


# Translanguaging in Clinical Communication at Khodijah Mother and Child Hospital and Its Implications for English for Specific Purposes Curriculum in Vocational Schools

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## A B S T R A C T

This study examines translanguaging practices in multilingual clinical communication and explores their implications for English for Specific Purposes (ESP) curriculum development in Indonesian vocational schools. While previous research has addressed translanguaging, healthcare communication, and ESP pedagogy separately, limited attention has been given to how English medical terminology, Indonesian, and local languages operate as an integrated communicative repertoire in authentic clinical workplaces or how such practices inform vocational ESP design. Drawing on sociolinguistic and translanguaging perspectives, this descriptive qualitative case study investigates how healthcare professionals at a maternal and child hospital in East Java strategically mobilize English medical terminology, Indonesian, and Javanese across multiple clinical units. Data were collected through semi-structured interviews with six healthcare professionals and analyzed thematically to identify recurrent communicative patterns. The findings demonstrate that translanguaging functions as a systematic, institutionally embedded practice rather than incidental language mixing: English serves as a resource for biomedical precision, Indonesian mediates procedural explanation, and Javanese supports interpersonal and affective alignment, particularly in high-vulnerability contexts. Beyond practical implications for curriculum development, the study contributes theoretically by extending translanguaging scholarship into professional healthcare discourse and by reconceptualizing multilingual competence as a legitimate communicative resource within ESP-oriented vocational education. The study further advances ESP discussions by proposing a translanguaging-informed perspective for vocational English curriculum development grounded in authentic multilingual workplace practices and advancing translanguaging as a framework for professional communication in ESP contexts.

**Keywords:** *Translanguaging, Multilingual Workplace Discourse, English for Specific Purposes (ESP), Vocational Healthcare Education, Professional Healthcare Communication*

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## INTRODUCTION

Healthcare communication is increasingly recognized as a complex sociolinguistic practice in which linguistic choices shape not only informational accuracy but also relational dynamics, institutional authority, and patient trust. In multilingual societies such as Indonesia, clinical interaction extends beyond monolingual models of professional discourse, requiring healthcare professionals to mobilize English medical terminology, Indonesian as the institutional lingua franca, and local languages such as Javanese within the same communicative event. Rather than operating as discrete linguistic systems, these resources form a dynamic repertoire that enables practitioners to negotiate biomedical precision, procedural clarity, and interpersonal alignment simultaneously. From this perspective, language use in healthcare reflects situated meaning-making shaped by sociocultural expectations and professional roles rather than by rigid linguistic boundaries (Wardhaugh, 2015). At RSIA Khodijah, a maternal and child hospital in East Java, such multilingual practices are embedded in everyday clinical interaction, where English indexes specialized medical knowledge, Indonesian mediates explanation and

coordination, and Javanese facilitates culturally grounded engagement with patients and families.

Despite the prevalence of multilingual communication in professional healthcare settings, vocational English education has struggled to account for these realities. Vocational schools (Sekolah Menengah Kejuruan/SMK) are designed to prepare students for immediate workplace participation, yet English instruction often remains oriented toward generalized language proficiency rather than discipline-specific communicative practices. Previous ESP scholarship has emphasized the need to align language teaching with authentic professional discourse and learners' occupational needs (Hutchinson & Waters, 2010), yet vocational healthcare programs often provide limited exposure to the multilingual communicative strategies required in clinical settings. As a result, healthcare practitioners commonly acquire English medical terminology through vocational subjects or workplace experience rather than through English classrooms, producing a disjunction between pedagogical objectives and professional communicative demands. In multilingual clinical contexts, this gap becomes particularly consequential, as effective interaction depends not on exclusive English use but on the strategic orchestration of multiple linguistic resources to ensure both comprehension and emotional reassurance.

Although translanguaging has gained increasing attention within applied linguistics, existing research tends to examine educational settings, learner identity, or classroom interaction rather than high-stakes professional communication. Studies in Indonesian contexts highlight the role of translanguaging in facilitating comprehension and reducing communicative anxiety (Putrawan, 2022; Syafitri, 2024), while healthcare communication research underscores the importance of cultural sensitivity and patient-centered language use (Cipta et al., 2024; Ketut Santi Indriani, 2025). ESP scholarship similarly advocates authentic and needs-based curriculum design, yet empirical evidence connecting multilingual workplace practices with ESP pedagogy remains limited. Consequently, how English medical terminology, Indonesian, and Javanese operate together as an integrated communicative repertoire in clinical practice and how these practices can inform vocational ESP curriculum development remains insufficiently theorized. This fragmentation across sociolinguistic, healthcare, and ESP research domains constrains a holistic understanding of multilingual professional communication and its pedagogical implications.

Responding to this gap, the present study investigates translanguaging practices in multilingual clinical communication at RSIA Khodijah and examines their relevance for ESP teaching in Indonesian vocational schools. Employing a descriptive qualitative case study design, the research analyzes how healthcare professionals strategically mobilize English medical terminology, Indonesian, and Javanese across multiple hospital units to achieve clinical accuracy, patient comprehension, and interpersonal rapport. By bridging sociolinguistic analysis of professional translanguaging with pedagogical discussions in ESP, this study contributes to a reconceptualization of vocational English education that foregrounds multilingual competence as a legitimate professional resource and advances a translanguaging-informed perspective for designing context-responsive ESP curricula grounded in authentic workplace discourse.

## METHOD

### Research Design

This study adopts a descriptive qualitative case study design to examine translanguaging practices in multilingual clinical communication at RSIA Khodijah, Gresik. Qualitative research is particularly suitable for examining naturally occurring language use and for capturing participants' perspectives within real-world contexts. Rather than testing hypotheses or measuring variables statistically, descriptive qualitative research aims to provide detailed accounts of social phenomena as they are experienced and interpreted by participants (Creswell & Poth, 2018). In this study, translanguaging is

understood as an interactional practice through which healthcare professionals strategically mobilize linguistic resources to achieve communicative goals.

More specifically, the research is framed as a descriptive case study, which aims to provide an in-depth and contextualized account of a bounded phenomenon within its real-world setting. According to Gerring, a case study involves the intensive analysis of a single case defined as a spatially and temporally delimited phenomenon, to illuminate broader theoretical issues while preserving contextual complexity (Gerring, 2017).

In this study, RSIA Khodijah constitutes the case, as it represents a multilingual healthcare institution where English medical terminology, Indonesian, and Javanese are routinely integrated in clinical interaction. Following Gerring's typology, this research is classified as a descriptive case study, as its primary objective is not causal explanation but rich empirical description of communicative practices as they naturally occur. Descriptive case studies are particularly valuable for documenting patterns, functions, and mechanisms of social phenomena that are underexplored or insufficiently theorized, allowing researchers to generate grounded insights and refine conceptual understanding (Gerring, 2017).

This design aligns with the focus of the present study, which seeks to describe how healthcare professionals strategically mobilize multilingual resources to achieve clinical accuracy, patient comprehension, and interpersonal rapport. Rather than aiming for statistical generalization, the study prioritizes analytic depth and contextual sensitivity, consistent with qualitative research principles and the goals of applied sociolinguistic inquiry. By combining descriptive qualitative analysis with a case study framework, the research can capture the complexity of translanguaging practices within a specific institutional context and relate these practices to broader discussions in sociolinguistics and English for Specific Purposes (ESP) pedagogy.

#### **Data Collection**

The research was conducted at RSIA Khodijah, a maternal and child hospital located in Sidayu District, Gresik Regency, East Java. The hospital primarily serves Javanese-speaking communities and operates within a multilingual environment, where English medical terminology, Indonesian, and Javanese are routinely used in clinical interactions. This setting provides a relevant context for examining translanguaging practices in healthcare communication.

#### **Participants**

The participants were healthcare professionals working at RSIA Khodijah, Gresik, who were directly involved in daily clinical communication. They included one medical doctor, nurses from multiple clinical units (Outpatient, Emergency, VK/PONEK, and Neonatal), one laboratory staff member, and one pharmacy staff member, representing key professional roles in maternal and child healthcare services.

All participants had a minimum of two years of professional experience, ensuring sustained exposure to multilingual clinical interaction. The medical doctor had more than five years of clinical experience, allowing for reflective insight into diagnostic and explanatory communication. Nurses, whose experience ranged from three to eight years, routinely engaged in patient-centered interaction requiring frequent linguistic adjustment across clinical contexts. The laboratory and pharmacy staff, each with more than three years of experience, were regularly involved in explaining procedures, test results, and medication use to patients, positioning them as relevant contributors to multilingual clinical discourse.

Participants were selected using purposive sampling, consistent with qualitative research principles emphasizing information-rich cases. As outlined in the researcher's undergraduate thesis framework, purposive sampling enables the selection of participants who possess direct experience with the phenomenon under investigation and are therefore able to provide meaningful, contextually grounded data (Creswell, 2018; Miles, 2014).

Selection criteria included: (1) active involvement in patient-related communication, (2) regular use of English medical terminology alongside Indonesian and/or Javanese, and (3) professional roles requiring linguistic adaptation to ensure clinical accuracy, patient comprehension, and emotional support (Creswell & Poth, 2018).

### **Data Sources and Instruments**

The primary data were collected through semi-structured interviews. Interview guidelines were developed based on the research objectives and designed to elicit participants' experiences of language use, translanguaging practices, and educational backgrounds. Semi-structured interviews enable flexibility while ensuring that key topics are systematically addressed (Miles et al, 2014). Secondary data consisted of theoretical literature on Translanguaging (Cenoz & Gorter, 2022; García & Wei, 2013a; Rabbidge, 2019), and English for Specific Purposes (Viana et al., 2019) which served as the conceptual framework for analyzing multilingual clinical communication and identify its implication for ESP teaching in vocational schools.

### **Data Collection Procedures**

Data collection was carried out in several stages. First, permission was obtained from hospital management to conduct the study. Participants were then recruited and informed about the purpose of the research, ethical considerations, and confidentiality. Individual interviews were conducted and audio-recorded with participants' consent. The interviews were conducted in a flexible manner, allowing participants to use English, Indonesian, and Javanese naturally during the interaction.

### **Data Analysis**

The interview data were analyzed using thematic analysis. The analysis involved transcribing the interviews, reading the transcripts repeatedly to gain familiarity with the data, and coding segments related to language use and translanguaging practices. Codes were then grouped into broader categories and themes that reflected recurring patterns in the data (Miles et al, 2014). This process allowed the researcher to identify how different linguistic resources were used and for what communicative purposes.

### **Trustworthiness**

To ensure the trustworthiness of the study, several methodological strategies were systematically applied in accordance with qualitative research principles. Credibility was enhanced through data triangulation across multiple clinical units, including the Outpatient, Emergency, VK/PONEK, Neonatal, Laboratory, and Pharmacy Units. This cross-unit comparison enabled the identification of recurring translanguaging patterns and reduced the risk of unit-specific bias. In addition, prolonged engagement with participants during the interview process supported contextual sensitivity to institutional communication practices.

Dependability was addressed through an iterative and transparent data analysis procedure. Interview transcripts were repeatedly reviewed, coded, and refined to ensure consistency in theme development. Analytical decisions were documented throughout the process, allowing for systematic tracking of interpretive steps. To further strengthen data validity, expert validation was conducted by specialists in sociolinguistics, English for Specific Purposes (ESP), and healthcare education, who reviewed the interview instruments and analytical categories for conceptual clarity and relevance.

Confirmability was ensured by grounding all interpretations in participants' accounts and observable linguistic patterns rather than researcher assumptions. Together, triangulation, expert validation, and iterative analysis establish a rigorous qualitative foundation for the findings (Miles et al, 2014; Creswell & Poth, 2018).

## **FINDINGS AND DISCUSSION**

This section presents an integrated account of the findings, discussion, and pedagogical implications of translanguaging practices in multilingual clinical communication at RSIA Khodijah. Drawing on interview data from healthcare professionals across multiple hospital

units, the analysis examines how English medical terminology, Indonesian, and Javanese are strategically mobilized to achieve clinical accuracy, patient comprehension, and interpersonal rapport, and how these practices inform English for Specific Purposes (ESP) teaching in vocational education.

### Findings of Translanguaging Practices

This study reveals that translanguaging constitutes a systematic and institution-wide communicative practice at RSIA Khodijah rather than an incidental form of language mixing. Across clinical units, healthcare professionals mobilize English medical terminology, Indonesian, and Javanese as an integrated linguistic repertoire to achieve clinical accuracy, patient comprehension, and interpersonal rapport.

In the Outpatient Unit, English medical terminology functions as a professional anchor for diagnostic accuracy, while Indonesian serves as the primary medium for procedural explanation and patient education. Javanese is selectively employed to establish rapport and cultural alignment with patients. These functions are summarized in Table 1, which highlights the differentiated yet integrated roles of each language.

Table 1. Micro-Linguistic Features of Translanguaging Practices in the Outpatient Unit

Micro-Linguistic Feature	Example from Data	Language Resources Involved	Communicative Function
Lexical choice (technical term)	Fever, common cold, pertussis	English medical terminology	Ensuring biomedical accuracy and professional legitimacy
Reformulation	Fever → demam	English → Indonesian	Clarifying meaning for patient comprehension
Embedded terminology	Istilah medis bahasa Inggris	English within Indonesian syntax	Maintaining efficiency while explaining clinical concepts
Interpersonal lexical choice	Bahasa Jawa untuk pendekatan pasien	Javanese	Building rapport and reducing patient anxiety

In the Emergency Unit (IGD), translanguaging practices are shaped by urgency and high-risk decision-making. English emergency codes such as Code Blue and Code Red operate as rapid signaling tools among healthcare professionals, followed by immediate reformulation into Indonesian or Javanese for patients' families. The compressed lexical choices and rapid reformulation patterns characterizing emergency communication are summarized in Table 2.

Table 2. Micro-Linguistic Features of Translanguaging Practices in the Emergency Unit

Micro-Linguistic Feature	Example from Data	Language Resources	Communicative Function
Emergency code lexicon	Code Blue, Code Red, Code Pink	English medical terminology	Rapid coordination and emergency signaling
Immediate reformulation	Code Blue → pijat jantung	English → Indonesian	Ensuring family understanding
Affective lexical choice	Bahasa Jawa saat kondisi darurat	Javanese	Reducing anxiety and emotional regulation

In the VK/PONEK Unit, translanguaging supports both obstetric precision and emotional regulation during childbirth and neonatal emergencies. English obstetric terminology (e.g., fetal distress, CPD) is consistently reformulated into Indonesian or Javanese explanations to ensure maternal understanding and psychological comfort. Micro-linguistic features such as instructional imperatives and affective lexical choices are presented in Table 3.

Table 3. Micro-Linguistic Features of Translanguaging Practices in the VK/PONEK Unit

Micro-Linguistic Feature	Example from Data	Language Resources	Communicative Function
Obstetric technical lexicon	Fetal distress, CPD	English medical terminology	Clinical accuracy and professional reference
Descriptive reformulation	Fetal distress → perubahan detak jantung bayi	English → Indonesian	Enhancing patient understanding
Instructional imperatives	"Ambil nafas panjang, meneran"	Indonesian/Javanese	Guiding patient action during labor
Affective lexical choice	Bahasa Jawa untuk menenangkan ibu	Javanese	Reducing anxiety and emotional support

In the Neonatal Unit, English neonatal terminology (e.g., cyanosis, jaundice, CPAP) functions as a shared professional lexicon among nurses and doctors, while Indonesian and Javanese are used to unpack technical meanings for parents. Reformulation and repetition emerge as dominant strategies to reduce parental anxiety and support family-centered care, as summarized in Table 4.

Table 4 Micro-Linguistic Features of Translanguaging Practices in the Neonatal Unit

Micro-Linguistic Feature	Example from Data	Language Resources	Communicative Function
Neonatal technical lexicon	Cyanosis, jaundice, CPAP	English medical terminology	Clinical precision and shared professional understanding
Embedded terminology	Cyanosis dalam kalimat Indonesia	English within Indonesian syntax	Efficient interprofessional communication
Reformulation	Cyanosis → bayi berwarna biru	English → Indonesian/Javanese	Enhancing family comprehension
Adaptive language choice	Bahasa Jawa untuk orang tua bayi	Javanese/Indonesian	Reducing anxiety and building trust

In the Laboratory Unit, English-based laboratory terms are predominantly confined to documentation and interprofessional communication. When interacting with patients, laboratory staff rely on Indonesian descriptive explanations and, in some cases, polite Javanese forms to reduce anxiety during procedures. The micro-linguistic features of laboratory communication are outlined in Table 5.

Table 5. Micro-Linguistic Features of Translanguaging Practices in the Laboratory Unit

Micro-Linguistic Feature	Example from Data	Language Resources	Communicative Function
Laboratory technical lexicon	Hemoglobin, leukosit, trombosit	English medical terminology	Diagnostic accuracy and standardization
Descriptive reformulation	Albumin → kaki bengkak pada ibu hamil	English → Indonesian	Enhancing patient understanding
Register variation	Bahasa Jawa halus saat ambil darah	Javanese	Reducing anxiety and building rapport

In the Pharmacy Unit, translanguaging is strongly oriented toward medication safety and patient adherence. English pharmaceutical terminology is rarely used directly with patients and is instead simplified into Indonesian functional descriptions, with Javanese employed for elderly patients. These strategies are summarized in Table 6, emphasizing lexical simplification and procedural paraphrasing.

Table 6. Micro-Linguistic Features of Translanguaging Practices in the Pharmacy Unit

Micro-Linguistic Feature	Example from Data	Language Resources	Communicative Function
Lexical simplification	Analgesik → obat nyeri	English → Indonesian	Ensuring patient understanding
Procedural paraphrasing	Aturan minum obat dijelaskan dengan waktu harian	Indonesian	Improving adherence to medication
Register adjustment	Bahasa Jawa untuk pasien lansia	Javanese	Reducing anxiety and building trust

Across all units, the findings indicate that healthcare professionals at RSIA Khodijah consistently employ English medical terminology, Indonesian, and Javanese as a unified communicative repertoire in clinical interaction; rather than functioning as separate language systems, these linguistic resources are flexibly mobilized to achieve precision, clarity, and interpersonal alignment, reflecting translanguaging as the strategic deployment of an integrated linguistic repertoire for meaning-making in situated interaction (García & Wei, 2013b). Furthermore, recurrent reformulation and embedding patterns were observed, in which English medical terms frequently functioned as technical anchors and were immediately reformulated into Indonesian or embedded within Indonesian and Javanese syntactic structures to ensure patient comprehension, and the consistency of these patterns across settings suggests that translanguaging constitutes a routine professional practice rather than incidental language mixing, supporting sociolinguistic views of language use as systematic, socially organized, and purpose-driven (García & Wei, 2013b).

Building on this perspective, the multilingual practices identified in this study also align with the concept of pedagogical translanguaging proposed by Cenoz and Gorter, which views multilingual communication as the integrated use of speakers' full linguistic repertoires rather than the separation of languages into fixed systems. The consistent coordination of English medical terminology, Indonesian, and Javanese across clinical units reflects how multilingual speakers activate prior linguistic resources to support meaning-making, clarity, and contextual adaptation, corresponding with the theoretical view that translanguaging fosters the flexible use of multiple languages to facilitate understanding and communication across domains (Cenoz & Gorter, 2022). This pattern also corresponds with Rabbidge's view that translanguaging reflects the natural deployment of multilingual speakers' full linguistic repertoires in response to contextual demands, where the strategic use of multiple languages supports participation, clarity, and inclusive communication rather than indicating linguistic deficiency (Rabbidge, 2019).

The findings further show that institutional roles, professional hierarchies, and situational demands regulate multilingual practices. English medical terminology is predominantly associated with interprofessional coordination and diagnostic accuracy, while Indonesian and Javanese are prioritized in patient-facing communication. This distribution aligns with workplace discourse perspectives that conceptualize professional communication as a situated activity shaped by organizational norms and task-specific constraints (Zachry & Thralls, 2007). In high-pressure contexts such as emergency care, language use becomes more compressed and functionally oriented, illustrating how communicative practices adapt to institutional urgency while remaining interactionally accountable.

In addition to informational functions, the findings highlight the affective and relational dimensions of clinical communication. The strategic use of Javanese emerges as a key resource for expressing empathy, reducing patient anxiety, and establishing rapport, particularly in emotionally sensitive interactions. This indicates that effective workplace communication in

healthcare integrates technical accuracy with interpersonal and emotional management, reinforcing applied-linguistic views of language as social action embedded in professional practice (Zachry & Thralls, 2007).

From an ESP perspective, the findings provide detailed empirical evidence of the target communicative situations faced by healthcare professionals, including interpreting specialized terminology, explaining procedures to non-specialist audiences, and adjusting language use according to interlocutor roles and contextual urgency. In line with ESP needs analysis frameworks, these observed practices represent authentic workplace communicative demands that should inform curriculum design (Brown, 2016; Viana et al., 2019). Rather than relying on monolingual or decontextualized English instruction, the findings indicate that effective vocational healthcare English requires competence in managing specialized vocabulary within multilingual interactional contexts.

Taken together, these findings delineate the institutional and interactional conditions shaping multilingual clinical communication and establish an empirical basis for interpreting translanguaging as professional practice. By documenting how translanguaging practices are embedded in professional routines and communicative tasks, this section establishes an empirical foundation for the subsequent discussion, which interprets these patterns in relation to translanguaging theory, workplace discourse scholarship, and implications for ESP curriculum development.

### **Discussions of Cross-Unit Comparison of Translanguaging Practices**

The findings of this study demonstrate that translanguaging in clinical communication at RSIA Khodijah operates as a systematic, goal-oriented, and context-sensitive practice, rather than as incidental code mixing. Across clinical units, healthcare professionals consistently draw on an integrated multilingual repertoire, mobilizing English medical terminology, Indonesian, and Javanese according to interactional goals, institutional roles, patient needs, and clinical conditions.

Consistent with Cenoz and Gorter's conceptualization of translanguaging as strategic multilingual competence, English medical terminology functions primarily as a professional and epistemic resource (Cenoz & Gorter, 2022). It ensures biomedical accuracy, standardization, and interprofessional coordination, particularly in documentation, diagnosis, labeling, and emergency signaling. However, the findings show that English is rarely used as a stand-alone communicative medium in patient-facing interactions. Instead, English medical terms are routinely embedded within Indonesian discourse or followed by immediate reformulation, indicating that accuracy and accessibility are jointly prioritized.

From a cross-unit perspective, the translanguaging practices documented at RSIA Khodijah resonate with Rabbidge's argument that multilingual interaction should be understood as a dynamic negotiation of linguistic repertoires shaped by institutional roles, pedagogic discourse, and sociocultural expectations rather than as discrete instances of code-switching. Across outpatient, emergency, obstetric, neonatal, laboratory, and pharmacy contexts, healthcare professionals demonstrate a systematic orientation toward multilingual flexibility, reflecting Rabbidge's critique of monolingual ideologies that position exclusive target-language use as the ideal communicative norm. The patterned deployment of English medical terminology alongside Indonesian and Javanese illustrates how professional authority, audience accessibility, and relational alignment are co-constructed through language choice, supporting Rabbidge's view that translanguaging enables inclusive participation and repositions multilingual speakers not as deficient users of language but as agents navigating complex communicative ecologies. In this sense, the cross-unit consistency observed in the findings reinforces translanguaging as an institutionalized communicative practice shaped by power relations, professional identity, and contextual demands, aligning with Rabbidge's broader call for reconceptualizing multilingual practice as a legitimate and strategic resource within professional discourse (Rabbidge, 2019).

Indonesian emerges as the central mediating language across all hospital units. It plays a crucial role in translating technical medical knowledge into patient-friendly explanations,

especially in procedural guidance, diagnosis clarification, and informed consent. This mediating function is particularly salient in the Pharmacy and Laboratory Units, where extended explanation, lexical simplification, and step-by-step clarification are essential for medication adherence and diagnostic understanding. Indonesian thus functions as the primary bridge between institutional medical knowledge and patient comprehension.

Javanese performs a distinctive interpersonal and affective function, especially in high-vulnerability contexts such as the Emergency Unit, Neonatal Unit, and VK/PONEK Unit. Its use reflects sensitivity to local sociocultural norms and is closely associated with rapport-building, emotional reassurance, and anxiety reduction. This finding aligns with Rabbidge's critique of monolingual ideologies, demonstrating that effective professional communication in healthcare cannot rely solely on English but must be responsive to patients' linguistic and cultural backgrounds.

Cross-unit comparison further reveals that translanguaging practices are shaped by clinical acuity and time pressure. In emergency-oriented units, communication is characterized by compressed English lexical signals followed by rapid reformulation into Indonesian or Javanese to ensure immediate understanding. In contrast, units with lower time pressure emphasize elaborated explanation, repetition, and procedural paraphrasing. Despite these differences, the underlying translanguaging logic remains consistent across units: healthcare professionals flexibly select linguistic resources from a single integrated repertoire to achieve communicative effectiveness.

These cross-unit patterns are synthesized in Figure 1, which presents a conceptual model of translanguaging in clinical communication.



Figure 1. Cross-Unit Translanguaging Model in Clinical Communication

*The figure conceptualizes translanguaging as the strategic deployment of an integrated multilingual repertoire shaped by interactional goals, professional roles, patient needs, and clinical acuity levels across hospital units.*

As summarized in Figure 1, translanguaging in clinical communication is not realized through isolated language choices but through the strategic deployment of an integrated multilingual repertoire. English medical terminology functions as a professional resource for biomedical precision, Indonesian operates as the primary mediating language for explanation and procedural clarity, and Javanese serves an interpersonal and affective role, particularly in high-vulnerability contexts. The model illustrates how interactional goals, professional roles, patient needs, and clinical acuity levels collectively influence language practices across units, accounting for both unit-specific variations and cross-unit consistency.

Building on the cross-unit translanguaging patterns synthesized in Figure 1, this study advances a translanguaging-based model of ESP professionalization that explains how vocational learners can develop the competence to participate in multilingual clinical communication. While Figure 1 describes translanguaging as it is enacted in professional healthcare settings, the proposed model conceptualizes translanguaging as a developmental mechanism through which learners progressively acquire professional communicative competence. The model translates empirical workplace practices into a staged instructional framework, aligning English medical terminology, Indonesian, and local languages with epistemic, interactional, and ethical dimensions of healthcare communication.

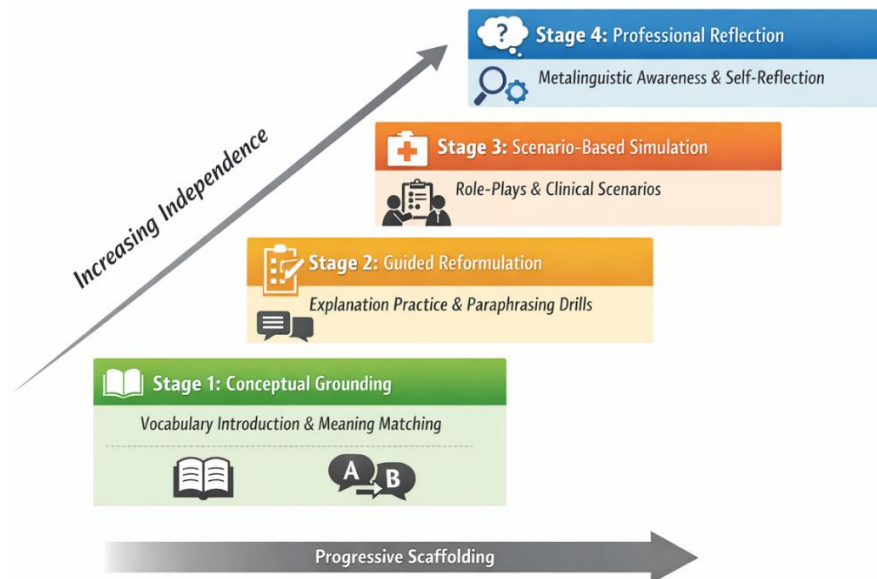


Figure 2. Translanguaging-Based ESP Scaffolding Model for Vocational Healthcare Education

This figure presents a staged ESP learning design derived from translanguaging practices in multilingual clinical communication, illustrating progressive scaffolding from conceptual grounding and guided reformulation to scenario-based simulation and professional reflection, with strategic integration of English medical terminology, Indonesian, and local languages.

#### Implications for ESP Teaching in Vocational School

The findings of this study have important pedagogical implications for English for Specific Purposes (ESP) teaching in Indonesian vocational schools, particularly in healthcare-related programs. The translanguaging practices observed across clinical units at RSIA Khodijah demonstrate that real workplace communication does not rely on isolated or monolingual English use, but rather on the strategic integration of English medical terminology, Indonesian, and local languages to achieve professional, interpersonal, and ethical goals.

Extending the translanguaging perspective discussed above, the pedagogical implications emerging from this study also align with contemporary ESP principles that prioritize learners' professional communication needs and authentic workplace practices. The cross-unit patterns observed at RSIA Khodijah demonstrate that effective communication in healthcare settings depends not only on mastery of English medical terminology but also on the ability to mobilize multilingual resources strategically to achieve clarity and patient alignment. From an ESP standpoint, this suggests that vocational English instruction should move beyond generalized language objectives toward genre-based, needs-driven practices that reflect real clinical discourse, including role-play simulations, task-based interaction, and exposure to authentic healthcare communication. Such an orientation corresponds with Viana, Bocorny, and Sarmiento's view that ESP curricula are most effective when grounded in needs analysis, specialized vocabulary development, and discourse practices tied directly to learners' future occupational contexts, thereby positioning multilingual competence as a professional asset rather than a deviation from instructional norms (Viana et al., 2019).

One pedagogical implication concern repositioning ESP instruction in vocational schools beyond a general English orientation and placing greater emphasis on contextualized medical terminology. In the clinical settings examined, English medical terms are primarily used as professional labels and technical references, while their meanings are consistently explained through Indonesian or local languages. This indicates that ESP teaching should focus not only on memorizing medical vocabulary, but also on developing students' ability to reformulate technical terms into patient-friendly explanations. Classroom activities such as guided paraphrasing, explanation practice, and role-play simulations can help students practice

translating biomedical concepts into accessible language.

Another implication relates to the consistent use of Indonesian as a mediating language, which highlights the pedagogical value of meaning-oriented multilingual instruction. Rather than discouraging the use of Indonesian in ESP classrooms, teachers can use it strategically to scaffold understanding, clarify complex concepts, and model professional explanation strategies. This approach aligns with translanguaging-informed pedagogy, where students are encouraged to mobilize their full linguistic repertoire to construct meaning and demonstrate professional competence.

A further implication underscores the importance of interpersonal and affective communication skills in vocational ESP education. The use of Javanese in high-vulnerability units such as Emergency, Neonatal, and VK/PONEK units illustrates that effective healthcare communication involves empathy, reassurance, and cultural sensitivity. ESP curricula should therefore incorporate communicative tasks that address not only informational accuracy but also emotional support, such as responding to anxious patients, explaining procedures to family members, and using polite or culturally appropriate expressions.

Furthermore, the cross-unit variation in translanguaging practices suggests that ESP teaching should be task-based and scenario-driven, reflecting different levels of clinical acuity and communicative demands. Emergency-oriented simulations can focus on concise instruction and rapid reformulation, while pharmacy or laboratory scenarios can emphasize extended explanation and procedural clarity. Such task design enables students to experience how language use shifts according to professional context rather than remaining static across situations.

Overall, the pedagogical implications derived from this study support the development of translanguaging-informed ESP curricula that are responsive to the multilingual realities of healthcare workplaces. By aligning ESP instruction with authentic clinical communication practices, vocational schools can better prepare students for real-world professional interaction, ensuring that English functions as a meaningful resource within a broader multilingual repertoire rather than as an isolated academic subject.

## CONCLUSION

This section synthesizes the key findings of the study and reflects on their theoretical and pedagogical significance by integrating cross-unit patterns of translanguaging practices in multilingual clinical communication at RSIA Khodijah. The study demonstrates that translanguaging—across the Outpatient, Emergency (IGD), VK/PONEK, Neonatal, Laboratory, and Pharmacy units—functions as a systematic, institution-wide, and goal-oriented communicative practice shaped by professional roles, patient vulnerability, clinical acuity, and interactional goals. English medical terminology consistently operates as a professional and epistemic resource for biomedical accuracy, documentation, diagnosis labeling, laboratory reporting, and emergency signaling, yet it is rarely used directly with patients; instead, its meanings are mediated through Indonesian and, when necessary, Javanese to balance accuracy and accessibility. Indonesian serves as the primary explanatory bridge between technical knowledge and patient understanding, while Javanese fulfills crucial interpersonal and affective functions, particularly in high-vulnerability contexts such as emergency care, childbirth, and neonatal services, supporting rapport-building and patient-centered care. Although translanguaging intensity varies across units—compressed lexical signaling and rapid reformulation in high-acuity settings versus elaborated explanation and procedural paraphrasing in lower-acuity contexts—all units share a common logic of flexibly mobilizing an integrated multilingual repertoire to achieve effective and ethical communication. Theoretically, these findings support Cenoz and Gorter's view of translanguaging as strategic multilingual competence and Rabbidge's critique of monolingual ideologies, while pedagogically they reveal a gap between multilingual healthcare realities and the predominantly general-English orientation of vocational

education. Consequently, the study proposes translanguaging-informed ESP instruction grounded in authentic workplace practices, meaning-oriented multilingual pedagogy, synchronization with vocational practicum, and task-based, scenario-driven learning. It further introduces a four-stage translanguaging-based ESP scaffolding model—Conceptual Grounding, Guided Reformulation, Scenario-Based Simulation, and Professional Reflection and Metalinguistic Awareness—that progressively develops students' ability to use English medical terminology as professional labels, Indonesian as a mediating explanatory resource, and local languages as interpersonal support. Ultimately, effective implementation requires curricular and policy-level alignment so that ESP becomes an integrated component of vocational healthcare training, ensuring that English functions as a meaningful professional resource within a multilingual repertoire that supports technical competence, patient safety, and culturally responsive care.

## REFERENCES

- Brown, J. D. (2016). *Introducing needs analysis and English for specific purposes*. Routledge. <https://doi.org/10.4324/9781315671390>.
- Cenoz, J., & Gorter, D. (2022). *Pedagogical Translanguaging*. Cambridge University Press.
- Cipta, A. R., Putri, D. A., & Rahman, F. (2024). Cultural sensitivity in patient-centered healthcare communication in Indonesia. *Journal of Health Communication*, 12(2), 85–97. <https://doi.org/10.3389/fmed.2024.1353037>
- Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry and research design: Choosing among five approaches (4th ed.)*. Sage Publications.
- García, O., & Wei, L. (2013). *Translanguaging: Language, bilingualism and education*. Palgrave Macmillan. <https://doi.org/10.1057/9781137385765>
- Gerring, J. (2017). *Case study research: Principles and practices (2nd ed.)*. Cambridge University Press. <https://doi.org/10.1017/9781316848593>.
- Hutchinson, T., & Waters, A. (2010). *English for specific purposes: A learning-centered approach*. Cambridge University Press.
- Indriani, S. (2025). Language choice and empathy in Indonesian hospital interactions. *Indonesian Journal of Applied Linguistics*, 15(1), 45–60. <https://doi.org/10.61132/ijmeal.v2i2.339>.
- Miles, M. B., Huberman, A. M., & Saldaña, J. (2014). *Qualitative data analysis: A methods sourcebook (3rd ed.)*. Sage Publications.
- Putrawan, G. E. (2022). Translanguaging practices in Indonesian EFL contexts. *Journal of Language and Education*, 6(3), 120–132. <https://doi.org/10.30872/calls.v8i1.7973>.
- Rabbidge, M. (2019). *Translanguaging in EFL Contexts: A Call for Change*. Routledge.
- Syafitri, N. (2024). Translanguaging and learner engagement in multilingual learning contexts. *Language Education Journal*, 9(1), 33–47. Retrieved January 9, 2026, from <http://etheses.uin-malang.ac.id/id/eprint/65268>.
- Viana, V., Bocorny, A., & Sarmiento, S. (2019). *Teaching English for Specific Purposes*. TESOL Press.
- Wardhaugh, R., & Fuller, J. M. (2015). *An introduction to sociolinguistics (3rd ed.)*. Wiley Blackwell.
- Wei, L. (2018). Translanguaging as a practical theory of language. *Applied Linguistics*, 39(1), 9–30.
- Zachry, M., & Thralls, C. (Eds.). (2007). *Communicative practices in workplaces and the professions: Cultural perspectives on the regulation of discourse and organizations*. Baywood Publishing Company.