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Communication strategy use by healthcare trainees in monologues and dialogues during strategy training

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The study examined the use of communication strategies in monologues and dialogues by Malaysian healthcare trainees with limited English proficiency during communication strategy training. The training focused on the use of circumlocution in individual presentation, appeal for assistance in role-play, offering assistance and lexical repetition in group discussion, stress (tonicity) in responding to questions after a presentation, and filled pauses in interviews. The speech of eight participants in the five speaking tasks were recorded and transcribed. The analysis of the 6,137word transcript showed that monologues called into use more communication strategies than dialogues which are jointly negotiated. The participants used pauses and lexical repetition as communication strategies most often, which, in fact, is predictable considering their language proficiency. Most of the pauses were pauses filled with sounds like umm and uhh rather than fillers taught during the strategy training. The analysis revealed that the participants could use lexical repetition to appeal for assistance, request clarification and confirm comprehension but the frequencies for these strategies were low compared to discourse maintenance and topic salience marking. The strategy training helped the participants to use the strategy that was taught immediately after the training but automatisation in strategy use had not taken place.

Keywords: strategic competence, communication strategies, monologue, dialogue, communication strategy training

1 Introduction

The study aims to examine the use of communication strategies in monologues and dialogues by healthcare trainees during English communication strategy training in Malaysia. The specific objectives of the study were to: (1) compare the frequency in which different communication strategies are used in monologues and dialogues; and (2) determine the impact of communication strategy training on the use of the strategies. The paper begins by presenting the related literature that leads to the focus of this study, followed by the method of the study. Finally, the results are discussed with reference to findings of previous studies.

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The use of communication strategies is a manifestation of strategic competence, which is the ability to use verbal and nonverbal communication strategies "to compensate for breakdowns in communication due to limiting conditions in actual communication or to insufficient competence in one or more areas of communicative competence" (Canale, 1983, p.12).

In research on the use of communication strategies, the attention has been on the problem solving role. Faerch and Kasper (1983a, p. 36) viewed communication strategies as "potentially conscious plans for solving what to an individual presents itself as a problem in reaching a particular communicative goal". Examples of linguistic strategies are code-switching, foreignising, literal translation, word coinage, substitution, description, exemplification, and restructuring. Other researchers who share Faerch and Kasper's (1980) psycholinguistic problem-solving perspective of communication strategies are Bialystok and Frohlich (1980), Haastrup and Phillipson (1983), Paribakht (1985), Poulisse, Bongaerts, and Kellerman (1987), Poulisse and Schils (1989), Kellerman, Ammerlaan, Bongaerts, and Poulisse (1990), and Lafford (2004).

Another view of communication strategies is Tarone's (1981, p.292) social interactional view which is premised on the need to "bridge the gap between the linguistic knowledge of the second-language learner and the linguistic knowledge of the target language interlocutor in real communication situations." The main difference between her typology and Faerch and Kasper's (1980, 1984) typology is the addition of appeal for assistance which highlights the joint effort to reach shared meaning (see also Yule & Tarone, 1991). Tarone's (1980, 1981) work has been cited in the language learning literature but her framework has not been employed as the theoretical underpinning of communication strategy research.

To our knowledge, the only framework that is strongly anchored to the message enhancing role of communication strategies is that of Clennell (1995). Clennell (1995, p.6) described strategies in previous frameworks (Faerch & Kasper, 1980, 1984; Tarone, 1980, 1981) as "local lexically based strategies" which are used to "overcome specific obstacles in the process of communication". According to Clennell (1994a, 1994b), the more useful strategies for negotiating meaning are global discourse strategies, namely, lexical repetition, tonicity and topic fronting. The discourse-based strategies can perform short-term functions like appealing for assistance as well as discourse functions such as topic salience marker and conversational maintenance. Since proficient speakers are better at using discourse strategies for meaning enhancement (Ting & Phan, 2008), it is beneficial to train less proficient speakers to develop "collaborative discourse skills" (Clennell, 1995, p.16).

Thus far, Dörnyei (1995) and co-researchers have demonstrated the benefits of communication strategy training. Dörnyei's (1995) pioneering study on 109 Hungarian learners of English showed that they improved in the quality and quantity of circumlocution and fillers after the 6-week training. Dörnyei (1995) was instrumental in getting stalling strategies (i.e., pause-fillers and hesitation gambits) to be accepted as a communication strategy because prior to this, Tarone (1980) had considered filler as a speech production strategy and Faerch and Kasper (1983b) had considered filler as a temporal variable (Dörnyei & Scott, 1997). The six principles of communication strategy training used by Dörnyei and Thurrell (1991) were raising awareness, instilling risk taking, modelling use of communication strategies, highlighting cross-cultural differences, teaching communication strategies, and giving opportunities for practice. Using these principles, Lam and Wong (2000) conducted strategy training on Hong Kong sixth formers and found that they demonstrated better use of meaning

negotiation strategies (seeking clarification, clarifying themselves) after the training but their limited linguistic resources prevented them from using them effectively. The strategy training carried out by Naughton (2006) also helped the Spanish EFL learners to use more interaction strategies in discussions, namely, asking follow-up questions, requesting and giving clarification, and requesting and giving help. After Nakatani's (2010) 12-week communication strategy training, the Japanese EFL learners with greater communicative ability in English used more achievement communication strategies (active response, shadowing, confirmation check, comprehension check, clarification request) and became more fluent.

Findings from communication strategy training concur on the teachability of meaning negotiation strategies (Lam & Wong, 2000; Nakatani, 2010; Naughton, 2006). Since these jointly directed strategies help speakers to navigate potential communication breakdowns (Clennell, 1995), it is useful to focus on these during communication strategy training. It may not be worthwhile to teach lexically based strategies (e.g., paraphrase, restructuring, approximation) because speakers with limited English proficiency in Nakatani's (2010) study were unable to learn to use them due to lack of lexical resources. Naughton's (2006) strategy training also did not bring about much increase in the use of repair strategies. Naughton (2006) explains the results in terms of the considerable cognitive load required to use repair strategies and the Spanish EFL learners' reluctance to use strategies which hinder fluency and conversational flow.

Task type may affect strategy use. For example, Rossiter (2003) found that object description tasks brought out more paraphrase strategies than narrative tasks. However, some previous studies have used one task type such as group discussion (Lam & Wong, 2000; Naughton, 2006) and picture or object description (Rossiter, 2003). There were other researchers used several task types, namely, cartoon description, topic description, definition formulation (Dörnyei, 1995), role play (Dörnyei & Scott, 1997) or interview (Kongsom, 2009). However, these researchers reported the results for the strategy use as a whole rather than segregated by task. In this paper, we show that segregating the results by task type provides a better understanding of task demands on strategy use and can lead to a better matching of strategy with task type for communication strategy training.

2 Methodology

A case study was conducted to understand how communication strategies are used differently in monologues and dialogues, and why certain strategies are more useful to less proficient English speakers. In addition to the "how" and "why" questions which need to be answered, this research requires an extensive and in-depth description of strategy use, thereby making case study a suitable research design (Yin, 2014). The in-depth description of strategy use in the present study is made possible because of the data triangulation.

2.1 Participants

The eight participants in this study were healthcare trainees in a private university in Sabah, Malaysia (referred to as Participants 1 to 8 in this paper). They were undergoing vocational studies and training that prepared them for employment as pharmacy assistants, laboratory technicians, physiotherapists and assistant health officers. Most of them were in their twenties and from various

language backgrounds. Their proficiency in English is considered average to weak based on their English grades in the Sijil Pelajaran Malaysia (SPM, translated as Malaysian Certification of Education) examination, a public examination at the end of the five years of secondary education in the Malaysian education system.

To these participants, English is a foreign language because it does not have much recognised function in their daily lives although they have learnt it as a subject in school (Richards, Platt, & Weber, 1985). They do not hold English to be part of their linguistic and cultural identity (Nayar, 1997). This is because most of their daily interactions take place in Malay (the national language and its dialects) or their respective ethnic languages. If they work in government departments like hospitals, they would be using mostly Malay but if they work in the private sector, they may use English for official communication and rely on Malay for informal communication even in the workplace (Ting, 2002, 2012).

2.2 Communication strategy training and data collection

In this case study, eight healthcare trainee with weak to fairly low knowledge of English were recorded during communication strategy training when delivering monologue and dialogue sequences in English. The monologues consisted of a short presentation and a response to a question posed after the presentation. The dialogue comprised of a role play on medical issues, an interview and a group discussion.

This study used speech data from five different types of speaking tasks (Table 1). No co-triangulation with other forms of data was carried out because the different types of speech data allow the patterns of communication strategy use to be discerned based on the task type.

The communication strategy training, conducted by the first researcher, consisted of six sessions spread over six weeks as shown in Table 1. The second column shows the six communication strategies taught in the present study. Two of the strategies are among the three strategies considered crucial by Dörnyei and Thurrell (1991), that is, circumlocution and appealing for help. Dörnyei and Thurrell (1991) also considered going off the point smoothly and evading answers as crucial in real communication situations but we decided not to include this because such evasive responses would cause the participants to lose marks if they were assessed in language classroom contexts. Instead, fillers were included based on Dörnyei (1995), and lexical repetition and stress were adapted from Clennell (1995) because of their potential to facilitate information transfer.

TABLE 1. Communication strategies taught in six weekly sessions in communication strategy training.

Week/ Session	Communication strategy taught	Speaking task for data collection
1	Circumlocution for conversational repair	Individual
		presentation
2	Appeal for assistance for joint negotiation of meaning	Role play
3	Offer help for joint negotiation of meaning	
4	Lexical repetition for facilitating information transfer	Group discussion
5	Stress for conversational maintenance	Question and answer
6	Fillers for time gaining	Interview

The communication strategies were chosen to fit the topics of the English course they were enrolled in (English for Occupational Purposes) and the skills they were expected to demonstrate (e.g., giving directions). For each weekly session, the teaching procedures followed Nakatani's (2006) five-step sequence: review of previous performance; presentation of new task and strategy; rehearsal of roles; performance; and evaluation of strategy use. The last column in Table 1 shows the five sets of data collected (two monologues and three dialogues).

The first session was on the use of the circumlocution strategy where the participants were taught to describe characteristics or elements of the object or action when they could not retrieve the appropriate target language structure to use. This session involved descriptions of an accident and the participants were taught phrases such as *it is a kind of* and *for example* to initiate the description. They were given a visual stimulus of the accident and asked to discuss possible terms to use with a partner before making an individual report of the accident. Although the participants had some time to prepare for their individual presentations, compensation strategies are relevant because they did not read out a script and they made impromptu changes.

The second session was a dyadic presentation session where participants were trained to utilise help seeking statements in a role play on giving directions in the hospital. For instance, *I don't understand* or *I don't follow you* or *what does ... mean?* Other than these expressions, participants were not given other target vocabulary items for their role play. The participants were told to complete the task within two minutes as giving directions is not supposed to be a lengthy activity.

The third and fourth sessions focused on negotiation of meaning in the context of group discussions on possible issues related to Corporate Social Response (CSR) activities and internship training. The communication strategies taught were offering help for joint negotiation of meaning and lexical repetition for facilitating information transfer respectively. Lexical repetitions are techniques where speakers repeat words or phrases with a system of tones (e.g., rise, fall, rise-fall) for discourse and topic maintenance, topic salience marker, appeal for assistance, request for clarification and to indicate comprehension (Clennell, 1995). In pairs, the participants discussed topics such as prevention of epidemic and hospital malpractice.

In the fifth session, participants were taught how to use stress and pitch to mark key information or to differentiate given from new information when they respond to questions after a presentation. Abstract topics such as Pharmacovigilance and the Importance of Risk Management made it necessary for the participants to use strategies to facilitate information transfer.

In the final session, the participants were taught how to use fillers during pauses in the context of interviews. Interjections for conversational maintenance include *well*, *let me see*. However, they were told to avoid the excessive use of unfilled pauses in interviews as these indicate lack of fluency.

2.3 Data analysis procedures

The audio-recordings of the five speaking tasks were transcribed. Unfinished utterances were marked with ellipsis (...). Pauses were indicated on the transcripts; an example of a filled pause is *Well, I guess* and [umm]. Unfilled pauses are indicated by {pauses} on the transcript. Stress is shown by the use of capital letters and rising or falling intonation with a / and \ respectively.

The 6,137 word-transcript was analysed using a framework of analysis as shown in Appendix 1. The frameworks from which the communication strategies were taken (Clennell, 1995; Faerch & Kasper, 1980; Nakatani, 2006; Tarone, 1981) are indicated in superscripts in the first column.

The two researchers analysed the transcript to ensure consistency in the identification of communication strategies. Initially, it was difficult to differentiate between message abandonment and pauses. With rereading of the transcript, it became clear that if the participant continues with the message after a break in vocalisation, the break is a pause but if the participant leaves the message as incomplete, then it is message abandonment.

The number of communication strategies used was counted (raw frequencies). As the five sets of data were of variable word lengths, it is necessary to give equal weight to each set of frequencies. For a meaningful comparison, the raw frequencies need to be converted to a form of standard score, and that is frequencies per thousand words (ptw) which is calculated as follows:

Raw frequency x 1000 = Frequency per thousand wordsNumber of words in transcript

For the analysis of the functions of lexical repetition, the parts of the transcript coded for lexical repetition were read many times to determine the purpose of the repetition from the context. Clennell's (1995) descriptions of possible functions of lexical repetition was used as a guide but we were open to other functions that might emerge. Shadowing to acknowledge points made by the interlocutor was the only function of lexical repetition that was not described by Clennell (1995). In the process of identifying the functions of lexical repetition, descriptors of the functions were formulated and refined until the typology is clear, as shown in Table 3. Using this typology, the transcripts were analysed to find out the participants' purposes in using lexical repetition and the results are shown in Table 4.

3 Results and Discussion

3.1 Comparison of frequency of communication strategies used in monologues and dialogues

The participants used 845 communication strategies in five speaking tasks comprising two monologues and three dialogues (transcript word-length: 6,137). More strategies were used in monologues (160.1 ptw) than in dialogues (124.6 ptw). The most frequently used communication strategy in both monologues and dialogues was pausing followed by lexical repetition.

TABLE 2. Frequency per thousand words for use of communication strategies in monologues and dialogues.

Communication strategies		ologue		Dialogue		Total
	Individual	Response	Role	Interview	Group	
	report	to	play		discussion	
		question				
Pauses	73.6	74.3	37.8	49.6	54.5	58.5
Lexical repetition	17.3	36.2	35.1	36.6	54.5	38.8
Stress	1.4	40.0	0	0	0.6	10.6
Paraphrase	31.7	5.1	0	5.2	4.4	7.3
Examples	1.4	7.0	0	7.2	1.9	4.2
Appeal for assistance	1.4	0.6	32.4	0	1.3	7.6
Restructuring	1.4	4.4	2.7	1.3	5.6	6.9
Abandonment of message	5.8	1.3	6.8	1.3	0.6	2.3
Reduction of message	0	0.6	0	3.9	2.5	3.0
Confirmation checks	0	0	2.7	0	1.9	0.8
Offer of help	0	0	4.1	0	3.1	1.3
Clarification requests	0	0	0	0	4.4	1.1
Gestures and facial	1.4	0	4.1	0	3.8	1.5
expressions						
Comprehension checks	0	0	5.4	0	0.6	1.0
Rhythm and intonation	0	0.6	0	0	0	0.2
Make pronunciation clear	3	0	0	0.7	0	0.2
Information Raw frequence	y 93	254	94	155	208	804
for of						
calculation communication	on					
of strategies						
frequency Transcript	693	1575	740	1532	1597	6137
per word-length						
thousand						
words (ptw)						

Pauses

The results show that pausing is the communication strategy that was used the most frequently by the eight healthcare trainees. The frequency in Table 2 is given for filled and unfilled pauses. As the participants in this study had limited proficiency in English, they paused frequently to think about other options to compensate for missing vocabulary or grammar when talking. Table 2 shows that the participants paused more frequently in monologues (73.6 ptw in individual presentations and 74.3 ptw in their response to their instructor's question) than in dialogues (37.8 ptw in role-play, 49.6 ptw in interview and 54.5 ptw in role-play). The following excerpts and explanation show that the shared responsibility of taking the floor minimises the pressure to speak continuously, reducing the need to pause.

Excerpt 1

Individual Presentation, Participant 1: L1-5

When I see, I see {lexical repetition} the boot of the red car is crushed and [umm] I

think, have many [umm] things in the boot [umm] bags or [umm] everything, things I think {pause} so the cause of the incident of the [high tone] boot is crushed because the red, the black is hit the boot of the red car.

Excerpt 1 shows that Participant 1 paused to grope for words to describe the car crash in the picture (Figure 1), and repeated *boot* because she did not have the words to describe the situation of a black car crushed underneath the red car. Participant 1's presentation has the appearance of hesitant speech because of the frequent pausing.



Figure 1. Picture description task for individual presentation.

The frequency of pauses is even higher in the same participant's response to a question on pharmacovigilance, the practice of monitoring effects of medical drugs (Excerpt 2).

Excerpt 2

Response to Question, Participant 1: L1-8

What I'm [umm] understand about pharmacovigilance is WHAT the action of the pharmacovigilance in the body and what the, what the, what the certain people, what the certain people CONTROL the drug. So I have THREE people [umm] I have three people {lexical repetition} that control the drug, the drug {lexical repetition} it is the authorizer, regulatory authorizer, pharmaceutical industry and [pause] healthcare profession, professional. [But] they all are most, more KEY player to control the drug {lexical repetition} ehh the medicine. [Ok]. [So] [umm] for example, I can [umm] I know for example {lexical repetition} is [uhh] analgesic {uhh} analgesic {lexical repetition}, antibiotic to, to prevent the growth of the fungal or bacteria and [umm] antiseptic, and another.

When Participant 1 responded to the instructor's question on what pharmacovigilance was, she could define pharmacovigilance without much pausing but when she gave an example of an antiseptic, the frequency of pauses increased. She was probably more familiar with the definition of pharmacovigilance than with the example. Hence, she also repeated words until she came to the appropriate medical term to use (analgesic, antibiotic, antiseptic).

The nature of pausing is different in dialogues. In Excerpt 3 showing a group discussion of hospital malpractice, Participant 4 led the discussion.

Excerpt 3 Group Discussion, Participants 3, 4 and 5: L18-31

Participant 4	First we will, we will discuss about?	18
Participant 5	How to improve, we reduce the hospital malpractice//	19
Participant 4	Among our, among our//	20
Participant 5	Among our government hospital.	21
Participant 4	Among our organization in this hospital. We need to interview	22
	the patients or the victim of this hospital malpractice. Firstly,	23
	we should ask them what are we working, what are we going to,	24
	what our staff or nurse mis [uhh] misdiagnose or miss [uhh] miss action.	25
	[And] then we will covered the and we'll come, we will cover//	26
Participant 3	Cover, <u>cover</u> what?	27
Participant 4	Cover [uhh] cover the improve the quality so the malpractice	28
	doesn't occur//	29
Participant 3	Occur again.	30
Participant 4	We will minimize the, the error.	31

She went on coherently on the need to interview patients or victims of hospital malpractice until she reached the part on the misdiagnosis by the nurse (line 25) and what to cover. That was when she paused. However, the frequency of pauses in group discussion is lower than in monologues because other group members could step in to continue the utterance, like Participant 3 (lines 27 and 30). Participant 3's repetition of the Participant 4's last word also gave the latter time to think and continue speaking. The turn-taking and shared responsibility in speaking brought about less pausing in dialogues (49.4 ptw) than in monologues (74.1 ptw).

So far, the description has been on pauses marked by sounds like *uhh* and *umm*. Sometimes the participants used fillers when they could not think of what to say. For example, in the group discussion (Session 4), Participant 3 said *We also need to take account, I mean, we also need to consider the hospital staff also*. After Participant 3 said *I mean,* she restructured her utterance and decided not to proceed with the use of the verb *take account* but changed to *consider*. This was an easier sentence structure to manage and she could continue with her point that the hospital staff could also be the victims of hospital malpractice. In the transcript of the five speaking tasks, the use of fillers such as *I mean* and *I guess* are infrequent compared to *okay*. Excerpt 4 shows how Participant 5 used *okay* (transcribed as Ok, line 8) when she needed to get her thoughts together on the causes of headache. Participant 5's explanation is marked by many pauses (umm) as she moved from one cause to another.

Excerpt 4

Interview, Participant 5: L5-12

Can you please give me an example of a risky situation?	5
I want to explain about risk of headache.	6
Headache? {correct pronunciation}	7
Headache. [Ok] [umm] the factor of the what happen that human get	8
headache when they have less of sleep [umm] turn on lamp when they	9
go to sleep and have many thinking at get [umm] at get more thinking	10
about that problem that can makes the, the, the, that can make the	11
human have a headache.	12
	I want to explain about risk of headache. Headache? {correct pronunciation} Headache. [Ok] [umm] the factor of the what happen that human get headache when they have less of sleep [umm] turn on lamp when they go to sleep and have many thinking at get [umm] at get more thinking about that problem that can makes the, the, the, that can make the

Besides filled pauses comprising either fillers (e.g., okay) or sounds (e.g., umm), the participants sometimes paused by remaining silent (referred to as unfilled pauses). The frequency of unfilled pauses is low. Out of 359 pauses identified in the 6,137-word transcript, 313 (or 87.2%) were filled pauses and 46 (or 12.8%) were unfilled pauses (figures are not in Table 2). In the context of communication, pauses filled with phrases are better because their use gives the impression of continuous speech. Fillers enable learners to gain time to think and to keep the communication channel open (Dörnyei, 1995). Dörnyei and Thurrell (1991, p.19) stated that "the knowledge and confident use of fillers are a crucial part of learners' strategic competence since these invaluable delaying or hesitation devices can be used to carry on the conversation at times of difficulty." However, in the present study, 61.3% of filled pauses consisted of sounds (umm, uhh, ahh) which gives an impression of hesitancy rather than fluency in communication. However, as the results of the communication strategy training show, it is not easy for participants to incorporate the use of lexical fillers (e.g., well, let me think) into their speech.

Lexical repetition

Lexical repetition was overall the second most frequently used communication strategy. Table 2 shows that the average frequency for the use of lexical repetition is 38.8 ptw; the highest in group discussion (54.5 ptw) and the lowest in individual presentation (17.3 ptw). As the participants had some time to prepare for the individual presentation, they were more certain of what they wanted to say and there was less repetition of lexical items. The frequencies are similar for the other three speaking tasks: response to question (36.2 ptw), role-play (37.8 ptw) and interview (36.6 ptw).

Excerpt 5

Role play, Participants 2 and 6: L1-15

Participant 6	I'm sorry. Can I ask you something? You know the direction to the	1
_	medical lab?	2
Participant 2	Oh! Ya, sure I can help you. You go straight and then you will turn	3
	left, after that you will see a building Block A and you will found the	4
	medical lab.	5
Participant 6	What? I don't understand. Can you repeat it again?	6
Participant 2	Never mind. Ok, I can repeat. You go straight, ok? Straight {lexical	7
	repetition) and then you, you {lexical repetition} turn left. You know	8
	where left? {lexical repetition} You will found the building of Block A	9
	and when you found the building A {lexical repetition}, can see the	10
	signboard to the medical lab.	11
Participant 6	Block A, right?	12
Participant 2	Yes.	13
Participant 6	Thank you.	14
Participant 2	No problem.	15

Excerpt 5 shows the complete role-play on asking for and giving directions. The direction to the medical lab was straightforward but when Participant 6 asked for a repetition, Participant 2 realised that she ought to slow down. Lines 7 to 11 show that Participant 2 repeated key phrases (*straight*, *left*, *building A*). One of the

lexical repetitions (you know where left?) functioned as a comprehension check, where Participant 2 directly asked Participant 6 whether she understood what was said. At the end of the direction, Participant 6 repeated *Block A, right?* to check whether she had understood the directions correctly. This lexical repetition functioned as a confirmation check. In a dialogue, it is also common to repeat words to get back into conversation. Because of the varied functions of lexical repetition, the functions of the 238 lexical repetitions in the transcript were further analysed and the results are shown in Table 3.

TABLE 3. Framework for functions of lexical repetition.

Functions of lexical repetition	Description	Examples from data set
Discourse maintenance	The speaker repeats a phrase before continuing with the message. The repetition is usually consecutive.	Yes, sure. From here you just look there and then you turn left and then you can see the, you can see the {discourse maintenance} pharmacy. And then the end of the building you can see the ICU room.
Topic salience marker	The speaker repeats an earlier point to emphasise its importance. The repetitions are interspersed by other utterances and may not be using exactly the same words.	Firstly we need to double triple check our every own preparation, especially for us pharmacists, pharmacy assistant. We need to double check {topic salience marker} prescription from the doctors and maybe, you know doctor's handwriting can be very hard to read so we need to {pause} call up, call up the doctor to ask for confirmation.
Clarification request	The speaker repeats the interlocutor's utterance to show that he/she does not understand something, usually using a questioning intonation. This is an indirect appeal for assistance.	Speaker 4: Then you explain surgical risk to the patient. Speaker 1: Surgical what? Speaker 4: Surgical risk to the patient. Speaker 1: Oh! Amputating?
Confirm comprehension	The speaker repeats the interlocutor's utterance to show that he/she understands, usually using a falling intonation.	Speaker 2: Wear mask, seek doctor Speaker 3: Hand wash? Speaker 2: Hand wash , this one <i>apa tu</i> [what's that] ahh? Hand washing, yeah, practice hand <i>apa</i> [what], hand <i>apa</i> [what]? Practice hand hygiene that's what I want to <i>tau</i> [know]. Hygienes, practice hand hygienes.
Shadowing	The speaker repeats the last part of what the interlocutor has said to acknowledge the point made. The repetitions may be exact, partial or	Speaker 3: Reduce the activity outdoor Speaker 1: Yeah, reduce the activity {shadowing} for a while Speaker 2: Ok, reduce activity {shadowing}. What else?

expanded versions of the interlocutor's utterances. However, it is not shadowing if the speaker repeats his/her own utterances, sometimes across turns intercepted by other speakers.

The framework for the functions of lexical repetition (Table 3) was used to analyse the transcript of the five speaking tasks performed by the eight healthcare trainees. The results in Table 4 show that lexical repetitions are mainly used for discourse maintenance (32.9 ptw) and marking topic salience (27.2 ptw) in both monologues and dialogues. Because of the turn-taking, there is a greater need to use lexical repetition for discourse maintenance in dialogues (21.5 ptw) than in monologues (11.5 ptw). However, the need to capture the audience's attention makes lexical repetition more useful in monologues (19.0 ptw) than in dialogues (8.3 ptw). Discourse maintenance and marking topic salience are the two most important functions of lexical repetition.

TABLE 4. Frequency per thousand words for functions of lexical repetition in monologues and dialogues.

Functions of lexical repeti	tion	Monologues	Dialogues	Total
Discourse maintenance		11.5	21.5	32.9
Topic salience marker		19.0	8.3	27.2
Shadowing		0	11.4	11.4
Clarification request		0.0	1.3	1.3
Confirm comprehension		0.0	0.8	0.8
Appeal for assistance		0.0	0.5	0.5
Information needed for	Raw frequency	69	125	194
the calculation of frequency per thousand words (ptw)	Transcript word-length	2268	3869	6137

^{*} Monologues include the individual presentation and response to question after the presentation whereas dialogues include role play, interview and group discussion.

Shadowing is categorised as lexical repetition because of its form, that is, the speaker repeats words or phrases with a system of tones (Appendix 1). However, in its function, shadowing or back-channelling serves to acknowledge points made by the interlocutor. An example of shadowing can be seen in Table 3 (last row). Shadowing is only relevant in dialogues (11.4 ptw). Shadowing serves the purpose of showing that the speaker is paying attention to the interlocutor, and is not used with the intention of showing either comprehension (which would be a comprehension confirmation) or incomprehension (which would be a clarification request). Lexical repetition used with the purpose of shadowing aids in conversational maintenance. It is a simple strategy for contributing to the conversation if speakers have limited English proficiency and cannot formulate extended utterances to keep the conversation going.

Lexical repetition is a useful communication strategy because its use does not require additional linguistic resources. Although speakers can request clarification (e.g., sorry, I didn't catch you) and confirm comprehension (e.g., I get what you mean) using some stock phrases, this requires ability to incorporate these expressions into their speech. Similarly, lexical repetition takes the place of stock phrases to maintain discourse (e.g., as I was saying) and to highlight salience of topics (e.g., listen to this, this is really important). It is easier for speakers with limited language proficiency to achieve these same functions by repeating words with the appropriate intonation at strategic points of the interaction. On this basis, speakers with low language proficiency can use lexical repetition to facilitate information transfer and prevent communicative gaps from occurring. Because of the characteristic of lexical repetition which does not require additional lexical resources, Clennell (1995) referred to lexical repetition as a discourse-based communication strategy, as opposed to lexically-based strategies like paraphrase and restructuring. The results of the present study showed that the participants with limited English proficiency were capable of using lexical repetition for various functions.

The further analysis that was conducted on the functions of lexical repetition brought to light a methodological issue in research on communication strategies. If the focus of the analysis is strictly on the form of utterances and not on the functions, then the results would be like those presented in Table 2. A review of the main frameworks of communication strategies revealed that the focus has been on form1 (e.g., Clennell, 1995; Dörnyei, 1995; Faerch & Kasper, 1984; Tarone, 1981). The focus on form suffice for the identification of communication strategies in research but it is not sufficient in the context of communication strategy training because learners need to be taught the different forms that can be used to fulfil a particular function, such as asking for clarification which can be achieved through lexical repetition or phrases. If the identification of communication strategies takes note of both form and functions, then there would be ambiguity in whether to classify a repetition of words as lexical repetition (focus on form) or comprehension check (focus on function). The ambiguity surfaces in the identification of negotiation/interaction strategies (Clennell, 1995) which include clarification request, confirmation check, comprehension check and appeal for assistance. As lexical repetition can perform many of these functions, to resolve this ambiguity in the present study, the first stage of the analysis focused on form (Table 2) and the second stage of the analysis focused on functions (Table 4).

Other communication strategies

Table 2 shows that other than pauses and lexical repetition, the other communication strategies are less frequently used. Stress is third highest in frequency (average of 10.6 ptw) and mostly used when participants responded to a question posed after their individual presentation (40.0 ptw). Saying certain words loudly and clearly (for example, *there* and *identify* in Excerpt 6) draws the interlocutor's attention to the information that follow the stressed words.

Excerpt 6

Response to Question, Participant 4: L12-15

[umm] THERE are a few step that can be taken while [uhh] to investigate whether the

drug is [uhh] comprehensive or effective such as [umm] identify, **IDENTIFY** what the problem is happen at the market or the public.

Participant 4 paused and repeated the word identify while trying to think of how to explain identification of adverse drug reactions among users. When she was ready, she signaled to the interlocutor to pay attention to what she was going to say next by stressing identify. The tendency to stress a repeated word immediately prior to explanation, after some hesitancy, is also found in Ting and Sim's (2013) transcripts of English teacher trainees' interaction in a group discussion. While the manner in which the healthcare trainees use stress may be similar, their frequency of using stress is much lower compared to the English teacher trainees in Ting and Sim's (2013) study who used stress more than any other communication strategy in group discussions, that is, 41.09% of 2,913 communication strategies. Stress is also the most frequently used strategy in oral presentations for this group of English teacher trainees (Ting, Musa, & Sim, 2013), and accounts for 51.52% of 1,935 communication strategies identified. The healthcare trainees in the present study, who had lower English proficiency than the English teacher trainees in Ting and Sim's (2013) study, had not learnt to make the most of stress to convey different kinds of meaning, for example, stress with a falling tone for emphasis and stress with a rising tone for surprise.

As the frequencies of the other communication strategies are below 10 ptw (Table 2), the general patterns will be described. The participants used lexical strategies to some extent to explain when communicative problems were encountered, and these included paraphrase (7.3 ptw), restructuring (6.9 ptw) and giving examples (4.2 ptw). The participants paraphrased their utterances the most in the individual presentation task. This could be because circumlocution, a paraphrasing strategy, was taught during the first session of the communication strategy training and the individual presentation was conducted immediately after that. In contrast, the participants restructured their utterances more frequently in group discussions and in their response to a question posed after their individual presentation. These frequencies are not due to the communication strategy training because restructuring was not taught. Reformulating the syntax of utterances is a natural tendency when speakers cannot express intended meanings, regardless of whether they are proficient or less proficient speakers (Ting & Kho, 2009; Ting et al., 2013; Ting & Phan, 2008). While this may be the case for non-native speakers of English, Tarone and Yule (1989) found that native English speakers do not use much circumlocution and approximation compared to nonnative English speakers. These are short-term lexical strategies to overcome specific lexical difficulties when they have occurred but they do not help to prevent communication breakdown before they occur (Clennell, 1995). The strategies that can alleviate communication difficulties are negotiation/interaction strategies which include comprehension checks, clarification requests, confirmation checks, and asking for and giving assistance but these were hardly used by the participants. Taken together, the results show that the healthcare trainees' speech was peppered with pauses and attempts to express intended meanings but they were able to use lexical repetitions to move on with their speech, particularly in dialogic interactions.

3.2 Impact of communication strategy training on use of strategies

An examination of the pattern of communication strategy use for the five speaking tasks revealed that the use of a particular strategy increased right after the training session (Table 2). In the first training session in Week 1, circumlocution was taught and the results showed that the frequency of paraphrase was the highest for individual presentation (31.7 ptw), compared to the other four speaking tasks which had frequencies below 6 ptw.

In the second training session, participants were taught to appeal for assistance when they faced communication difficulties. It turned out that the frequency for appeal for assistance was the highest for role-play (32.4 ptw) conducted in Week 2 of the training. The frequencies for appeal for assistance in the other four speaking tasks were between 0 and 1.

In the third session (Week 3), participants were taught to offer help to their interlocutor if the latter could not continue the message. In the fourth session, lexical repetition was taught. After these two sessions, they participated in a group discussion in Week 4 of the training. The group discussion had the highest frequency for lexical repetition (54.5 ptw) but the frequencies of lexical repetitions in the response to question, role-play and interview (between 35 and 36 ptw) are not far behind. The results suggest that speakers might naturally use lexical repetition, whether or not they were taught to use it because lexical repetition was frequently used by the proficient and less proficient speakers in Ting and Phan's (2008) study although they did not participate in any communication strategy training. The group discussion had the second highest frequency for offering help (3.1 ptw). Incidentally, the participants offered help the most frequently during their role-plays (4.1 ptw) conducted after the second session of training in Week 2 but the frequency is too low for implications to be drawn.

In the fifth session, the participants learnt to use stress to respond to questions after the individual presentation. Indeed the frequency for stress was the highest for this speaking task (40.0 ptw). We do not know how long the effect of the training would last because Ting and Phan (2008) reported that less proficient speakers were less likely to use stress to convey intended meanings compared to proficient speakers in paired interactions.

In the sixth and final session, the training focused on using fillers during pauses to gain time during interviews but the frequency of pausing was not particularly high in the group discussion task which was conducted right after the session on fillers. It may not be a matter of whether or not fillers can be learnt from training because participants may feel that they do not want to appear hesitant in their speech, and they may choose to slow down their speech to gain time to think during the speaking tasks.

In short, the results indicate that communication strategy training can increase speakers' use of paraphrase (circumlocution) in individual presentation, appeal for assistance in role-play, offer of assistance in group discussion, and stress in their response to a question but only on a short-term basis. The frequencies of these communication strategies in the subsequent speaking tasks were low, indicating that the participants did not remember to use these strategies in the next session. The present study did not assess their use of communication strategies some time after the training, and therefore cannot offer conclusive evidence on the retention of strategies.

4 Conclusion

The study on the use of communication strategies by healthcare trainees with limited English proficiency yielded three noteworthy findings. First, the two mostly frequently used strategies were pauses and lexical repetition. The participants had to pause frequently to gain time to think because of their inadequate linguistic knowledge. This study revealed that lexical repetition was also used as a stalling device, indicated by the large proportion of their lexical repetitions which were coded as having a discourse maintenance function. In other words, the participants repeated words while thinking of how to express their intended meanings. Lexical repetition is a relatively easy discourse strategy for speakers with limited English proficiency to use because additional lexical resources are not required. It only involves repetition of words with the appropriate tone to convey different kinds of meanings (Clennell, 1995) such as marking topic salience and acknowledging interlocutor's responses. To make the conversational flow better, the participants need to be taught to incorporate fillers into pauses to replace the sounds of hesitation (uhh, umm) which suggest lack of fluency.

Second, communication strategies play a bigger compensatory role in monologues than in dialogues, as indicated by the larger number of strategies used in monologues. The participants frequently paraphrased their utterances during the individual presentation and when answering a question after the presentation. Paraphrasing, which encompasses circumlocution, word coinage and approximation in this study, is a lexical strategy and its use places a high cognitive load on the speakers (Naughton, 2006). In contrast, when participants take turns to speak in dialogues, the collaborative discourse gives them the opportunity to assist one another to reach shared meaning, evident in the high frequency of appeals for assistance in role plays. Since other studies (Lam & Wong, 2000; Nakatani, 2010; Naughton, 2006) have shown that meaning negotiation strategies are more teachable than lexical strategies involving reformulation of the message, it is more worthwhile to focus on meaning negotiation strategies in the context of dialogues. Using interactive task types in communication strategy instruction would provide room for practicing strategy use in collaborative discourse.

Third, the findings indicate that the strategy training helped the participants to use the strategy that was taught immediately after the training. The results showed noticeably higher frequencies for paraphrase (circumlocution) in individual presentations, appeal for assistance in role plays, offering assistance and lexical repetition in group discussion, and stress in responding to questions. The frequencies of these strategies in subsequent speaking tasks were low, indicating that automatisation had not taken place. The present study might have raised awareness on the usefulness of communication strategies but more opportunities for specific focused practice may be needed for automatisation and "the transfer of the new strategies to new tasks" (Dörnyei, 1995, p.65). It is also important in further studies to have a delayed post-test (Rossiter, 2003) to find out the long-term retention of the strategies and to incorporate fluency measures because the ultimate goal of communication strategy training is to enhance the strategic competence of speakers.

Endnote

¹ The focus of the main frameworks of communication strategies is form. For example, Tarone (1981, p.286) describes literal translation as "the learner translates word for word from the native language". A similar approach is used by Faerch and Kasper (1984, p.50) to explain the difference between literal translation and foreignising. Faerch and Kasper (1984) state that "If the non-IL [interlanguage] element is adapted to the IL system phonologically and/or morphologically, the strategy is termed foreignizing, whereas the verbatim selection and combination of IL lexical items on the basis of Ll/L3 has been called literal translation." The Nijmegen research group criticised the traditional typologies of communication strategies as being "product-oriented, focussing on surface structures of underlying psycholinguistic processes" (Dörnyei, 1995, p.57). However, the focus of Nijmegen research group's conceptualisation of communication strategies as shown in Dörnyei (1995) is also on form. Although Clennell (1995) emphasised the pragmatic functions of communication strategies in interactive discourse, his classification of discourse-based strategies is also based on form. For instance, in describing the topic + comment syntactic structuring, Clennell (1995) explains that the topic is stated first and it is usually the subject (e.g., my picture) and then a comment is added after a pause (e.g., no pencil).

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Appendix 1: Framework of analysis for communication strategies.

Strategy	Description	Examples from data set
Abandon message ^N	The speaker begins to talk about a concept but is unable to continue due to lack of linguistic resources, stops in mid-utterance, and moves on to another idea.	[umm] There are many other term that can be used such as antibiotic, anti ana anal {abandon} antiseptic such as DETTOL or cream <i>lah</i> .
Reduce message ^N	The speaker replaces the original message with another message which is less than what is intended.	S3: Cover [uhh] cover the improve the quality so the malpractice doesn't occur//S1: Occur again. S3: We will minimize the, the error.
Appeal for assistance ^T	The speaker asks for the correct item or structure.	I'm sorry. Can I ask you something? You know the direction to the medical lab?
Offer help [™]	The speaker offers the target item to the interlocutor.	S2: We do the [umm] check from village to village. [umm] what I'm talking// S1:[uhh] [umm] [Aah] tu// S2: movement bus S1: I know tu, roadshow!
Pay attention to pronunciation ^N	The speaker pays attention to his/her pronunciation.	A: I want to explain about rist of headache. Q: Headache? {correct pron.} A: <i>Headache</i> {corrected}
Use stress ^{N, C}	The speaker tries to speak clearly and loudly to make him/herself heard.	[umm] THERE are a few step that can be taken while [uhh] to investigate whether the drug is [uhh] comprehensive or effective such as [umm] identify, IDENTIFY what the problem is happen at the market or the public.
Use rhythm & intonation ^{N, C}	The speaker pays attention to his/her rhythm and intonation.	Ok, pharmacovigilance, improving ok [umm] /\ pharmacovigilance [ahh] my \grandfather.
Lexical repetition ^{N, C}	The speaker repeats words or phrases with a system of tones (e.g. rise, fall, rise-fall) for discourse and topic maintenance, topic salience marker, appeal for assistance, request for clarification, indicate comprehension.	The silver car is the back of the red car where's the red car make cannot control, <i>cannot control</i> his car or her car and, and bump into, <i>bump</i> the black car.
Use gestures & facial expressions ^N	The speaker uses non-verbal communication to convey meaning.	

Restructure utterances ^{FK, N}	The speaker reformulates the syntax of the utterance.	They're still talking about improvement. Yeah, the way, the way on improve it.
Paraphrase ^T (approximation, coinage, circumlocution)	The speaker uses other ways of explaining when problems are encountered:	Approximation: So, I think [umm] the another car, another car, not really, not really have a impact more than
	Approximation: The speaker uses a single target language vocabulary item which he/she knows is not correct but	the red car have a impact {approximation for the word "damage"}
	shares enough semantic features in common with the desired item to satisfy the speaker. Structure is excluded.	Coinage: <i>Ugly frog</i> for toad, <i>Malaysian monkey</i> for Orang Utan (example is not from this data set as the participants did not
	Word coinage: The speaker makes up a new word in order to communicate a desired concept.	use coinage) Circumlocution: This is [uhh] maybe some kind, not some kind [uhh] is a situations that
	Circumlocution: The speaker describes characteristics or elements of the object or action instead of using the appropriate target language structure.	can make others people think that there is no one will survive.
Give examples ^N	The speaker gives examples if the listener doesn't understand what is said. Some examples of phrases are for example and like in the case of	Commonly there are adverse reaction on the drug whether, such as, we can see on the skin. You can see such as <i>the skin burn or others</i> [uhh] the example of it.
Comprehension checks ^{N, T}	The speaker directly asks the listener if he/she understands what is said. Some examples of phrases are <i>You see what I mean?</i> , <i>Do you understand?</i> , <i>Get what I mean?</i> , <i>Got it?</i> and <i>Clear?</i>	Straight and then you, you turn left. You know where left?
Confirmation checks ^{N, T}	The speaker rewords what others say to check whether he/she has understood something correctly. Some examples of phrases are <i>You mean there is no? and Let me get this right, is it like?</i>	S1: You know bribe? Bribe [pause] it's when you give extra money. If we compensate the hospital staff, they will not report the malpractice. S3: Compensation is example of "prep-ping" {bribing}?
Clarification requests ^T	The speaker asks others to explain when he/she does not understand something. Some examples of phrases are <i>Sorry</i> , <i>I didn't catch you</i> , <i>Can you repeat that? I'm not clear on the meaning</i> .	S1: Before, before talk, check. S2: Check? S1: Check. S2: Check what?

Pauses ^N	The speaker pauses and sometimes	But if the people cannot follow
	uses fillers when he/she cannot	the instruction of the pharmacy
	think of what to say. Some	[umm] we cannot do, we must
	examples of phrases to gain time	force the patient and [umm] we
	are well, let me see, actually, I guess,	can, actually we can do the, the,
	It's like this and in fact. Other	the checkup every week.
	sounds indicating pauses are umm,	
	uhh and ahh. Unfilled pauses are	
	marked by silence.	

Note: The superscripts in the first column show the frameworks from which these communication strategies were taken from: C for Clennell (1995), FK for Faerch and Kasper (1980), N for Nakatani (2006), and T for Tarone (1981).