

DOI 10.51313/alumni-2020-7

Course Material Adaptation for Content and Language Integrated Learning

Lászlóné Kántor
csereszisz@gmail.com

Abstract

Content and Language Integrated Learning (CLIL) – as a form of education when students learn non-language subjects in an additional language – had already existed in ancient times, but the term itself was adopted in 1994. The driving force behind its development in Europe was the birth of the European Union. If European citizens want to enjoy the benefits of an integrated Europe, they need to be able to communicate at least in one foreign language. According to the European Commission, CLIL is one of the innovative methods capable of improving the quality of language teaching. One of the obstacles to the general implementation of CLIL was initially the lack of appropriate teaching materials. It was examined whether there is adequate course material available for teaching first aid in English. The document analysis revealed that there is no suitable course material. A five-hour first aid course was held for Grade 8 students at three bilingual primary schools in Budapest. To do this, an introductory, a theoretical, a practical, a summary, and an assessment lesson were developed. This article presents the steps of course material development for Content and Language Integrated Learning and illustrates it with practical examples.

Keywords: CLIL, course material adaptation, first aid, 4Cs framework, language triptych

Introduction

Content and Language Integrated Learning (hereafter referred to as CLIL) is a dual approach to education “...in which an additional language is used for the learning and teaching of both content and language” (Coyle et al. 2010: 1). CLIL is a particularly effective way of learning languages because it supports instinctive language acquisition, “a process similar, if not identical to the way children develop ability in their first language” (Krashen 1982/2009: 10). According to Marsh and Lange, “CLIL offers opportunities to allow youngsters to use another language naturally, in such a way that they soon forget about the language and only focus on the learning topic” (2000: 6).

The author’s interest started in CLIL when she was invited to spend nine months in Durban, South Africa, to acquire English while she spent several months observing Biology, English and drama lessons in an English-medium school. She was also allowed to hold a first aid course in the school, where the mother tongue of most of the students was not English, so when they learnt first aid in English, they also acquired the language. As you can see in the photograph below, they enjoyed this practical training very much.



The story continued when the author won an Erasmus Scholarship to Ghent University in the last semester of her studies at Kodolányi János University. It also contributed to her improvement in teaching English through teaching a subject in English. This was possible because she could fulfil a part of her teaching practice in one of the teaching-practice schools of the Belgian partner institute. As Belgian students are not native English-speakers, the lesson in which she taught the vocabulary of first aid in English could be regarded as a CLIL lesson.

The author decided to write her thesis about this approach and held a five-hour first aid course for Grade 8 students at three bilingual primary schools in Budapest. The training consisted of five lessons of 45 minutes each, with the transfer of theoretical knowledge and practical skills on first aid. The teaching programme was adapted to the needs and abilities of the eighth-grade students.

In her thesis, the hypotheses that first aid is an ideal topic for content and language integrated learning if it is taught in an experience-based manner, and that course material development has to be done by the teacher for teaching first aid in English were justified. The method of teaching first aid in English believed by the author to be the best practice for developing course material and teaching English to non-English speakers was presented.

This paper aims to present the steps of course material development for Content and Language Integrated Learning and to illustrate it with practical examples.

CLIL

CLIL is an acronym for Content and Language Integrated Learning. This term was coined by David Marsh, a lead expert at the University of Jyväskylä Group, Finland. He used it first in 1994. According to Marsh, “CLIL refers to situations where subjects, or parts of subjects, are taught through a foreign language with dual-focused aims, namely the learning of content and the simultaneous learning of a foreign language” (1994). Graddol's definition calls attention to another important aspect: “CLIL is an approach to bilingual education in which both curriculum content – such as Science or Geography – and English are taught together. It differs from simple English-medium education in that the learner is not necessarily expected to have the English proficiency required to cope with the subject before beginning study” (2006: 86). Nikula, Dalton-Puffer, Llineates and Lorenzo (2016) emphasize that CLIL has taken a great deal from the earlier forms of bilingual education, immersion and content-based instruction. The difference between immersion and CLIL is that in the latter case “the target language is a foreign language and the target group is the linguistic majority of a certain country” (Scott and Beadly, 2014: 3).

Course (Learning) material

“In educational contexts, learning materials can be defined as information and knowledge that are represented in a variety of media and formats, and that support the achievement of intended learning outcomes. Learning materials are in adherence with the objectives and requirements of a regional or national curriculum” (Mehisto 2012: 1).

Must Teachers Develop Course Material for Teaching First Aid in English?

As evidenced by document analysis, there are no first aid lessons in the English language Biology textbooks published in Hungary, nor in the workbook issued by Cambridge University Press specifically for CLIL. Biology books written in Hungarian contain one or two lessons in which first aid knowledge is mentioned, but these curricula are inadequate for content and language integrated learning and not just because they are not written in English.¹

The transfer of theoretical first aid knowledge alone does not achieve the goal of being able to make the most appropriate decision in an emergency. This requires practical training. Various bandaging techniques, the correct positioning of the casualty and especially resuscitation can only be learned by practice. Neither this practical training nor the development of language skills is possible without any communication. There is a need for tasks in which learners can gain experience and communicate as much as possible, in this case in English. So CLIL teachers must develop course material for teaching first aid in English.

Planning Tools

The 4Cs Framework

According to Professor Do Coyle (2005: 5), “There are four guiding principles upon which a CLIL programme can be built.” All of the principles start with the letter C, so it is called the 4Cs framework. It is a conceptual tool that provides a planning map for CLIL. The four principles and the concepts covered by them are:

CONTENT: progression in knowledge, skills;

COMMUNICATION: interaction, language using to learn;

COGNITION: learning and thinking processes;

CULTURE: developing intercultural understanding and global citizenship (Coyle 2005: 5) (Coyle et al. 2010: 41).

The Language Triptych

The language triptych is a tool for planning communication, which could help us to integrate cognitively demanding content with language learning and usage.

According to Coyle, there are 3 interrelated types of language:

- Language OF Learning is the language that is “needed for learners to access basic concepts and skills relating to the subject theme or topic” (Coyle et al. 2010: 36-37);
- Language FOR Learning is the language “needed to operate in a foreign language environment” (Coyle et al. 2010: 37);
- Language THROUGH Learning is “the language generated in the process of learning” (Martín del Pozo 2016: 144).

¹ There is a Hungarian organization which deals with first aid training for students of at least Grade 5 and up. <https://elsosegely.hu/>

The Steps of Planning a CLIL Unit Illustrated with Examples

Content

The first step is to define the content, the teaching aims or objectives, and the learning outcomes. Of course, to design a unit for processing new curricula, we need to be aware of the students' prior knowledge.

Content of first aid course of five hours (inter alia)

- What does the "DRSABCD Action Plan" mean? (It is a vital aid in assessing whether a patient has any life-threatening conditions and if any immediate first aid is necessary.)
- What are the symptoms and the correct treatment of fainting, stroke, and choking?
- How to put an unconscious but well-breathing casualty in the recovery position?
- How to treat severe bleeding?
- How to do CPR (i.e. Cardio-Pulmonary Resuscitation)?
- How to call for an ambulance?

Cognition

Explore the kind of thinking skills that can be developed. "Tasks need to be designed to trigger higher-order thinking skills" (Meyer 2010: 24).

To enable the learners to create their interpretation of content, they had to:

- Memorise keywords and expressions and apply these.
- Transfer key language.
- Gather information from educational videos.
- Collaborate, that is, share information with classmates.
- Complete a worksheet with information about a concrete injury/health problem and its proper treatment.
- Make a presentation and role-play using key vocabulary.

The last point is very important because learners had to use their higher-order thinking skills, they had to create, not only to remember, understand and apply.

Culture

Consider the CULTURE/citizenship implications with the help of the following questions:

- a) "What are the cultural implications of the topic?"
- b) How does the CLIL context allow for 'value added'?
- c) What about otherness and self?
- d) How does this connect with the all Cs?[sic]" (Coyle 2005: 6)

Cultural Implications of a Five-Hour First Aid Course

- Become aware of the importance of first aid.
- Understand that certain types of injuries or health conditions can quickly lead to death without the help of bystanders.
- Be culturally sensitive, that is, be aware of differences in people without assigning these a value.
- Do not think in stereotypes, or let personal biases impact the way you help people.

Communication

The next step is to link content with communication. To do this, we should answer the following questions:

- a) “What language do they need to work with the content? Specialised vocabulary and phrases?
- b) Will I need to check out key grammatical coverage of a particular tense or feature?
- c) What about the language of tasks and classroom activities?
- d) What about discussion and debate?” (Coyle 2005: 6)

Communication in case of a Five-Hour First Aid Course

➤ Language OF Learning (inter alia)

Key sentences needed: Are you alright? Can you please help me? Lie down. Sit down. Raise your arms. Smile. What's your name? Don't worry! Everything will be alright. Please, call an ambulance. Open a window, please.

Key vocabulary: parts of the body + bones, organs + ambulance, bleeding, breathing, burn, check, choking, circulation, cough, damage, danger, encourage, gently, infection, pulse, shake, tilt, treatment

➤ Language FOR Learning

In this case, this covers the words, expressions and grammatical structures needed to:

- explain the symptoms of a health problem or steps in the treatment of classmates;
- give instructions to a patient;
- make an oral presentation;
- work in pairs and groups;
- understand instructions;
- discuss.

➤ Language THROUGH Learning

The new language emerges by:

- doing word search puzzles and crosswords;
- watching educational videos and doing gap-filling in groups;
- watching practical first aid demonstrations about CPR, recovery position and bandaging and practising these skills;
- using special NEW first aid vocabulary: abdominal thrust, back blow, bystander, casualty, conscious, CPR, defibrillation, fracture, recovery position, reassure, stroke.

Course Material Adaptation for Teaching First Aid in English (for Grade 8 Students of Bilingual Schools in Hungary)

➤ Two of the criteria for producing quality CLIL materials are:

- the fostering of cooperative learning;
- the seeking of ways to incorporate authentic language and authentic language use.

These two criteria can be combined with providing students with gap-filling tasks that they can complete after watching authentic instructional videos multiple times. (As an example see following works cited section; in this instance words written in large block letters were omitted

in the student version of this task. The instructional video that served as the basis for this exercise can be viewed by clicking on the following link:
<https://www.youtube.com/watch?v=ozzZVQQTvo4>)

In practice, in one of the lessons, learners had to work in groups of four. The four groups watched four different videos. The author gave written instructions on what a first aider should do with the patients in these cases, but with missing words. The students had to complete the instructions based on the video by inserting the missing words. Thereafter they had to teach the other groups what they had learnt. They were required to do it by role-playing.

Conclusion

Therefore, working with authentic video materials in group work and then presenting situations with role-playing is considered best practice in CLIL because it helps students to understand the content of the curriculum in a foreign language and to learn correct pronunciation. Cooperative learning maximizes the number of communication opportunities and role-playing promotes the development of higher-order skills. It is the self-developed course material that allows students to understand or acquire new curricula in a foreign language without frontal teacher explanation. To do so, however, the teacher must locate appropriate language-level videos and the tasks that support the process must be compiled. The invested work, however, yields generous returns.

Works Cited

- Chest Heart & Stroke Scotland. (01/09/2016). *CPR - Simple steps to save a life - Animated Explanation Video - Health Sketch*. (Video file)
<https://www.youtube.com/watch?v=ozzZVQQTvo4> [retrieved: 29/01/2018]
- Coyle, D. 2005. *CLIL Planning Tools for Teachers*. Nottingham: The University of Nottingham.
https://www.unifg.it/sites/default/files/allegatiparagrafo/20-01-2014/coyle_clil_planningtool_kit.pdf [retrieved: 31/08/2015]
- Coyle, D., Hood, P., Marsh, D. 2010. *CLIL Content and Language Integrated Learning*. Cambridge: Cambridge University Press
- Graddol, D. 2006. *English Next*.
<https://englishagenda.britishcouncil.org/sites/default/files/attachments/books-english-next.pdf> [retrieved: 16/05/2018]
- Krashen, S.D. 2009. *Principles and Practice in Second Language Acquisition*.
http://www.sdkrashen.com/content/books/principles_and_practice.pdf (Original work published: 1982) [retrieved: 15/12/2017]
- Marsh, D. 1994. "Bilingual education & content and language integrated learning." In: International Association for Cross-cultural Communication (Eds.), *Language Teaching in the Member States of the European Union (Lingua)*. Paris: University of Sorbonne.
- Marsh, D. and Langé, G. 2000. *Using Languages to Learn and Learning to Use Languages*. TIE-CLIL: Jyväskylä & Milan. <http://archive.ecml.at/mtp2/clilmatrix/pdf/1uk.pdf> [retrieved: 11/05/2018]
- Martín del Pozo, M.A. 2016. "An approach to CLIL teacher language awareness using the Language Triptych." *Pulso. Revista de Educación*. 2016, 39. 141-157.
https://www.researchgate.net/publication/308792749_An_approach_to_CLIL_teacher_language_awareness_using_the_Language_Triptych [retrieved: 24/05/2018]
- Mehisto, P. 2012. "Criteria for producing CLIL learning material." *Encuentro 21*, 2012. 15-33. http://www.encuentrojournal.org/textos/3.%20Mehisto_rev.pdf [retrieved: 10/12/2017]
- Meyer, O. 2010. "Towards quality CLIL: Successful planning and teaching strategies." *Pulso. Revista de Educación*. 2010, 33. 11-29. [retrieved: 12/10/2019]
- Nikula, T., Dalton-Puffer, C., Llinates, A. and Lorenzo, F. 2016. "More than content and language: the complexity of integration in CLIL and multilingual education." In: Nikula, T., Dafouz, E., Moore, P. and Smit, U. (Eds.), *Conceptualizing Integration in CLIL and Multilingual Education*. 1-25
<https://www.ntnu.edu/documents/1263498481/1275096220/Nikula+et+al+2016.pdf/4328441f-11c1-4679-9cd4-07890ae66cb7> [retrieved: 07/05/2018]
- Scott, D. and Beadle, S. 2014: Improving the effectiveness of language learning: CLIL and computer assisted language learning.
http://ec.europa.eu/dgs/education_culture/repository/languages/library/studies/clil-call_en.pdf [retrieved: 12/05/2018]

DR'S ABCD Action Plan

First put your (1) **GLOVES** on – in order to avoid *cross infection*. (= transmitting germs or infection to a casualty or contracting infection yourself from a casualty.)

D check for (2) **DANGER**: Ensure that the area is (3) **SAFE** for yourself, others and the patient.

R check for (4) **RESPONSE** : (5) **SHAKE** them gently by the shoulders and ask them loudly (6) “ARE YOU ALRIGHT?”

If the casualty does not (7) **RESPOND**, he/she is (8) **UNCONSCIOUS**.

SHOUT (9) for help as any assistance would be helpful.

A check (10) **AIRWAY** :gently tilt the head (11) **BACK** to open up the (10) **AIRWAY**.

If foreign material is present clear (10) **AIRWAY** with fingers.

B check for (12) **BREATHING** = look, hear and feel for it.

If it is OK – place the casualty in the (13) **RECOVERY POSITION** in order to clear his (10) **AIRWAY**. (If (8) **UNCONSCIOUS** casualty is lying on his back, his (14) **TONGUE** can fall back & block the airway.)

Ask another person to call the (15) **AMBULANCE** (104 / 112 in Hungary).

If you are alone, make the call yourself.

If less than 2 **BREATHS** (16) in 10 seconds, go to the next step.

C start (17) **CPR** = (18) **CARDIO-PULMONARY RESUSCITATION**

It is an emergency procedure in which the heart and lungs are made to work by compressing the chest over the heart and forcing air into the lungs. It is used to maintain circulation when the heart has stopped pumping on its own.

Perform 30 **COMPRESSIONS** (19) followed by 2 **RESCUE BREATHS** (20)

or do the hands only (17!) **CPR** until **HELP ARRIVES** / **THE PATIENT RECOVERS**.

D apply a (21) **DEFIBRILLATOR** (**AED**) if available and follow voice prompts.