

Translanguaging Practices in a Vietnamese ESP Medical Classroom: A Qualitative Case Study

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Abstract

This study investigates translanguaging practices in a Vietnamese English for Specific Purposes (ESP) medical classroom, aiming to understand how bilingual resources support learning in an ESP context. Adopting a qualitative case study design, the research views translanguaging as a purposeful use of both Vietnamese and English to facilitate meaning-making in medical education. Data were collected through structured observations, field notes, and audio recordings over 12 weeks in a medical university in Ho Chi Minh City. The data were analyzed using qualitative content analysis based on Fang and Liu's (2020) five-category framework. The findings indicate that five main translanguaging functions were consistently employed: concept explanation, comprehension checking, knowledge localization, instruction reinforcement, and rapport building, with concept explanation occurring most frequently. These practices helped students understand complex medical terminology, confirm comprehension, relate knowledge to the Vietnamese context, and participate more actively in classroom activities. The discussion suggests that translanguaging serves as an effective pedagogical resource that supports both understanding and engagement in ESP classrooms. It highlights the importance of recognizing students' full linguistic repertoire as a valuable asset in learning, particularly in content-intensive and professionally oriented educational settings.

1. INTRODUCTION

English for Specific Purposes (ESP) has become a central component of undergraduate medical education in Vietnam, where future healthcare professionals are expected to develop sufficient proficiency in medical English to engage with international clinical literature, participate in professional communication, and meet the growing demands of a globalized healthcare environment (Hutchinson & Waters, 1987). Within this context, medical English classrooms present a particularly complex linguistic reality, as teachers and students share Vietnamese as a first language while working toward competence in a highly technical target

language. The coexistence of these two languages in a single learning space means that language boundaries in practice are rarely as fixed as institutional English-only policies may suggest, and teachers routinely draw on both languages to support students' understanding and manage the cognitive demands of specialized medical content.

Despite the expanding body of research on translanguaging in Vietnamese English as a Foreign Language (EFL) (Cong-Lem, 2025) and English-medium instruction (EMI) (Nguyen et al., 2022) settings, the specific context of medical ESP classrooms has received little scholarly attention. This is a notable gap, as medical ESP instruction differs substantially from general English teaching in terms of content complexity, terminology density, and the professional communicative purposes that learners must ultimately achieve. Understanding how translanguaging operates in this context is therefore significant not only for applied linguistics research but also for ESP pedagogy, teacher development, and curriculum planning in Vietnamese medical universities.

The present study addresses this gap by examining translanguaging practices in a Vietnamese medical ESP classroom through the analytical framework proposed by Fang and Liu (2020), which classifies pedagogical translanguaging into five functional categories: concept explanation, comprehension checking, knowledge localization, instruction reinforcement, and rapport building. This framework has been applied productively in EFL contexts in China and Indonesia (Kristanti & Pei, 2024) but has not yet been used to examine medical ESP instruction in Vietnam. To guide the investigation, two research questions were formulated:

1. What translanguaging practices do a Vietnamese ESP teacher employ in a medical English classroom?
2. How do these practices align with the five-category classification framework proposed by Fang and Liu (2020)?

2. LITERATURE REVIEW

2.1. Translanguaging

The concept of translanguaging has emerged as a transformative paradigm in language education, fundamentally challenging traditional monolingual approaches to foreign language instruction. Originally coined by Williams (1994) as a bilingual teaching approach in Welsh classrooms, translanguaging referred to the deliberate alternation of languages for receptive and productive purposes. Since then, the concept has evolved considerably beyond its initial formulation to encompass a more comprehensive theoretical framework that recognizes the fluid and dynamic nature of multilingual communication. Baker (2011) and subsequent scholars elaborated on this concept, emphasizing the interaction of languages in learning and cognition and viewing multilingualism as an integrated linguistic system rather than a collection of separate, bounded codes.

García and Li (2014) expanded the definition of translanguaging to describe the dynamic and fluid use of multiple languages by bilingual individuals, a practice that transcends conventional linguistic boundaries. Rather than viewing languages as separate systems, translanguaging theory posits that multilingual speakers possess a single integrated linguistic

repertoire from which they draw features strategically to communicate and make meaning. This perspective challenges the artificial divisions between named languages that have historically been constructed through political and educational policies (Otheguy et al., 2015). Li (2018) further developed translanguaging as a practical theory of language, emphasizing its multimodal and multisensory dimensions in multilingual social interactions.

In educational contexts, translanguaging has gained recognition as both a pedagogical stance and a set of instructional strategies that leverage students' full linguistic repertoires to enhance learning outcomes. García et al. (2017) advocated for a collaborative stance in education, understanding that human beings make meaning by drawing on features of their entire language repertoire in interrelationship with one another. This approach empowers both learners and teachers by transforming power relations and focusing the teaching and learning process on meaning-making, enriching experience, and developing identity (Creese & Blackledge, 2010, 2015). Cenoz and Gorter (2022) argued that learning can be enhanced when rigid boundaries that isolate languages are replaced by more permeable and flexible ones, highlighting the importance of creating translanguaging spaces where students can activate their full linguistic resources.

2.2. Theoretical Framework

This study adopts the theoretical framework developed by Fang and Liu (2020), which identifies five key functions of pedagogical translanguaging in foreign language classrooms: concept explanation, comprehension checking, knowledge localization, instruction reinforcement, and rapport building. This framework emerged from research examining stakeholders' perspectives on translanguaging use in Chinese university contexts and provides a comprehensive lens for analyzing teachers' strategic deployment of multilingual resources across different instructional settings. The framework has since been validated and applied in various educational contexts, including Kristanti and Pei's (2024) comparative study of translanguaging practices in Chinese and Indonesian EFL classrooms.

Concept explanation refers to teachers' use of L1 to clarify grammar rules, vocabulary meanings, or cultural concepts that may be difficult for students to understand through target language instruction alone. This function serves a scaffolding purpose, building bridges between familiar and unfamiliar linguistic knowledge (Lin, 2019). Comprehension checking involves switching to L1 to verify student understanding, ensuring that instruction proceeds on a foundation of confirmed comprehension rather than assumed knowledge. As Fang and Liu (2020) noted, this practice allows teachers to gauge students' grasp of key concepts by encouraging translation into the first language, thereby facilitating deeper engagement with learning materials.

Knowledge localization explicitly connects target language forms to students' L1 linguistic resources and cultural experiences by contextualizing content within familiar cultural narratives and drawing parallels between cognates or shared cultural concepts. Kristanti and Pei (2024) found this function particularly prominent in Chinese EFL classrooms where teachers connected English content to Chinese cultural contexts, while it was notably absent in Indonesian settings. Instruction reinforcement involves repeating or emphasizing key instructional points using L1 to ensure clarity, particularly for assignment requirements, procedural information, and classroom policies. Finally, rapport building employs L1 for

interpersonal communication to establish classroom rapport, reduce anxiety, and create a supportive learning environment through humor and culturally relevant content (García & Li, 2014). Together, these five functions offer a structured and practically applicable framework for analyzing translanguaging in the Vietnamese medical ESP classroom, where each of these communicative purposes is likely to arise in distinct and meaningful ways.

2.3. Previous Studies

Research on translanguaging in EFL contexts has grown considerably over the past decade, revealing consistent patterns of strategic L1 use across diverse national and institutional settings. Yuvayapan (2019) investigated Turkish EFL teachers' perceptions and practices of translanguaging, finding that although teachers held positive views about translanguaging in specific situations, they did not frequently employ this pedagogy in practice due to institutional expectations and monolingual policies. Similarly, Pham and Vu (2023) examined Vietnamese EFL secondary teachers' translanguaging use, revealing that most teachers held positive attitudes toward translanguaging and considered it crucial for scaffolding students' learning, particularly for cognitive purposes such as explaining difficult grammar and vocabulary. Teachers in public schools were found to use translanguaging more frequently than those in private institutions, largely due to differences in institutional policy constraints.

In higher education contexts, Wang (2019) explored translanguaging practices in Chinese foreign language classrooms, finding that over half of the surveyed students favored multilingual instruction in which they could draw on their linguistic resources for meaning negotiation. The study demonstrated translanguaging as a co-constructed dialogic approach initiated by both teachers and students to maintain communicative classroom environments. Research by Zhou and Mann (2021) further validated the benefits of translanguaging in Chinese university CLIL classrooms, particularly for students with varying levels of English proficiency, and advocated for its inclusion as a core component of multilingual teaching strategies. Kristanti and Pei's (2024) comparative study found that while all five of Fang and Liu's (2020) translanguaging categories were present in Chinese classrooms, Indonesian classrooms showed notable variation, in particular the absence of knowledge localization, highlighting how translanguaging practices are shaped by local pedagogical and cultural contexts.

In the Vietnamese context specifically, Nguyen et al. (2022) investigated teachers' translanguaging practices in English-medium instruction at Vietnamese universities, finding that teachers frequently and strategically translanguaged for content teaching, classroom management, and affective purposes. Cong-Lem (2025) further explored Vietnamese EFL educators' translanguaging practices, highlighting diverse functions including checking comprehension, emphasizing content, and reducing anxiety around English speaking. Huynh (2026) investigated how translanguaging shaped multilingual students' experiences in an English for Academic Purposes course in Vietnam through qualitative narrative inquiry, finding that students drew on their full language resources to understand academic content, that translanguaging supported an inclusive classroom climate, and that it strengthened engagement, motivation, and self-confidence. More broadly, Alsagoafi (2025) found that teachers who acted as facilitators used translanguaging pedagogically as a scaffolding strategy, and that creating a translanguaging space empowered students by activating their linguistic resources, boosting both performance and self-esteem. Collectively, these studies affirm that

translanguaging is a purposeful and context-sensitive pedagogical practice, and they underscore the need for focused investigation into how it operates in the specific and underexplored setting of Vietnamese medical ESP classrooms.

3. METHODOLOGY

3.1. Research Design

This study adopted a qualitative research design to investigate translanguaging practices in a Vietnamese English for Specific Purposes (ESP) medical classroom. Qualitative inquiry was deemed most appropriate because it allows the researcher to examine complex linguistic and pedagogical phenomena within their natural context, capturing the richness and depth of classroom interactions that quantitative methods could not adequately address (Creswell, 2014). Specifically, the study employed a naturalistic observation approach, which enabled the researcher to observe and document translanguaging practices as they occurred organically during actual classroom instruction, without manipulation or interference.

The theoretical framework underpinning this study draws on García and Li's (2014) conceptualization of translanguaging as a dynamic and purposeful deployment of the multilingual speaker's full linguistic repertoire, rather than a mere code-switching between two separate language systems. Building on this foundation, the study applied Fang and Liu's (2020) five-category classification of translanguaging strategies: Concept Explanation, Comprehension Checking, Knowledge Localization, Instruction Reinforcement, and Rapport Building as the analytical lens for identifying and categorizing observed classroom practices. This framework provided a structured yet flexible approach to examining how both the teacher and students drew on Vietnamese and English in the ESP medical learning environment.

A case study approach was adopted to provide an in-depth understanding of translanguaging within a single, bounded classroom setting (Merriam, 2009). This design allowed the researcher to capture not only the frequency and type of translanguaging strategies employed but also the contextual factors that shaped their use, including the nature of the medical content being taught, the dynamics between teacher and students, and the stage of the lesson in which translanguaging occurred.

3.2. Participants

Participants in this study were selected through purposive sampling, a strategy widely used in qualitative research to ensure that selected individuals can provide the most relevant and information-rich data in relation to the research questions (Patton, 2002). The study was conducted in a Vietnamese medical university in Ho Chi Minh City, Vietnam. The primary participant was one ESP lecturer who taught medical English to undergraduate medical students. The lecturer was selected based on the criteria of having at least three years of experience teaching ESP in a medical context and being a bilingual speaker of Vietnamese and English, which ensured that translanguaging was a realistic and naturally occurring feature of their instruction.

The student participants consisted of one class of undergraduate medical students at the second or third year of their program, as students at this level are typically expected to engage with specialized medical English content while still relying substantially on their first language (L1) Vietnamese for meaning-making. The class comprised approximately 30 to 40 students.

All participants, including both the teacher and students, were informed of the purpose of the study, and written consent was obtained from all parties prior to data collection. Student participation was entirely voluntary, and all personal identifying information was anonymized throughout the research process to protect participant confidentiality.

3.3. Research Instruments

Three instruments were employed to collect data in this study: structured observation checklists, field notes, and audio recordings. These instruments were selected to form a methodological triangulation framework, in which each instrument compensates for the limitations of the others, thereby strengthening the credibility and trustworthiness of the findings (Lincoln & Guba, 1985).

First, structured observation checklists were designed to guide systematic observation of translanguaging behaviors across classroom sessions. The checklist was constructed specifically around Fang and Liu's (2020) five translanguaging strategy classifications, with each category containing a set of observable indicators. For each observed instance, the checklist recorded the type of translanguaging strategy employed, whether it was initiated by the teacher or a student, the direction of language shift (English to Vietnamese or Vietnamese to English), the estimated frequency of occurrence, the stage of the lesson during which it occurred (e.g., presentation, practice, or review), and the apparent student response. This structured format ensured consistency and comparability of observations across multiple classroom sessions.

Second, field notes were used to capture the broader contextual and interactional dimensions of classroom events that the checklist alone could not record. These notes included both descriptive observations, accounts of what was said, done, and observed, and analytical reflections on the researcher's interpretations of those events (Merriam, 2009). Field notes documented the physical and social context of the classroom, including the layout, lesson topic, instructional materials used, and the general affective atmosphere. The researcher maintained a clear distinction between descriptive and analytical entries to minimize the risk of conflating raw observation with premature interpretation.

Third, audio recordings were used to document the authentic, spontaneous linguistic interactions that occurred during lessons. Recording the classroom discourse provided a verbatim account of translanguaging episodes, enabling the researcher to revisit and reanalyze specific instances during the data analysis phase. Audio recordings served as primary evidentiary support for coding decisions and ensured that nuanced or rapid language alternations were not lost during real-time observation. Recordings were made using a digital audio recorder placed at the front of the classroom, with a secondary device used during group activities to capture student-to-student interactions where translanguaging was also likely to occur.

3.4. Data Collection Procedure

Data collection took place over a period of 12 weeks, during which the researcher conducted multiple classroom observations of the ESP medical English course. Prior to the first observation session, the researcher arranged a preliminary meeting with the participating teacher to explain the study's purpose, discuss ethical considerations, obtain written consent,

and familiarize the teacher with the observation process in order to minimize the observer effect. Students were similarly briefed, and their written consent was secured.

Each classroom observation session lasted for the full duration of a regular class period. During each session, the researcher assumed a non-participatory observer role, seated at the back of the classroom to minimize disruption to normal classroom activity. The structured observation checklist was completed in real time, while field notes were written both during and immediately following each session to maximize accuracy and detail. Audio recordings were initiated at the start of each observed lesson and stopped at its conclusion.

Following the completion of the observation period, all audio recordings were transcribed orthographically. For portions of discourse involving Vietnamese, both the original Vietnamese utterances and their English translations were included in the transcript to ensure analytical accuracy. The transcripts were then cross-referenced with the completed checklists and field notes to identify patterns and verify initial coding decisions. This process of cross-instrument verification is consistent with the principles of data triangulation as described by Cohen et al. (2018), which holds that the use of multiple data sources increases the internal validity of qualitative findings.

3.5. Data Analysis

Data analysis in this study followed a qualitative content analysis approach, in which the collected data were systematically organized, coded, and interpreted in relation to the five translanguaging strategy categories proposed by Fang and Liu (2020). Content analysis was selected because it provides a rigorous, replicable, and transparent method for identifying patterns of meaning within textual and interactional data (Merriam, 2009).

The analysis proceeded in three stages. In the first stage, all transcripts were read in full alongside the corresponding field notes and checklist data to gain a holistic impression of each observed session. During this initial review, the researcher noted recurring patterns of language alternation and made preliminary annotations about their apparent function. In the second stage, the data were coded deductively using Fang and Liu's (2020) five-category framework as the primary coding scheme. Each identified translanguaging episode was assigned to one or more categories depending on the communicative function it appeared to serve. Where an episode did not clearly fit within the existing framework, it was flagged as a potential emergent category and subjected to further scrutiny.

In the third stage, coded episodes were examined for frequency patterns and contextual regularities to answer the research questions. The researcher considered the relationship between lesson stage, content type, and the type of translanguaging strategy most commonly employed at each point, in order to construct a nuanced account of how and why translanguaging occurred in this specific ESP medical context. To enhance the trustworthiness of the analysis, member checking was carried out with the participating teacher, who was invited to review a sample of the researcher's interpretations and confirm or challenge the accuracy of the analysis (Lincoln & Guba, 1985). Peer debriefing with a colleague familiar with applied linguistics research was also conducted as an additional measure to reduce the risk of researcher bias.

Taken together, the combination of structured observation, rich field documentation, verbatim audio data, and systematic content analysis ensured that this study produced credible, detailed, and theoretically grounded findings about translanguaging practices in the Vietnamese ESP medical classroom, contributing meaningfully to the growing body of literature on translanguaging in higher education and ESP contexts (García & Li, 2014; Hutchinson & Waters, 1987).

4. RESULTS AND DISCUSSION

4.1. Concept Explanation

Concept explanation was the most frequently observed translanguaging strategy across all classroom sessions. The teacher consistently used Vietnamese to unpack complex medical terminology and clarify the meaning of technical expressions that would have been difficult for students to grasp through English instruction alone. This pattern was especially prominent when the lesson introduced anatomical terms, pharmacological concepts, and clinical procedures for the first time. In the excerpts below, the teacher moves fluidly between English and Vietnamese to build student understanding of unfamiliar medical vocabulary.

Excerpt 1: Teacher explaining the term 'myocardial infarction'

Teacher: *So the next important term we need to know is 'myocardial infarction.' Myocardial infarction. Myocardial, nghĩa là thuộc về cơ tim, liệt kê thế này: myo là cơ, cardial là tim. Infarction là sự hoại tử, sự tắc nghẽn. Nên myocardial infarction là nhét máu cơ tim, hay còn gọi là đau tim cấp. In everyday clinical language, doctors and nurses also say 'heart attack,' but in formal medical writing and in patient records, we use 'myocardial infarction.' Em nào có thể nhắc lại chủ này không? Myocardial infarction. Very good. Now let us look at the symptoms.*

Excerpt 2: Teacher explaining the term 'contraindication'

Teacher: *Now, 'contraindication.' This is a very important word in pharmacology and in patient assessment. Contraindication. Contra có nghĩa là chống lại, indication là chỉ định, nên contraindication là chống chỉ định, có nghĩa là trường hợp mà mình không được dùng một loại thuốc nào đó. For example, aspirin is contraindicated in patients with peptic ulcers. Aspirin bị chống chỉ định ở bệnh nhân loét dạ dày. So before prescribing any medication, a doctor must always check for contraindications. Ban nào có thể cho tôi một ví dụ khác về contraindication không?*

These excerpts illustrate how the teacher employed Vietnamese to decompose complex medical terminology into its morphological components and provide equivalent expressions that students could anchor to their existing knowledge. This aligns closely with Fang and Liu's (2020) conceptualization of concept explanation as a scaffolding strategy that bridges the gap between students' L1 knowledge and new L2 content. Lin (2019) described this function as an act of trans-semiotizing, in which teachers draw on the learner's full semiotic repertoire to build comprehension of new concepts. The findings are also consistent with Pham and Vu (2023), who found that Vietnamese EFL teachers considered concept explanation, particularly for difficult vocabulary and grammar, to be one of the most cognitively necessary uses of L1 in the classroom. In the medical ESP context, where technical terminology carries precise clinical

meaning, the stakes of misunderstanding are considerably higher than in general English instruction, which further explains why the teacher relied on this strategy so consistently. The findings support García and Li's (2014) argument that multilingual speakers draw on their full linguistic repertoire not as a shortcut but as a purposeful meaning-making resource.

4.2. Comprehension Checking

Comprehension checking was the second most frequently observed translanguaging function in the data. Throughout the observed lessons, the teacher regularly switched to Vietnamese at key instructional moments to verify whether students had understood the medical content delivered in English. Rather than relying solely on surface-level signals such as silence or nodding, the teacher actively invited students to demonstrate their understanding by restating or summarizing information in Vietnamese, or by responding to direct questions posed in the first language. The following excerpts are representative of this pattern.

Excerpt 3: Teacher checking comprehension of wound healing stages

Teacher: *So we have just gone through the four main stages of wound healing: haemostasis, inflammation, proliferation, and remodelling. These are the four stages. Now, em co hieu khong? Thu thu lai xem. Bon giai doan cua qua trinh lanh vet thuong la gi? Hay thu giai thich bang tieng Viet truoc, sau do chung ta se noi lai bang tieng Anh. Take your time.*

Excerpt 4: Teacher checking understanding of the distinction between 'sign' and 'symptom'

Teacher: *This is an important distinction. 'Sign' and 'symptom' are not the same thing in clinical language. A sign is something the doctor observes objectively. A symptom is something the patient reports subjectively. Hieu chua? Dau hieu va trieu chung khac nhau the nao? Em nao co the giai thich bang tieng Viet cho ca lop nghe? Yes, please go ahead.*

The teacher's use of Vietnamese to prompt students to verbalize their understanding reflects a deliberate pedagogical move to confirm comprehension before proceeding to the next instructional stage. Fang and Liu (2020) identified comprehension checking as a function in which teachers switch to L1 specifically to gauge whether students have grasped key concepts, noting that this practice facilitates deeper engagement with learning materials by encouraging translation into the first language. The present findings extend this observation into the medical ESP context, where the consequences of conceptual misunderstanding are particularly serious given the clinical applications of the content being taught. This pattern also resonates with Cong-Lem (2025), who found that Vietnamese EFL educators used comprehension-checking translanguaging as a way of ensuring students were not left behind during cognitively demanding lessons. Nguyen et al. (2022) similarly reported that Vietnamese university teachers translanguaged for comprehension support, especially in content-heavy instruction. Taken together, the data suggest that in the medical ESP classroom, comprehension checking through translanguaging serves not only a pedagogical function but also an ethical one, ensuring that students are genuinely prepared to apply medical knowledge in clinical settings.

4.3. Knowledge Localization

Knowledge localization was observed when the teacher drew explicit connections between English medical content and the Vietnamese healthcare system, local clinical practices, and students' cultural experiences as future medical professionals in Vietnam. This category was particularly meaningful in the medical ESP context because students were not only learning a foreign language but were simultaneously being socialized into a professional medical culture that differs in important ways from the Western contexts in which much medical English content is produced. The following excerpts demonstrate how the teacher used translanguaging to anchor new knowledge within familiar local realities.

Excerpt 5: Teacher localizing patient history-taking to the Vietnamese clinical context

Teacher: *When we talk about taking a patient history in English, one standard question is: 'Do you use any traditional or herbal remedies?' In the Vietnamese clinical context, day la cau hoi rat quan trong, vi nhieu benh nhan Viet Nam su dung thuoc nam, thuoc bac, hoac cac bai thuoc dan gian truoc khi den benh vien. Some of these herbal medicines can interact with prescribed drugs. So this question is not just cultural politeness. No, it is a genuine clinical safety concern. Khi cac em lam viec tai benh vien, cac em can hoi cau nay mot cach nghiem tuc va ghi vao ho so benh an.*

Excerpt 6: Teacher connecting medical case writing to Vietnamese epidemiology

Teacher: *The textbook gives examples of common diseases in Western countries, like Lyme disease or hypothermia from cold weather exposure. But in Vietnam, chung ta phai chu y den cac benh pho bien hon o day: sot xuat huyet, lao phoi, viem gan B, va cac benh nhiet doi khac. So when you practice writing a clinical case report in English, use diseases that are epidemiologically relevant to Vietnam. Dung chi viet ve cac benh ma ban than khong gap bao gio. This will make your English more useful and more meaningful for your future work.*

The teacher's use of knowledge localization reveals an awareness that medical English instruction must be grounded in the professional realities that students will encounter as practitioners in Vietnam rather than in the idealized Western clinical scenarios that often dominate ESP textbooks. This finding is consistent with Fang and Liu's (2020) framework, which describes knowledge localization as the process of contextualizing target language content within students' familiar cultural and experiential backgrounds. Kristanti and Pei (2024) found this function to be a defining feature of Chinese EFL classrooms, where teachers frequently drew on shared cultural knowledge to deepen students' engagement with English content. The present data suggest that knowledge localization is equally salient in the Vietnamese medical ESP context and may be even more critical, given the significant differences between Vietnamese healthcare practices and the Western medical discourse that dominates international medical English materials. This finding also aligns with Cenoz and Gorter's (2022) argument that permeable language boundaries allow students to connect new knowledge to prior experience more effectively, and with García et al.'s (2017) contention that meaningful learning occurs when teachers recognize students' full social and cultural identities as resources rather than obstacles.

4.4. Instruction Reinforcement

Instruction reinforcement was consistently observed at transitional moments in the lesson, particularly when the teacher introduced tasks, assigned activities, or set expectations for assessed work. In these moments, the teacher would first deliver instructions in English and then restate or elaborate on key procedural points in Vietnamese to ensure that students understood what was required of them. This pattern was especially pronounced when tasks involved multiple steps, specific formatting requirements, or unfamiliar academic genres such as clinical case reports or medical consultation role-plays. The excerpts below illustrate this function.

Excerpt 7: Teacher reinforcing role-play instructions

Teacher: *For the role-play activity today, you will work in pairs. One of you is the doctor, one is the patient. You need to conduct a medical consultation in English, using the SOAP format we discussed last week: Subjective, Objective, Assessment, and Plan. You have ten minutes to prepare and five minutes to perform. Nho la phai noi tieng Anh trong luc dong vai, khong duoc dung tieng Viet khi dang thuc hien tinh huong. Nhung trong qua trinh chuan bi, cac em co the thao luan voi nhau bang tieng Viet de hieu ro tinh huong truoc. Ro rang chua? Bat dau nhe.*

Excerpt 8: Teacher reinforcing written assignment requirements

Teacher: *The assignment for next week is a written clinical case report. It must be between 300 and 400 words, in English, and it must follow the standard medical case report structure. De bai nay co ba phan chinh: phan mo ta benh nhan, phan chan doan, va phan ke hoach dieu tri. Each part must use appropriate medical terminology from the vocabulary list I gave you. Khong su dung tu dien de dich nguyen xi, hay su dung cac thuat ngu y khoa ma chung ta da hoc. Nop bai tren he thong truoc 11:59 toi thu Bay. Co ai can hoi gi khong?*

The data show that instruction reinforcement served a practical management function by reducing the risk of task ambiguity and ensuring that students could focus their cognitive resources on completing the activity rather than decoding what was expected of them. This is consistent with Fang and Liu's (2020) description of instruction reinforcement as the use of L1 to repeat or emphasize procedural information, particularly for assignment requirements and classroom policies. Alsagoafi (2025) similarly found that teachers used translanguaging as a scaffolding strategy to help students make meaning of task requirements, and that this was especially effective in classrooms where teachers and students shared the same L1. The medical ESP context adds a further dimension to this function, as the tasks assigned in such classrooms, including clinical role-plays and case report writing, require students to operate within genre conventions that may be entirely unfamiliar. By restating instructions in Vietnamese, the teacher in this study ensured that procedural clarity did not become a barrier to substantive learning. This finding also reflects Baker's (2011) view that translanguaging supports cognitive processing by allowing learners to manage information in the language that best supports their comprehension at a given moment.

4.5. Rapport Building

Rapport building was observed across all sessions, though it was most prominent at the beginning of lessons, during difficult or high-stakes activities such as speaking tasks and mock clinical consultations, and at moments when students appeared hesitant, anxious, or reluctant to participate. The teacher used Vietnamese strategically in these moments to signal solidarity with students, to acknowledge the difficulty of the learning task, and to create a classroom atmosphere in which students felt psychologically safe enough to take risks in English. The excerpts below capture two representative instances of this function.

Excerpt 9: Teacher using Vietnamese to reduce student anxiety before a speaking task

Teacher: *I know medical English is not easy. Thay biet la nhieu em thay kho, dac biet la cac thuat ngu Latin va cac cau lenh lam sang. But I want you to remember something. Every doctor in Vietnam who can communicate in English today also started exactly where you are right now. Ho cung tung ngoi o cho cac em ngoi, cung tung khong biet 'myocardial infarction' la gi. So do not be embarrassed to make mistakes. Sai roi sua, do la cach duy nhat de hoc. Let us try the activity together. No pressure.*

Excerpt 10: Teacher affirming a student's contribution through translanguaging

Teacher: *Em vua tra loi rat tot. Thay thay em hieu bai. Your answer just now was actually very good. Maybe not perfect grammar, but the medical reasoning was correct, and that is what matters most at this stage. Trong y hoc, dung suy nghi ra quyet dinh dung quan trong hon la noi tieng Anh hoan hao. Language will improve with practice. But clinical thinking, that is what we are really training here. Keep going, em.*

The teacher's use of Vietnamese in these moments served a clearly affective and relational purpose, reducing the psychological distance between the authority figure of the instructor and the vulnerable position of students who were being asked to perform in a foreign language in a high-stakes academic and professional domain. This is consistent with Fang and Liu's (2020) characterization of rapport building as the use of L1 to establish classroom solidarity and reduce anxiety through humor and culturally resonant communication. Huynh (2026) found that translanguaging in a Vietnamese EAP classroom strengthened students' engagement, motivation, and self-confidence, particularly for learners who experienced anxiety in English-only environments, a finding that directly parallels the pattern observed in the present study. Truong et al. (2025) stated that if learners are motivated in the process of learning a language, they are more likely to be successful in acquiring it. Alsagoafi (2025) also noted that translanguaging boosted the self-esteem of lower-level students by encouraging them to use their full linguistic resources to participate. In the medical ESP context, where students face the additional pressure of knowing that their future professional competence depends in part on their ability to communicate in English, affective support through translanguaging may be particularly important. These findings are aligned with Creese and Blackledge's (2015) argument that translanguaging transforms power relations in the classroom by validating students' identities as multilingual speakers rather than positioning them as deficient English learners.

5. CONCLUSION

In conclusion, this study demonstrates that translanguaging plays a vital and purposeful role in a Vietnamese ESP medical classroom. The findings show that the teacher strategically drew on both Vietnamese and English to support learning, particularly when addressing complex medical content. Five key functions were identified, including concept explanation, comprehension checking, knowledge localization, instruction reinforcement, and rapport building. These functions contributed to students' understanding of medical terminology, as well as their engagement and confidence in classroom participation. Translanguaging was implemented in a systematic and pedagogically meaningful manner in relation to instructional context and learning objectives, suggesting that the first language can support both cognitive processing and affective dimensions of learning in content intensive disciplines such as medicine.

These findings also carry important practical implications. For ESP medical teachers, translanguaging should be used deliberately to scaffold difficult concepts, for example, through brief L1 explanations, bilingual paraphrasing, or comprehension checks, while maintaining a gradual shift toward greater use of English as students' proficiency develops. For curriculum designers, translanguaging should be embedded into course design through bilingual glossaries, dual-language materials, and structured activities that support meaning-making across languages, as well as more flexible assessment practices that prioritize content understanding in early stages. For faculty developers and teacher educators, professional development programs should provide clear guidance on how to implement translanguaging effectively and address monolingual assumptions by promoting a more flexible, evidence-informed view of language use in ESP medical education.

Several limitations should be acknowledged. The study was conducted in a single classroom with one teacher, which may limit the generalizability of the findings to other ESP contexts or educational settings. In addition, the study relied primarily on observational data without incorporating other data sources, such as interviews, which may have constrained deeper insights into the teacher's pedagogical intentions. Future research should include a broader range of participants across multiple institutions and employ more diverse data collection methods. In particular, stimulated recall interviews and brief student perception surveys could be used to examine how learners experience translanguaging practices and whether these practices contribute to improved comprehension, reduced anxiety, and greater classroom engagement.

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