

Challenges and Opportunities of Task-Based Language Teaching in Pharmacy Colleges: Teachers' Perspectives

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Abstract

This study explores the challenges and opportunities in implementing task-based language teaching for pharmaceutical students in the Indian context. Given the growing demand for spoken English in pharmacy careers, ranging from in-class presentations, seminars, and conferences to job interviews after M. Pharm. and interviews for PhDs and postdoctoral research, it identifies a glaring curricular gap where English language instruction fails to meet learners' requirements. It is a qualitative study drawing on semi-structured interviews with ten teachers; it employs thematic analysis to determine the institutional and pedagogical factors in executing TBLT in pharmacy colleges to improve English fluency. Furthermore, it recommends evidence-based strategies and curriculum reforms to equip learners with essential academic and professional skills.

Keywords: Curriculum reform; Pharmacy Careers; Task-Based Language Teaching


INTRODUCTION


For Indian pharmacy students, especially in the globalized pharmaceutical scene, speaking English is a must-have. Success in postgraduate education, international conferences, clinical consultations, and research outputs depends on English proficiency. Nevertheless, According to teachers' responses in interviews, English instruction in pharmacy education remains primarily theoretical, typically confined to the first semester of the B. Pharm curriculum, and lacks significant emphasis on communicative competence. Students are thus underprepared for practical, language-intensive assignments, including patient contacts, academic presentations, and interviews. Rooted in Communicative Language Teaching (CLT), Task-Based Language Teaching (TBLT) advocates language acquisition using real, goal-oriented activities including mock interviews, seminar presentations, and clinical role-plays (Ellis, 2003; Nunan, 2004). TBLT, despite its compatibility with the experiential learning thrust of NEP 2020, has yet to gain traction in Indian pharmacy institutions. Rigid academic frameworks, exam-centric practices, restricted instructional freedom, and institutional stagnation are among the barriers cited by Pateliya (2019). Particularly in healthcare education, the international study supports the use of TBLT in English for Specific Purposes (ESP)

(Basturkmen, 2010; Boshier, 2010). Still, many Asian setting have cultural elements like teacher-centered traditions and infrastructure constraints that make adoption difficult (Carless, 2007). Further hindering communicative language education are problems with outdated resources, inadequate teacher preparation, and student anxiety (Michael & Kennedy, 2023). This study investigates how TBLT can improve spoken English competency among pharmacy students, thus filling in curricular and pedagogical voids in India's technical education scene.

LITERATURE REVIEW

Task-Based Language Teaching (TBLT) is a meaning-focused pedagogical approach that promotes language proficiency, particularly in speaking and listening, through authentic, goal-orientated tasks (Ellis, 2003; Willis & Willis, 2007). Nunan (2004) emphasizes that tasks reflecting real-life communication are particularly relevant in English for Specific Purposes (ESP). Empirical studies confirm TBLT's effectiveness: Albino (2017) reported improved speaking fluency and grammatical accuracy among EFL learners in Angola, while Xie and Lan's (2025) meta-analysis of 64 studies affirmed gains in fluency, accuracy, and learner confidence through real-world communication tasks.

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Rust, Gentry, and Ford (2020) conducted a two-year study to evaluate the impact of a structured communication skills course on first-year pharmacy students' communication apprehension. The course, taught by faculty members, incorporated active learning techniques such as role-plays, small-group discussions, and pharmacy-relevant case scenarios. Findings revealed a statistically significant decrease in students' anxiety related to public speaking, interpersonal interactions, and group communication. These results emphasize the critical importance of integrating spoken communication training early in pharmacy education to enhance students' confidence and preparedness for real-world clinical and professional interactions.

In pharmacy education, effective communication is essential for patient safety, clinical decision-making, and interprofessional collaboration (Adrian, Zeszotarski, & Ma, 2015). However, communication training is inconsistent across curricula. Wallman, Vaudan, and Sporrang (2013) observed improvements when structured communication modules were introduced, and poor verbal skills have been linked to diminished patient care and career progression (Kimberlin, 2006; Parkhurst, 1994). Epp et al. (2019) highlight that spoken English training enhances pharmacy students' competence in real-world interactions.

Key components of TBLT, such as role-plays and simulations, have been effective in developing oral fluency and communication adaptability (Boesen et al., 2009). Annamalai, Kumar, and Singh (2023) found that role-plays and group discussions improved students' prescription-related communication. Similarly, Puttagunta and Pulipati (2017) advocate experiential learning through clinical preceptorship to build communicative competence, echoing TBLT principles. Moss et al. (2017) argue for context-specific, evidence-based communication training, aligning with TBLT's emphasis on authenticity and task relevance.

Although TBLT has gained traction in technical fields such as engineering and business English in India (Hasnain & Halder, 2021; Kumar & Maheswari, 2024; Shinge, 2022), its application in pharmacy education remains limited. Bhanu and Selvaraj (2023) report low levels of spoken English fluency and confidence among pharmacy students, while Hasan (2008) calls for integrating

communication modules tailored to pharmaceutical contexts. Teachers across different contexts express support for TBLT but struggle with its implementation due to systemic constraints. Musazay (2018) found that Malaysian teachers valued TBLT for promoting communication skills but faced rigid curricula and lack of support. Similarly, Nguyen and Nguyen (2021) reported that Vietnamese lecturers appreciated TBLT's benefits but were hindered by large classes, limited training, time constraints, and exam-focused systems. Both studies show that while TBLT is well regarded, practical challenges often lead to selective or blended use.

Rationale and Research Gap

Despite increasing demands for oral English fluency in M. Pharm studies, conferences, interviews, and collaborative research, Indian pharmacy curricula remain largely theoretical. Communication skills training is often minimal or absent, leaving students underprepared for real-world professional tasks Awandekar et al. (2016). A disconnect between classroom instruction and industry needs is observed. A South Karnataka study by Lysetty et al. (2023) found only 10% of final-year students demonstrated basic communication proficiency, revealing a critical skill gap.

Task-Based Language Teaching (TBLT) offers a potential solution, promoting fluency and critical thinking through real-life tasks (Yu, Mofreh, & Salem, 2024)). However, its implementation in pharmacy education remains limited particularly for rural and semi-urban students still taught via General English (EGP) methods (Manickam & Nemade, 2018).

Educators often feel unprepared to teach communication skills (Jalal et al. (2018). Dubey et al. (2018) advocate continuous, practice-based training aligned with industry demands. Subin et al. (2022) noted over 40% of Pharm. D. graduates lacked confidence in spoken English, stressing the need for ESP-based modules (Sarmah & Tamuli, 2023).

Although TBLT's benefits are established in general ESL contexts (Pham & Nguyen, 2018; Neupane, 2024), its application in Indian pharmacy education remains underexplored. This study addresses the gap by examining TBLT's relevance for spoken English development in M. Pharm programs and identifying institutional,

pedagogical, and learner-level barriers to its effective implementation.

RESEARCH DESIGN AND METHODOLOGY

Research Objectives

The primary aim of this study is to explore the role of Task-Based Language Teaching (TBLT) in enhancing spoken English fluency among pharmacy students in India. The study specifically seeks to:

Identify the key barriers to implementing Task-Based Language Teaching (TBLT) in pharmacy colleges in India.

Examine the effectiveness of TBLT in developing oral fluency in English among pharmacy students.

Explore strategies and institutional support mechanisms to overcome the challenges associated with TBLT implementation.

Research Questions

This study is guided by the following research questions:

What are the primary challenges faced by teachers in implementing Task-Based Language Teaching in Indian pharmacy colleges?

What strategies can be adopted to effectively overcome these challenges and enhance oral fluency in English through TBLT?

What are the key institutional, pedagogical, and contextual barriers to implementing Task-Based Language teaching in pharmacy colleges across India?

Research Design

This research adopts an exploratory approach aimed at gaining in-depth insights into the implementation of TBLT in English language classrooms within pharmacy colleges in India. A qualitative methodology is appropriate for understanding complex educational phenomena from the perspective of those experiencing it, and for capturing rich, detailed narratives that may inform policy and pedagogical practices.

METHODOLOGY

Sampling and Participants

The study employed purposive sampling to select ten English language faculty members from five reputed pharmacy colleges across different regions of India. Participants were selected based

on their experience in teaching English to pharmacy students and their familiarity with communicative teaching methods, including TBLT.

Data Collection

Depending on the participants' availability and convenience, we gathered data via semi-structured interviews. This method allows for flexible probing of participants' responses, enabling a deeper and more nuanced understanding. Every interview, under participants' permission, ran 45 to 60 minutes and was audio recorded. We designed the interview process to reveal the participants' experiences, challenges, viewpoints, and approaches to incorporating TBLT into their courses. Investigating lived experiences, institutional constraints, and students' perceptions of their responsiveness to task-based instruction took center stage.

Data Analysis

Thematic analysis was conducted using Braun and Clarke's (2006) six-phase framework to interpret the qualitative data derived from in-depth interviews. This approach was selected for its systematic ability to identify patterns relevant to educational research, particularly in exploring perceptions and practices related to Task-Based Language Teaching (TBLT) in pharmacy education.

The process began with data familiarization through repeated reading of verbatim transcripts, followed by initial coding of meaningful excerpts. Codes were then reviewed, refined, and grouped into broader themes that aligned with the study's objectives. An iterative process ensured that themes were data-driven and not externally imposed. Cross-referencing with the raw data enhanced the validity of emerging themes.

The final themes-institutional limitations, student engagement and resistance, pedagogical innovations, and perceived impact on fluency captured the core challenges and strategies related to spoken English instruction through TBLT in Indian pharmacy classrooms. To ensure credibility, participants were invited to review the transcripts and thematic interpretations. Their feedback was incorporated to enhance accuracy and representation of their perspectives.

FINDINGS

Thematic analysis of interviews with ten English language faculty (F1–F10) from five Indian

pharmacy institutions revealed key findings which can be categorized as follows;

Challenges in Implementing TBLT

According to the interviews, Task-Based Language Teaching (TBLT) presents major challenges for English faculty members working in pharmacy schools. Lack of institutional support is a major issue; F3 says, "I had to create my tasks using intuition," and F7 raises concerns about restricted access to language labs. Teachers also stressed the lack of formal training in TBLT, big and heterogeneous class sizes, and shared teaching infrastructure, all of which exacerbate implementation challenges. Furthermore, acting, as barriers are curriculum rigidity and exam-centric teaching strategies. While some expressed dissatisfaction with grammar-orientated pedagogy that limits chances for communicative practice, F1 observed, "Our syllabus is exam-orientated... there's no section to assess speaking skills." Problems connected to students also surfaced especially language anxiety and resistance to active involvement. "Students hesitated during role-plays and even skipped classes," F5 noted, pointing to psychological barriers to language use in a task-based format.

Strategies to Enhance Oral Fluency

Teachers suggested several effective approaches to improve oral fluency with TBLT. With F6 pushing, "We need formal training to design and implement tasks meaningfully," most attendees, pointed out the need for organised teacher training programs. The reform of the curricula also took center stage since F2 and F5 argued for including oral communication elements in tests to validate speaking assignments. F4 and F8 advised mixed-ability grouping and slow task progress to help students overcome anxiety, thus enabling them to develop confidence over time. Peer support was also seen to be helpful; F9 said that shy students started talking with classmate encouragement by the fifth or sixth session. These doable tips show how TBLT can successfully encourage oral fluency among pharmacy students with appropriate scaffolding and institutional support.

Barriers in adopting TBLT

Responses indicated a network of barriers obstructing TBLT use in an Indian pharmacy programs. Institutionally, teachers lack support due to inadequate infrastructure like language labs

and minimal administrative focus on English proficiency. As F7 notes, rigid curricula and outdated assessments focused on rote grammar and written tests leave little room for developing communicative competence. Contextually, resistance and anxiety in pharmacy classrooms stem from students' lack of prior exposure to communicative strategies as well as from linguistic diversity and mixed proficiency levels. Reflecting TBLT's transformative impact once barriers are lifted, F10 shared a breakthrough: "A student who once struggled to introduce herself delivered a 5-minute presentation."

Collectively, the insights of F1 to F10 reveal both the potential and the practical challenges of implementing TBLT to enhance oral fluency in pharmacy classrooms.

DISCUSSIONS AND IMPLICATIONS

Findings highlight the discrepancy between the need for communicative, student-centered approaches like task-based language teaching (TBLT) and exam-oriented courses. Institutional barriers, including strict syllabi, limited oral assessment, and high student anxiety as per Krashen's Affective Filter Hypothesis (Kimberlin, 2006; Parkhurst, 1994; Krashen, 1982), hamper speaking English. Low-stakes activities like mock interviews and role-plays progressively improved fluency and confidence, despite initial student reluctance due to fear of judgement, aligning with Aljasir (2024) and Madiyes et al. (2022).

The lack of formal communication assessment reduces the sustainability of TBLT (Subin et al., 2022; Sumana et al., 2018). Curricular reform, faculty training, and communication-focused assessments are essential (Hasnain & Halder, 2021; Basturkmen, 2010). To bridge the academia-industry gap, real-world projects and simulation-based learnings should be institutionalized (Wallman et al., 2013; Langley, 2010).

Moreover, the differences between faculty assessments and student impressions highlight the need for organized comments (Lundquist et al., 2013). Preceptorship also plays a vital role in shaping professional communication skills during internships (McDonough & Bennett, 2006).

Ultimately, integrating TBLT with institutional backing and hands-on learning can elevate spoken English from a peripheral skill to a central component of pharmacy education.

CONCLUSION

This study contributes to the growing body of literature advocating for communicative English instruction in professional courses. In Indian pharmacy colleges, the effective implementation of task-based language teaching hinges on

curriculum reform, teacher training, and institutional support. By overcoming these challenges, pharmacy education can develop professionals who are not only technically proficient but also confident communicators, well equipped for patient care, collaborative practice, and global career paths.

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