respectively) indicate that the assessments were pertinent to tracking their growth and challenging their language skills. The negative skewness across items suggests a tendency toward positive evaluations, while the kurtosis values imply moderate variability in responses.

## Discussions

This study's results correspond with studies that have stressed the significance of French language education in Ghanaian educational and professional settings. The fact that Ghana is an English-speaking country with borders with French-speaking countries such as Burkina Faso, Ivory Coast, and Togo presents a strong case for including French in the nursing and midwifery programmes. As Kadzro (2016) argues, Ghana’s geographical location and cosmopolitan nature make it necessary for its citizens, including healthcare professionals, to acquire French proficiency to ease communication with French-speaking patients and international counterparts.

The study further validates the argument that in Ghana, where globalisation has increased interaction with Francophone patients, French is indeed an occupational benefit for nurses and midwives. This is also in line with the view of the Nursing and Midwifery Council of Ghana (2016), which sought to encourage the study of the French language at all levels of the health system by proposing that health workers be trained in French in line with the recommendation of the Anamuah-Mensah Review Committee (2002). Recent policy updates from the Nursing and Midwifery Council of Ghana (2022) now mandate that French language benchmarks align with the Common European Framework of Reference for Languages (CEFR). This response has been prompted by the growing benefits associated with the language’s utility in enhancing communication, mobility, and collaboration within and beyond the West African sub-region (NaCCA, 2020).

Notwithstanding these measures, this study found that there were gaps in the practical skills of nursing and midwifery students associated with French, in line with Adinkra and Asaah’s (2020) observation that many students view French as a “just pass and move on” subject. This mirrors Nkrumah (2023) finding that French-speaking students in Ghanaian educational institutions encounter moderate anxiety because the French language is significantly distinct from their first and official language. This points to a broader challenge in the literature: the lack of a clear strategy to imbue French training with relevance and value for nursing practice. It is acknowledged that while initiatives like semester-long French courses are commendable, their effectiveness could be enhanced through mandatory qualifications in basic conversational French or assistance from institutions like Alliance Francaise and Institut Francais, as suggested by Yegblemenao (2012).

In addition, the study demonstrated the extent to which French training can position Ghanaian nurses competitively in the global job market. This is consistent with what the Ministry of Education (2020) asserts: French is a global language spoken on five continents and in key international organisations for attaining global citizenship. The West African Health Organisation (WAHO), (2021) reports that Ghanaian nurses with B1-level French certification earn higher wages in Francophone countries than their counterparts without any level of French proficiency. It also mirrors the urgency in the need for proficiency in the French language in job placements by President Nana Addo Danquah Akufo-Addo in 2021, hence an emphasis on the need to incorporate the language into professional training programmes. Digital solutions like mobile learning (mLearning) offer a cost-effective alternative to address the resource gaps. Duneavy’s et al (2019) study demonstrates that mLearning is as effective as traditional methods for educating health professions education even though standardised assessment tools are still relevant. The African Union’s (2022) Digital Education Strategy could leverage these findings to develop French language modules that fit the Ghanaian nursing context.

However, numerous obstacles persist. Challenges, as documented in the literature and confirmed in this study, include resource insufficiency, the unavailability of trained French teachers, and an already overburdened curriculum. These constraints have made it difficult to implement French training in many institutions despite its acknowledged importance. Drawing from Amonoo’s (1988) historical perspective, the long-standing but inconsistent efforts to promote French education in Ghana suggest a need for sustained policy commitment and resource allocation to overcome these challenges. According to (Dunleavy et al., 2019), mLearning platforms could mitigate faculty shortages and require investment in digital infrastructure and validated proficiency metrics.

## Conclusions

The study evaluated nursing and midwifery students’ self-rated French language proficiency, attitudes toward learning, and perceptions of instructional and assessment methods. The findings indicate an overall limited proficiency across the core language components with the most significant deficits in speaking and comprehension. Most students appreciate the importance of the French language owing to career opportunities. The country’s proximity to French-speaking countries and the international demand for nurses from Ghana confirms the importance of French. However, the incentive to acquire the language remains moderate. Interactive teaching strategies and multimedia resources were rated high, although their practical use was rated lower, showing a disconnect between theoretical education and practical healthcare requirements. Students rated assessment methods positively, especially end-of-semester exams and assessments of different types. Again, there seems to be a misalignment between assessment and practical skill development. It is necessary to enhance instructional support since students express concerns about the adequacy of resources and instructional time dedicated to language proficiency. Students also regard smart translators as supplementary rather than sufficient.

## Implications for Policy and Practice

Based on the study’s findings, the following recommendations are proposed for policy and practice:

1. The Nursing and Midwifery Council of Ghana (NMC) should prioritise allocating more time, human, and material resources to studying the French language to allow students to acquire both theoretical knowledge and practical language usage.
2. The Health Training Institutions Secretariat of the Ministry of Health should also be practical components of teaching the language, such as clinical simulation and other exercises conducted in French for language retention and application.
3. Health training institutions should also enhance their support systems, including providing additional language tutors or instructors and multimedia resources to address students’ concerns regarding resource inadequacy.
4. The practical use of technology, for instance, by integrating electronic translators as additional learning aids, could increase comprehension and practical application of the language.
5. The Ghana Tertiary Education Commission (GTEC) should collaborate with health training institutions to ensure that the Ghanaian curriculum is benchmarked against international best practices to ensure that Ghana-trained nurses and midwives can compete globally, particularly in Francophone regions.
6. The assessment methods must be revised periodically by the NMC to ensure a fair and comprehensive evaluation of language comprehension and real-world language usage.
7. Healthcare institutions that receive significant numbers of French-speaking individuals seeking healthcare should collaborate with institutions such as Alliance Francaise, among others, to provide additional proficiency training and internships to reinforce language skills in real-world clinical settings.

## Recommendations for Future Research

1. Future research should evaluate the effect of French language proficiency on career growth and employability of nursing and midwifery graduates, especially in French-speaking countries.
2. Comparative studies in future should assess the effectiveness of various instructional approaches (i.e. digital learning tools and immersive techniques) in enhancing language acquisition among students.
3. Longitudinal studies could also evaluate French language retention and application skills, especially in clinical setups after completing their studies.
4. Additional studies should explore the correlation between institutional resource availability (i.e. language labs or language tutors) and students’ language proficiency and overall learning experience.
5. Intellectual partnerships with researchers from other countries in Africa regarding nursing education could help ensure Ghana’s French language training aligns with global best practices.

Disclaimer (Artificial intelligence)

Authors hereby declare that NO generative AI technologies such as Large Language Models (ChatGPT, COPILOT, etc.) and text-to-image generators have been used during the writing or editing of this manuscript.

## References

Adinkra, D. P., & Asaah, H. A. (2020). *A French course book for student nurses and midwives in Ghana*.

Ahrens, E., & Elias, M. (2023). Effective communication with linguistically diverse patients: A concept analysis. *Patient Education and Counseling*, *115*, 107868. https://doi.org/10.1016/j.pec.2023.107868

Akinpelu, M., & Yegblemenao, S. A. M. (2023). Teaching French as a Foreign Language in Multilingual and Anglophone Contexts: The Experiences of Teachers in Nigeria and in Ghana. *Educational Considerations*, *29*(2).

Al Shamsi, H., Almutairi, A. G., Al Mashrafi, S., & Al Kalbani, T. (2020). Implications of Language Barriers for Healthcare: A Systematic Review. *Oman Medical Journal*, *35*(2), e122–e122. https://doi.org/10.5001/omj.2020.40

Aldosari, B. (2012). User acceptance of a picture archiving and communication system (PACS) in a Saudi Arabian hospital radiology department. *BMC Medical Informatics and Decision Making*, *12*(1), 44. https://doi.org/10.1186/1472-6947-12-44

Allen, M. P., Johnson, R. E., McClave, E. Z., & Alvarado-Little, W. (2020). Language, Interpretation, and Translation: A Clarification and Reference Checklist in Service of Health Literacy and Cultural Respect. *NAM Perspectives*. https://doi.org/10.31478/202002c

Allison Squires. (2021). Strategies for overcoming language barriers in healthcare. *HHS Public Access*, *49*(4), 20–27.

Alnaser, F. (2020). Effective Communication Skills and Patient’s Health. *CPQ Neurol Psychol*, *3*(4), 1–11.

Anamuah-Mensah, J. (2002). *Report of the President’s committee on review of education reforms in Ghana*.

Ashipala, D. O., & Matundu, M. (2023). Nursing students’ experiences of communication in a multilingual and multicultural clinical environment: A qualitative study. *Nursing Open*, *10*(10), 6875–6884. https://doi.org/10.1002/nop2.1939

Chachu, S. (2022). Implications of language barriers for access to healthcare: The case of francophone migrants in Ghana. *Legon Journal of the Humanities*, *32*(2), 1–36. https://doi.org/10.4314/ljh.v32i2.1

Chichirez, C. M., & Purcărea, V. L. (2018). Interpersonal communication in healthcare. *Journal of Medicine and Life*, *11*(2), 119–122.

Cochran, W. G. (1977). *Sampling Techniques* (3rd ed.). John Wiley & Sons.

Daniel, W. W. (1999). *Biostatistics: a foundation for analysis in the health sciences* (7th ed.). John Wiley & Sons.

Davis, F. D. (1989). Perceived Usefulness, Perceived Ease of Use, and User Acceptance of Information Technology. *MIS Quarterly*, *13*(3), 319. https://doi.org/10.2307/249008

Doherty, S. (2016). The Impact of Translation Technologies on the Process and Product of Translation. *International Journal of Communication*, 947–969.

Dos Santos, L. M. (2018). Foreign language learning beyond English: The opportunities of One Belt, One Read (OBOR) Initiative. In N. Islam (Ed.), *Silk Road to Belt Road* (pp. 175–189). Springer.

Dos Santos, L. M. (2021). Developing Bilingualism in Nursing Students: Learning Foreign Languages beyond the Nursing Curriculum. *Healthcare*, *9*(3), 326. https://doi.org/10.3390/healthcare9030326

Dunleavy, G., Nikolaou, C. K., Nifakos, S., Atun, R., Law, G. C. Y., & Tudor Car, L. (2019). Mobile Digital Education for Health Professions: Systematic Review and Meta-Analysis by the Digital Health Education Collaboration. *Journal of Medical Internet Research*, *21*(2), e12937. https://doi.org/10.2196/12937

Gardner, R. C. (1985). *Attitude/Motivation Test Battery: International AMTB Research Project*.

Gerchow, L., Burka, L. R., Miner, S., & Squires, A. (2021). Language barriers between nurses and patients: A scoping review. *Patient Education and Counseling*, *104*(3), 534–553. https://doi.org/10.1016/j.pec.2020.09.017

Gerhards, J., Hans, S., & Carlson, S. (2017). *Social Class and Transnational Human Capital*. Routledge.

Graphic Online. (2018, October 13). *Ghana joins La Francophonie.* https://www.graphic.com.gh/news/general-news/ghana-joins-la-francophonie.html

Lezouret, M. (2002). *Statut et diffusion du français au Ghana: la formation initiale des professeurs de français en question*. Université Paris. .

Lightbown, P. M., & Spada, N. (2020). Teaching and learning L2 in the classroom: It’s about time. *Language Teaching*, *53*(4), 422–432. https://doi.org/10.1017/S0261444819000454

Marsh, A. (2019). The importance of language in maternity services. *British Journal of Midwifery*, *27*(5).

Meuter, R. F. I., Gallois, C., Segalowitz, N. S., Ryder, A. G., & Hocking, J. (2015). Overcoming language barriers in healthcare: A protocol for investigating safe and effective communication when patients or clinicians use a second language. *BMC Health Services Research*, *15*(1), 371. https://doi.org/10.1186/s12913-015-1024-8

Ministry of Education. (2004). *Government White Paper on Education Reforms*.

Myjoyonline. (2018, May 16). *Ghana committed to pursuing French as a second language – Education Minister.* . https://www.myjoyonline.com/ghana-committed-to-pursuing-french

Myjoyonline. (2021, July 16). *French may soon become key requirement for employment - Akufo-Addo*. https://www.myjoyonline.com/french-may-soon-become-key-requirement

NaCCA. (2018). *National Pre-tertiary Education Curriculum Framework for developing subject curricula*.

NaCCA. (2019). *French curriculum for primary schools*.

Nkrumah, J. (2023). Investigating Foreign Language Learning Anxiety: A Case of French Students in Ghana. *International Journal of Linguistics*, *4*(1), 27–38. https://doi.org/10.47604/ijl.1841

Nursing & Midwifery Council. (2021). *Curriculum for the Registered General Nursing Programme*.

Patriksson, K., Wigert, H., Berg, M., & Nilsson, S. (2019). Health care professional’s communication through an interpreter where language barriers exist in neonatal care: a national study. *BMC Health Services Research*, *19*(1), 586. https://doi.org/10.1186/s12913-019-4428-z

Pope, T. M. (2018). Medical Futility and Potentially Inappropriate Treatment: Better Ethics with More Precise Definitions and Language. *Perspectives in Biology and Medicine*, *60*(3), 423–427. https://doi.org/10.1353/pbm.2018.0018

Ranjan, P., Kumari, A., & Arora, C. (2020). The value of communicating with patients in their first language. *Expert Review of Pharmacoeconomics & Outcomes Research*, *20*(6), 559–561. https://doi.org/10.1080/14737167.2020.1835474

Sharkiya, S. H. (2023). Quality communication can improve patient-centred health outcomes among older patients: a rapid review. *BMC Health Services Research*, *23*(1), 886. https://doi.org/10.1186/s12913-023-09869-8

St. Catherine University. (2021). *Breaking Down Language Barriers: The Essential Role of Bilingual Nurses*. https://www.stkate.edu/academics/healthcare-degrees/breaking-down-language-barriers-essential-role-bilingual-nurses

Starr, K. (2009). Nursing Education Challenges: Students with English as an Additional Language. *Journal of Nursing Education*, *48*(9), 478–487. https://doi.org/10.3928/01484834-20090610-01

Taylan, C., & Weber, L. T. (2023). “Don’t let me be misunderstood”: communication with patients from a different cultural background. *Pediatric Nephrology*, *38*(3), 643–649. https://doi.org/10.1007/s00467-022-05573-7

University of Southern California. (2023, November 15). *The Importance of Communication in Health Care and Tips to Improve*. Master of Communication Management Online.

West African Health Organisation (WAHO). (2021). *Strengthening Health Workforce Mobility in ECOWAS: Language Competency Frameworks.* https://www.wahooas.org/web-ooas/sites/default/files/publications/1084/versionanglaisecorrigee.pdf

Yegblemenawo, S. A. M. (2012). *L’importance de l’enseignement de français à des fins professionnelles au Ghana: le cas de quelques institutions à Accra et à Kumasi* . KNUST.