# **University of Alberta**

Towards a sociolinguistically informed pedagogy: French for L2 nursing students in Alberta

by

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# **Dedication**

À mes parents. Pour tout leur amour.

## **Abstract**

This dissertation examines the sociolinguistic competence of French immersion graduates registered in the bilingual Bachelor of Science in nursing at the University of Alberta. More specifically, this research focuses on the stylistic norms required of these students to better treat their patients whose first language is French. Drawing on Valdman's (1976, 2000) concept of *pedagogical norm*, two studies were designed to identify the high frequency stylistic features that are most highly valued by the target population.

First, through observation and recordings of French-speaking nurses and patients in clinical settings, the stylistic norm used by the target population was identified revealing the speech styles that post-immersion nursing students would be exposed to in their clinical placements and future job appointments. The data analysis revealed that neither French-speaking nurses nor French-speaking patients make much use of formal language features in their interactions.

Second, the study sought to identify the stylistic norm that target community members expect from nursing students. Accordingly, 53 French-speaking community members were asked to listen to a series of interactions in which French L1 and L2 nurses addressed a French-speaking patient using either formal or informal features. Participants rated on a 5-point Likert scale the effectiveness and acceptability of the interactions. Interviews, conducted on a voluntary basis, followed to shed light on the participants' reactions. The results indicated that nurses who used formal language forms in their interactions were generally judged as cold and distant and received less favourable judgments from

the majority of the participants than nurses who used the local norm which was more informal in nature.

Although this study is confined to French L2 nursing students in Alberta, the broad implications from this dissertation calls for a pedagogical paradigm shift that may well apply to other French L2 teaching contexts. French L2 instructors all face similar educational and ideological challenges with respect to adequately preparing learners for real-life communicative demands and expectations (Chaudenson, 2006; Gadet & Guérin, 2008). As such, a better underestanding of sociolinguistically informed pedagogy could offer widespread benefits to French teachers, textbook designers and teacher trainers.

## **Preface**

The initial motivation for this dissertation comes from my personal experiences as a second language learner. I learned English in a traditional classroom setting and quickly became aware of the limitations of this type of instruction for a francophone living in Ottawa: in spite of successes in my courses, my friends and classmates, most of whom were bilingual, refused to communicate in English with me. According to them it was, "beaucoup trop plate" to interact with me in English because "je parlais comme un livre".

Obviously, my teachers' learning objectives did not include the acquisition of linguistic forms that would be useful outside an academic context.

When I decided to take part in a study abroad program in Portugal, I started learning Portuguese and was determined not to re-live the same drawbacks. In addition to attending a Portuguese course, I seized and created opportunities to come into contact with Portuguese native speakers in an attempt to learn "real" Portuguese. It was in Brazil, more specifically in Bahia (a state where the majority of people are of African descent) that I became fluent in that language. Far from being able to always form accurate utterances, I was nonetheless able to take part in discussions on a variety of topics. I was far more satisfied with the results of my second language learning experience.

When I came back home, I was offered a short-term contract to act as a host for Portuguese professors who were attending a conference in Canada. I quickly realised that naturalistic L2 learning had also its limitations. The Afro-Brazilian features that were part of my speech left my guests in a state of shock. They

preferred that I spoke French with them. From these two experiences, it became quite apparent to me that explicit attention to the social connotations associated with lexical, grammatical and phonological features is needed when learning an additional language.

The most important motivating factor for this dissertation, however, came years later. After graduating with an MA in Applied Linguistics from Concordia University, I obtained a position as a contract instructor at the University of Alberta's francophone faculty, Campus Saint-Jean, where a large number of students are French immersion graduates. My first out of class discussions with my students revealed that, similar to my experience as an ESL learner, immersion teaching produced students who could hardly participate in informal conversations without difficulty. Far from sounding like other 20 year-old bilinguals I had come across before, their speech sounded stilted as though they were reading aloud a written passage. I was surprised to realize that after an average of seven years of study, in a program designed to promote functional bilingualism, students' informal conversational skills were very underdeveloped.

Because the acquisition of the social meanings associated with linguistic forms appears as a challenge to many L2 learners, regardless of whether they learned their L2 in a communicative L2 classroom or in content-based program or in a more naturalistic setting, I thought it was time for someone to address this issue. It is thus from this perspective that I designed the two studies reported in this dissertation.

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Je me fais aussi un devoir de remercier mes collègues, mes étudiants, mes amis et ma famille dont la présence m'a permis de garder un certain équilibre dans ma vie pendant mes études. Merci à la fantastique communauté Saint-Jean pour tout l'appui. Je n'aurais pas pu partager ce chapitre de ma vie avec de meilleurs collègues et étudiants. Thanks to my classmates at MLCS, in the TESL and Linguistics departments. Special thanks Laura and Myriam with whom I have shared many insights, frustrations and laughs, over the years. Un gros merci à l'équi-quipe du Pavillon La Pocatière. J'ai passé les plus beaux étés de ma vie en votre compagnie. Grâce à vous, je revenais toujours à Edmonton avec l'énergie nécessaire pour mener à bien ma recherche. Merci à Valérie, Guillaume et Mel pour les soupers, les parties de Risk interminables, les discussions sur la politique et les nombreux fous-rires. La vie « réelle » à Edmonton était plus qu'agréable en votre compagnie. Et finalement, merci à mes parents et mes frères qui ont toujours été derrière moi, toujours prêts à m'aider à relever les défis qui se pointaient devant moi.

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# **Chapter 1: Introduction and definitions**

This introductory chapter will first situate this dissertation within its broader societal and pedagogical contexts. Then, a brief overview of the study design and objectives will be offered before the key terminology is defined. Last, the organization of the remainder of the dissertation and content of each chapter will be presented.

## 1. 1 Background

This dissertation examines the sociolinguistic competence of French immersion (FI) graduates registered in the bilingual Bachelor of Science in nursing at the University of Alberta. Since its implementation, this program has mostly been able to recruit bilingual students for whom French is a second language (L2). To fulfill the requirements of their degree, these students undertake clinical placements in French-speaking and bilingual health care institutions in Alberta. During their placement, they are required to communicate with peers and francophone patients whose age, level of education and socioeconomic background affect their communication style. In that sense, it is crucial that students' language training ensures that they possess the appropriate linguistic resources to successfully provide care for French-speaking patients in Alberta.

The creation of a bilingual nursing program in Alberta is part of a larger pan-Canadian strategy to facilitate and increase access to health care services offered to the French-speaking population outside the province of Québec (Consultative Committee For French-Speaking Minority Communities, 2007).

These measures are taken because research has shown that when patients receive health care services in their L2, risks of misdiagnosis, increased number of diagnostic tests, inappropriate treatment, unnecessary interventions, and poor adherence to prescribed treatment are reported (Bowen, 2001). Overall higher health costs are more likely to occur as a result of communication breakdowns and misunderstandings, which are most likely to happen when there is a language mismatch between patient and health care provider (Carrasquillo et al., 1999; Jirwe et al., 2010). In addition, research has shown that compared to the dominant English-speaking population, French minority speakers are in poorer health. Studies undertaken in Ontario suggest that francophones are less physically active, smoke more, have a higher body mass index and are less likely to visit their doctor regularly (Gagnon-Arpin et al., 2009; Picard & Allaire, 2005). It was also found that the prevalence of certain diseases (i.e., respiratory diseases, hypertension, and musculoskeletal problems) was higher in the French-speaking population than in the English-speaking population (Gagnon-Arpin et al., 2009). The design of these studies cannot reveal, however, whether these health outcomes are the direct results of limited access to health care services in French or the effects of socio-economic conditions<sup>1</sup>.

Given that Alberta's French-speaking population is rather small (61 225 or about 2% of its total population) (Statistics Canada, 2006) and given that 68% of

<sup>&</sup>lt;sup>1</sup> The French-speaking population in Ontario is generally older, less educated, less present on the labour market than the general majority-language population (Gagnon-Arpin et al., 2009). Studies addressing these methodological issues are currently being undertaken inany French-speaking minority regions across the country, and their results are expected for 2013 (Consultative Committee For French-Speaking Minority Communities, 2007).

French speakers in Alberta report speaking predominantly English at home and 89% use predominantly English in work-related contexts (ibid, 2006), one might question the importance of catering to French-speaking Albertans' linguistic needs in medical contexts. However, the figures provided by Statistics Canada do not capture the vitality of that community. The French-speaking population in Alberta is located in three main areas: Edmonton (where, until 1905, French was the language of the majority) and its surrounding communities, the Northwest region and the Central East region (see figure 1). In these regional pockets, the higher concentration of French-speaking people allows for a life in French and thus for maintaining a high degree of proficiency in that language (Walker, 2005).



Figure 1. French speaking population in Alberta (Kermoal, 2003, p.3)

In addition, the number of French-speaking people has increased significantly in recent years making Alberta's French-speaking population the fastest growing language community in the province, thanks to a rise of Frenchspeaking immigrants and inter-provincial migrants who have made Alberta their new home (Mulatris, 2009). In fact, the French-speaking community in Alberta is fast changing and is now made up of 46% of French-speaking immigrants coming from Europe and Africa who have limited proficiency in English (Mulatris, 2008). When interviewed about the main barriers to their well-being in Alberta, a majority of French-speaking immigrants mentioned that better access to health care services in French would improve their quality of life (Réseau Santé Albertain, 2007). Morever, Alberta's French-speaking community is aging: it has a fertility rate of 0.63 while its aging index (also known as elder-child ration)<sup>2</sup> is 0.96 (Mulatris, 2009); this segment of the French-speaking population faces important and pressing health needs, due in part to their declining ability to communicate in English (Réseau Santé Albertain, 2007). And last, the Consultative Committee For French-Speaking Minority Communities (2007) states that "Access to health care in one's own language yields benefits that go well beyond simple respect for the user's culture. It is an essential part of improving the individual's state of health and empowering a population to take charge of its own health". In fact, Health Canada encourages provincial initiatives for its official language minority population stating that it is a "cost-effective"

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<sup>&</sup>lt;sup>2</sup> The aging index is defined as the number of people aged 60 years old or over per hundred youth under age 15 (Gavrilov & Heuveline, 2003).

investment in population health rather than an additional health spending item" (Bowen, 2001).

Thus, the bilingual nursing program at the University of Alberta was created in 2004 to address the needs of this population by increasing the presence of French-speaking and bilingual nurses in Alberta hospitals, nursing homes, medical clinics and home care services (Consultative Committee For French-Speaking Minority Communities, 2007)

#### 1.1.1 L2 nurses linguistic challenges

As mentioned above, the majority of the students who have registered in this bilingual nursing program do not have French as a first language (L1), in fact, most of them are French immersion graduates<sup>3</sup>. Although these students are proficient speakers of French, their communication skills are clearly not like those of native speakers (Genesee, 2004) or bilinguals who have learned French at home (Mougeon et al., 2010). That is, research shows shortcomings with respect to their grammatical, lexical, pragmatic and sociolinguistic accuracy (for reviews see Genesee, 2004; Johnson & Swain, 1997 and Lyster, 2007). In spite of their linguistic shortcomings, FI graduates generally meet the language requirement for admission<sup>4</sup> in a bilingual program as set by their faculty. Research investigating the experience of L2 nursing students has demonstrated, however, that meeting the language requirement for entry in a university does not guarantee success in

<sup>&</sup>lt;sup>3</sup> This information was made available by Campus Saint-Jean's student affairs Vice-Dean in a personal email.

<sup>&</sup>lt;sup>4</sup> According to the University of Alberta Calendar, (183.1.2) applicants have three options to demonstrate their French language proficiency and thus be considered as a potential student in the bilingual Bachelor of Science in Nursing: 1) Having successfully passed Français 30 or 30-2 (33) (or the equivalent), offered in francophone schools 2) Having successfully passed French Language Arts 30 or 30-2 (or the equivalent), offered in French immersion schools or 3) successfully passing Faculté Saint-Jean's oral proficiency exam.

clinical settings (Choi, 2005). In fact, studies have shown that L2 nursing students face many communication challenges in the workplace. Such challenges include difficulty in understanding patients' colloquial speech and accent (Shakya & Horsfall, 2000), problems reassuring patients and making small talk with them (Hussin, 1999), and difficulty in acquiring medical terminology (Malu & Figlear, 1998). In sum, the studies reveal that the majority of linguistic difficulties faced by L2 nurses are related to their limited ability to understand and use speech that is informal, colloquial or technical in nature, an area of communicative competence that Canale and Swain (1980) refer to as sociolinguistic competence (i.e. the ability to interpret and use language appropriately in different authentic communicative contexts). The importance of developing a vast stylistic repertoire is indeed crucial. For example Segalowitz (1976) found that young French L1 adolescents judged French L2 speakers of their own age as distant and uncooperative because of their use of too formal a style in a casual talk. These findings point to the social costs associated with limited ability to use different speech styles in real-life interactions.

Although the studies reported above are based on the experience of English as a Second Language (ESL) nursing students in English-dominant settings, we anticipate similar setbacks for FI graduates given that immersion instruction has allowed them to develop only non-native production skills (Genesee, 2004) and limited sociolinguistic competence (Mougeon et al., 2010).

Scholars in the field of instructed L2 learning have attempted to address the gap between FI students' productive and receptive skills. The majority of

pedagogical interventions proposed aim at the development of "fluent accuracy" (i.e., Lyster, 2007; Ranta & Lyster, 2007). Other studies, much fewer in number, have focused on the improvement of sociolinguistic competence, but these mainly target the acquisition of second person pronouns of address *tu* and *vous* (i.e., Lyster, 1993). To my knowledge, no studies have tested the effectiveness of a pedagogical treatment focusing on other grammatical, lexical and phonological socio-stylistic features.

#### 1.1.2 The prescriptive tradition and the French L2 classroom

The lack of explicit attention paid to sociolinguistic competence may be explained by the fact that French is a very prescriptive language which leaves very little room for other linguistic varieties of this language in the L2 classroom (Guérin, 2011). Indeed, French is a language with a long tradition of normative practices which date back to the time when French replaced Latin as the dominant language in France (Ayres-Bennet, 1996; Bibeau & Germain, 1983; Lodge, 1991).

With the failure of efforts to revive Latin, sixteenth century France witnessed the spread of French (i.e., the variety spoken by the Parisian elite) to new domains such as theology, science, and mathematics (Ayres-Bennett, 1996). As French began to be used throughout France, regional variants started to be frowned upon by Parisian society and thus regional variation turned into social variation (Lodge, 1993). The increased use of French also triggered the need to stabilise and regulate the language in terms of usage, vocabulary and grammatical structures (Rickard, 1989). The early standardisation and codification attempts are

revealed in the work of François Malherbe and Claude Favre de Vaugelas, but most importantly by the establishment of the Académie française in 1635 whose mandate was to regulate and 'purify' French usage (Marchello-Nizia, 2003). The Académie Française used the Parisian variety spoken in the royal court as its basis for codification. The sociolect of the ruling group was thus imposed on the entire nation and became the standard, the quintessential form of the language (Lodge, 2004). This centralistic and monoglossic usage (and ideology) was further developed in the 17<sup>th</sup> century with the spread of the normative discourse present in dictionaries, grammars and spelling books (Marchello-Nizia, 2003). According to Milroy and Milroy (1991), standardisation subjects speakers and language communities to an *ideology* of the standard in which the product of standardisation, the standard language, becomes an idealized norm, an intrinsically better variety, the only legitimate linguistic model that users of that language ought to aspire. According to Gadet (2003, p. 19), this ideology "impose aux locuteurs une contrainte collective qui donne lieu à des jugements de valeurs constitutifs de l'attitude courante, quelle que soit la façon de parler de chacun. Elle prend force en ce que, outre l'imposition par des institutions, elle est intériorisée par les locuteurs, même ceux qui ne la respecte pas" (imposes on speakers a collective constraint that gives rise to value judgements characteristic of the current attitude, whatever each person's way of speaking might be. It is reinforced by the fact that, beyond its institutional imposition, it is interiorized by the speakers, even those who do not respect it).

Milroy and Milroy (1991) argue that "a chief linguistic characteristic of standardisation is the suppression of optional variation at all levels of language – in pronunciation (phonology), spelling, grammar (morphology and syntax) and lexicon" (p.36). These variation phenomena are predominantly observable in oral speech and are the object of study of modern linguistics (Gadet, 2003). Contrary to the normative tradition, descriptive linguistics attaches no value judgments or hierarchical organizations to forms of the language and is concerned with documenting and providing a precise account of actual speech usage (idid). Noam Chomsky (1957) disagreed with this type of analysis. He believed that actual usage (linguistic performance) did not properly reflect native speakers' underlying knowledge (linguistic competence) which, in his opinion, linguistic theories should seek to describe. To that end, he theorized that only through the study of native speakers' competence could we explain the ability of a hearerspeaker to produce and interpret an infinite number of utterances, with only a limited set of grammatical rules and a finite set of terms. Hymes (1972), however, critiqued the abstract nature of linguistic competence as proposed by Chomsky arguing that his theories did not account for appropriateness of speech and its social meaning. He rather proposed the notion of *communicative* competence which included not only the ability to understand and produce grammatical utterances as Chomsky's definition of linguistic competence suggested, but also the ability to judge social communication situations correctly and therefore produce socially appropriate speech.

#### 1.1.3 Sociolinguistic competence in the L2 classroom

The notion of sociolinguistic competence has since then made its way into models of L2 communicative competence. In Canale and Swain's (1980) model, sociolinguistic competence is a key component found along side of grammatical, discourse and strategic competence. According to this model, knowledge of socially appropriate language use is as important as knowledge of grammar rules. Communicative Language Teaching (CLT), which is the current mainstream approach to L2 teaching, adopts this model by emphasizing both the linguistic and situational contexts in which communication takes place (Galloway, 1993). However, in spite of authentic language use in immersion contexts, French L2 learners only partially develop this aspect of communicative competence (Mougeon et al., 2010).

Bibeau and Germain (1983) report on a colleague's attempt to find a publishing company for a French L2 textbook he had designed with the main intention of exposing L2 students to French as it is spoken in Canada. Facing normative pressures from the editors and the publishing company "(l)'auteur a dû éliminer tout ce qui était régionalisme, français populaire, français familier [...]

Avec le résultat que les dialogues ont parfois perdu leur naturel" (The author had to eliminate any regionalisms and popular or familiar French [...], and as a result the dialogues sometimes sound less natural) (p.512). This anecdote may offer some insights as to why sociolinguistic competence is the most neglected aspect of communicative competence in French communicatively oriented L2 classrooms: in spite of advances made by linguists in advocating that all language

features are linguistically equal, there is still a widespread belief that standard French is the only legitimate variety worth teaching (Gadet, 2003).

While language prescriptions are "an integral part of the language" (Haas, 1982, p.3) and of any French native speaker (Ball, 2000), L2 teachers still have a professional obligation to prepare students for the interactions of daily life. In the case of bilingual nursing students in Alberta, it means training students to interact professionally with French-speaking patients from a variety of backgrounds.

To address the complex notion of linguistic variation and inform the selection of target socio-stylistic features to be taught in the L2 classroom, Valdman (2000, 2003) proposes the concept of *pedagogical norm*, a linguistic yardstick that would neither represent the monolithic standard promoted by language academies and prescriptive grammarians, nor the idealized educated native-speaker usages. Following Bourdieu's (1982) notion of linguistic market, Valdman's *pedagogical norm* recommends rather that L2 instruction focus on the linguistic features that would offer the greatest payback in a wide array of target contexts of use. This dissertation represents an attempt to explore this notion with respect to nursing encounters occurring in French in Alberta,

#### 1. 2 Design of the studies

Because FI students appear to have limited sociolinguistic competence and because the experience of ESL nurses has indicated that the ability to understand and use speech in a variety of clinical contexts is crucial, it is important that FI nursing students' language training focuses on expanding their stylistic repertoire

so as to enhance the care they provide, optimize their rapport with Frenchspeaking patients and ultimately improve patients' health and safety.

The main aim of this dissertation is to define a pedagogical norm for French as an L2 for nursing students in Alberta. To that end, the linguistic resources French L2 nursing students need to acquire in order to offer linguistically appropriate nursing care to the French-speaking population in Alberta had to be defined, both receptively and productively. This objective has been achieved by carrying out two studies using methodologies from the field of sociolinguistics. The first study set out to identify the stylistic norm used by the nurses and patients in bilingual nursing homes through observation and recordings of participants in real life nursing situations. In the second study, linguistic attitudes towards nursing students' linguistic behaviour were measured using direct and indirect data collection instruments to determine the stylistic norm that the target community members favour in the context of nursing student-patient interactions. The results shed light on the forms that are privileged in the community and will later serve as a basis for a description of the productive communication skills expected in the target situation.

Although this study is confined to French L2 for nursing students in Alberta, the broad implications from this dissertation may well apply to other French L2 teaching contexts. French L2 educators all face similar educational and ideological challenges with respect to adequately preparing learners for real-life communicative demands and expectations (Chaudenson, 2006; Gadet & Guérin, 2008). As such, a better understanding of sociolinguistically informed

pedagogy could offer widespread benefits to French teachers, textbook designers and teacher trainers.

## 1.3 Definition of key concepts

The following definitions are offered to clarify the terminology used throughout this dissertation.

#### 1.3.1 Style vs. register

The terms style and register have often been used interchangeably (Sax, 2003) but they are not exact equivalents. While the term register will be considered to refer to sets of language features used by a group of speakers who share the same profession (e.g.: surgeons, airline pilots, bankers) or the same interests (e.g.: jazz fans, gymnasts) (Wardhaugh, 2006), the term style will be used in its Hallidayan (1964) sense and refer to language variation linked to the level of formality speakers adopt when engaged in an activity. Lodge (1993) states that many factors can influence the level of formality in the language chosen by the participants: (1) the nature of the communicative situation (public or private), (2) the nature of the addressee (sub-factors such as age, status and nature of the relationship will affect the type of style used) and (3) the function of the discourse (i.e., listener-oriented vs. message-oriented)<sup>5</sup>. Hence, a private, listener-oriented communication between close friends belonging to a similar socio-economic background will trigger a more informal style than a public lecture that is more message-oriented in nature. Studies in variationist

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<sup>&</sup>lt;sup>5</sup> Listener-oriented discourse is mainly concerned with establishing and consolidating the relationship between the speakers. Message-oriented discourse focuses on communicating a message which will bring about a specific change in the listener's state of knowledge (Brown, 1982).

sociolinguistics can predict with confidence the stylistic features that a native speaker (or group of native speakers) tend to prefer in certain occasions (Wardaugh, 2006). In this dissertation, I will be solely concerned with the description of style in nurse-patient interactions.

#### 1.3.2 Linguistic variation

Unlike the standard language, naturalistic speech is not homogeneous and varies according to a set of factors: time, geographical territory, social characteristics of the speakers and communicative activities in which they engage (Gadet, 2003). Each of these factors also influences one another: the styles a speaker has access to depend largely on his or her position on the social ladder and geographic (and historical) location (Lodge, 2004). Although these factors can hardly be disentangled, this dissertation, which focuses on a specific communicative activity (i.e. nurse-patient interactions), will prioritize *stylistic* variation<sup>6</sup>.

Stylistic variation is characterized by the use of different linguistic features (variants) that express a given notion (variable) (Tagliamonte, 2006). To help illustrate this notion we can turn to oral varieties of Canadian French and the use of periphrastic future in the 1<sup>st</sup> person singular. Speakers can choose among three variants to form that variable: a) *je vais manger* (b) *je vas manger*, (c) m'as manger<sup>7</sup>. The alternation between these three variants reflects the influence of a combination of factors including, among others, the level of (in)formality of the

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<sup>&</sup>lt;sup>6</sup> Schilling-Estes (2003) refers to this type of variation as *intra-speaker variation* (as opposed to *inter-speaker* variation that occurs across groups of speakers).

<sup>&</sup>lt;sup>7</sup>The orthographic representation for variants /va/ and /ma/ is *je vas* and *m'as* respectively, following convention of Mougeon and Beniak (1991).

communication situation, the speakers' sex, social status and the nature of their relationship. Stylistic variation can be observed at the syntactical, morphological, lexical and phonological levels (Mougeon et al., 2002). In this dissertation, I will refer to the use of three types of variants: marked informal, mildly marked informal and formal<sup>8</sup>.

#### 1.3.2.1 Marked informal variants

Marked informal variants refer to those features that do not conform to the rules of the prescriptive norm. They are typically found in informal settings, are judged inappropriate in formal communicative situations and are usually stigmatized. They are most often associated with speakers from a lower socioeconomic background (Mougeon et al., 2010). An example of a lexical marked informal variant in Québécois French would be the use of *char* (car) (Nadasdi et al., 2005).

#### 1.3.2.2 Mildly marked informal variants

Similarly to vernacular variants, informal variants occur in informal communicative contexts and are non-conforming to the rules of the standard language, but they may also occur in formal situations. "However, compared with marked informal variants, they demonstrate considerably less social or gender stratification, are not stigmatized and their frequency in the situation of the Labovian interview typically greatly surpasses that of their formal equivalents" (Mougeon et al., 2010, p. 20). The features *ça fait que* (so), *on* (we), schwa

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<sup>&</sup>lt;sup>8</sup> Mougeon et al. (2010) propose a finer description of their variables: marked informal variants, mildly marked informal variant, neutral variants, formal variants and hyperformal variants. For the purpose of the dissertation and the variables selected for analysis the three-way distinctions allows for sufficient analysis and discussion of the data collected.

deletion, third person *l* deletion, and *ne* deletion are all examples of informal variants in Québécois French (Nadasdi et al., 2005).

#### 1.3.2.3 Formal variants

Formal forms refer to those features that are accepted and socially valued in formal communicative situations (Tagliamonte, 2006). They are typical of written language and careful speech and align with the standard. They are usually found in the speech of upper social class and female speakers (Mougeon et al., 2010). Schwa retention and *ne* retention are examples of formal standard variants in Québécois French (Nadasdi et al., 2005).

## 1.3.3 Speech community and community of practice

Also important to define are the terms *speech community* and *community of* practice which sometimes create confusion as some researchers "font de ces termes un usage lâche" (make use of these terms rather loosely) (Gadet, 2003. p. 62). The terms will be used in this dissertation as they were first introduced in the field of sociolinguistics. Hymes (1972) refers to speech communities as groups of people that share the same rules of conduct and interpretation of at least one linguistic variety. Similarly, Labov (1972) proposed the following definition:

The speech community is not defined by any marked agreement in the use of language elements, so much as by participation in a set of shared norms; these norms may be observed in overt types of evaluative behavior, and by the uniformity of abstract patterns of variation which are invariant in respect to particular levels of language (p.120-121)

Problems have been raised with this definition as it is difficult to draw boundaries around particular communities (Meyerhoff, 2006). The term community of practice was introduced by Eckert and McConnell-Ginet (1998) in their research on language and gender to address this issue. Communities of

practice refer to smaller units of people and are defined as "an aggregate of people who come together around mutual engagements in some common endeavour. Ways of doing things, beliefs, values, power relations – in short, practices- emerge in the course of a joint activity around the endeavour" (p.490). People may simultaneously belong to several communities of practice (e.g.: clubs, family, sports team) where members perform ritualized practices and patterns of behaviour (Samovar, 2009). To illustrate these two concepts we could take the case of French-speaking seniors in Alberta. On the one hand, we can say that they belong to the larger French-speaking Albertan speech community. Their social activities also inform us of the types of communities of practice to which they belong (e.g.: Le club des retraités d'Edmonton, la paroisse St-Joachim, residents of Manoir Saint-Thomas).

## 1.3.4 French language use restriction

Mougeon and Nadasdi (1998) criticized the Labovian view of linguistic community stating that it may apply to majority language or monolingual communities, but this definition could hardly be valid for minority language communities. Drawing on a corpus of French-speakers from four Ontario towns, they demonstrate that there are sociolinguistic discontinuities within the Franco-Ontarian speech community and rather propose to use a model based on the levels of frequency of use of French to predict the linguistic practices of minority speakers. Speakers are found on a continuum but for analysis purposes have been divided into three categories: unrestricted, semi-restricted, and restricted speakers. *Unrestricted speakers* make high use of French on a daily basis, from 80 to 100%

of the time. They are predominant users of French and in most cases consider themselves as French-dominant bilinguals. Their linguistic practices do not differ markedly from monolingual Québecois speakers. *Semi-restricted speakers* use French between 45% to 79% of the time; they thus experience a higher level of contact with English than the unrestricted speakers. For this reason their French reveals linguistic innovations such as internal simplification and sociolectal reduction. Semi-restricted speakers tend to regard themselves as balanced bilinguals (Mougeon & Beniak, 1991). Last, *restricted speakers* use French the least, from .05% to 44% of the time; they tend to consider themselves as English-dominant bilinguals. Their use of French is primarily restricted to school. Hence, their linguistic practices differ from that of unrestricted and semi-restricted speakers in that they make limited use of marked informal variants, infrequent use of mildly marked informal variants and frequent use of formal variants.

## 1.4 Organization of the dissertation

The remainder of this dissertation is organized as follows. In Chapter 2, I will review the literature that provides the rationale for the research questions and support hypotheses for the two studies. Each study is described in a separate chapter, which includes the research questions, description of the method and presentation of the results. More precisely, Chapter 3 will shed light on the stylistic variants used by the target population in nurse-patient interactions and Chapter 4 will examine the linguistic attitudes various stakeholders have towards

<sup>&</sup>lt;sup>9</sup> Balanced bilingualism refers to someone's proficiency levels in two languages. A balanced bilingual is "someone who is approximately equally fluent in two languages across various contexts" (Baker, 2011, p.8). It is important to note that semi-restricted use of a language does not necessarily lead to balanced bilingualism, but speakers' perceptions may not be consistent with objective measurement of their skills.

French L1 and French L2 nursing students' speech. The findings and pedagogical implications from both studies are discussed in Chapter 5. Lastly, Chapter 6 will provide an overview of the limitations and contributions of the present studies as well as additional directions for future research.

## Chapter 2: The setting of the study

The purpose of this chapter is twofold. First, a review of the literature will highlight the findings from previous research focusing on FI students' and FI graduates' communicative competence as well as research dealing with the role of communication in the nursing profession. The second part of this chapter will examine and evaluate the relevance of languages for specific purposes (LSP) course design procedures for French L2 nursing students in Alberta. This chapter will end with a synthesis of the main points examined in the two sections.

### **Part 1: Previous research**

### 2.1 The communicative competence of F1 students and FI graduates

Ever since the first FI program began in 1965 in Saint-Lambert, Québec (Lambert & Tucker, 1972), researchers have been interested in examining the effects of such teaching on L2 proficiency. In broad terms, research has shown that FI programs help students acquire academic skills while achieving high levels of functional abilities in French<sup>10</sup> with no detrimental effects to their L1 (Lazaruk, 2007 and for complete and recent overviews on the proficiency of FI students see Fortune & Tedick, 2008; Genesee, 2004; Lyster, 2007). Moreover, research has also consistently shown that there exists a gap between students' receptive and productive skills.

### 2.1.1 French immersion students' receptive skills

A number of studies have found that FI students attain native-like on a reading and listening skills in their L2 for those students enrolled in early

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<sup>&</sup>lt;sup>10</sup> Functional bilingualism refers to the ability to use the target language across a wide range of everyday contexts and events (Baker, 2011).

immersion<sup>11</sup> programs. Lambert and Tucker (1972) reported on the language development of the first and second cohorts of students enrolled in the first FI program in Saint-Lambert, Québec. Their results indicate that Grade 1 FI students scored equally well as French L1 Grade 1 students on the *Test de* rendement en français de la Commission des écoles catholiques de Montréal, a test that measured three aspects of written comprehension (lexical discrimination, sentence comprehension and the ability to fix a sentence by unscrambling the words). The students repeated the same tests at the end of Grade 2 and 3 and results were consistently similar to francophone children of the same age. Similarly, Genesee (1987) reported that immersion students in Grade 4 and 5 received scores that were comparable to French-speaking pupils of the same age on the California Reading Test and an oral interview measuring reading and listening skills, respectively. Although early immersion students tend to develop higher levels of second language proficiency in comparison to middle or late<sup>12</sup> immersion students, the difference in their overall proficiency levels is not great and furthermore, the gap between these groups does not reflect the differences in accumulated hours of instruction in French (Lyster, 2007, Turnbull et al., 1998). Some studies have shown that differences between early and late immersion students are almost inexistent by the time they reach Grade 12. Turnbull et al., (1998) administered the Senior French Proficiency Test Package for French

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<sup>&</sup>lt;sup>11</sup> Early immersion programs begin at the kindergarten or Grade 1 level (Lyster, 2007).

<sup>&</sup>lt;sup>12</sup> Middle immersion programs typically start in Grade 4 or 5 and late immersion begins in Grades 6, 7 or 8 (Lyster, 2007).

Immersion<sup>13</sup> to 1160 FI students located in 7 different provinces, who had nearly completed their high school studies. Their pool of participants was composed of a similar number of students who had participated in an early, middle or late immersion program. The researchers found no significant differences among participants on the multiple-choice test of listening comprehension or on measures of reading comprehension.

Allen (2003) has found that FI students perform significantly better on measures of L1 reading skills, as measured by the *Program for International Student Assessment* (PISA) reading assessment test, than students who have attended majority English language schools, which indicates that gains made in the L2 occur without costs to their receptive skills in their L1. However, Genesee (1987) and Lapkin et al. (1990) in their discussion of past and future research on immersion instruction argue that claims about students' native-like receptive skills were made on the basis of measures of comprehension of academic language, and that measures of comprehension of informal French texts should be added to the research agenda.

#### 2.1.2 French immersion students' productive skills

In terms of productive abilities, Genesee (1978) found that FI students and French native speakers performed similarly on measures of fluency as measured by the number of words produced on an oral task. However, there was a gap

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<sup>&</sup>lt;sup>13</sup> This series of tests were developed by the University of Ottawa and the Ontario Institute for Studies in Education and consists of two listening comprehension tests based on radio broadcast, a reading comprehension test on the themes of bilingualism, French and bilingualism in the United States, a cloze passage and an opinion text to measure written production and a sentence-repetition task followed by a short interview requiring students to express their views on a topic of general interest to measure oral production.

between the two groups in terms of grammatical, lexical and phonological accuracy. Harley and Swain (1977) compared the oral production skills of five Grade 5 immersion students, three bilingual Grade 5 students (French minority speakers whose English skills were native like), and three unilingual Frenchspeaking children of the same age from Québec City. Data collection consisted of an interview designed to elicit a variety of verb forms from the children. The linguistic analysis of the interview data revealed that compared to bilingual and unilingual children, FI students possess a simplified verbal system in their L2. The researchers concluded that FI students can convey a rich range of meanings, but regularly use inappropriate grammatical features to do so. In addition, Pawley (1985) described and compared the performance of early and late immersion Carleton and Ottawa students in Grades 10-12 using six different tests<sup>14</sup>. The analysis of students' performance indicated that speaking was the students' weakest skill and listening comprehension the strongest. The results of the speaking tests "have shown that the majority of students are able to communicate, albeit with some hesitation, errors and vocabulary limitations" (p.874). The findings of this study suggest on the one hand that FI students have better receptive than productive skills, and on the other hand that FI students are effective communicators in spite of limitations in their linguistic and phonological interlanguage systems. Allen et al. (1987) demonstrated students used their strategic competence (i.e. "verbal and non-verbal communication strategies that may be called into action to compensate for breakdowns in communication due to

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Pawley (1985) reports FI students' score on the Public Service Commission Test, Québec tests de français, Foreign service interview, Grade 12 French speaking test spring 1984, University of Ottawa French proficiency test and measures of students' self-assessment of French proficiency.

performance variables of insufficient competence" (Canale & Swain, 1980)) to compensate for their grammar limitations.

## 2.1.3 French immersion students' sociolinguistic competence

The studies reviewed thus far have investigated FI students' interlanguage development of receptive and productive skills with measures based on features that do not vary in native speakers' speech (e.g., receptive and productive use of the past tenses), which Rehner (2002) refers to as Type I variation. More recent research has however focused on the acquisition of Type 2 variation (Rehner, 2002), that is of target language features that are variable in the speech of native speakers (e.g. negative particle *ne* deletion / retention). The goal of these studies is to determine whether L2 learners use a similar range of socio-stylistic variants as French native speakers.

# 2.1.3.1 The acquisition of tu and vous

Second person address pronouns are important sociolinguistic and politeness markers in French (Dewaele, 2004). Studies based on self-reported data and French L1 corpora indicate that the address system in French is rather complex (Williams & van Compernolle, 2009). Use of address pronouns in contemporary French stems from the coexistence of two orders of indexical relations which have the following properties: "first and most straightforwardly, the capacity to 'index', or point to, the relative formality of settings and occasions, as well as degrees of deference and / or intimacy between the speaker and addressee; and second, the capacity to signal certain aspects of an individual speaker's identity within the wider social order" (Morford, 1997, p.5). Hence, the

same linguistic behaviour may be interpreted either as an act of status difference (e.g., using *vous* to show respect) or as a desire to index social distance (e.g., using *vous* to indicate superiority of one interlocutor). According to Gadet (1997) the second order of index plays a lesser role in Canadian French varieties as interpersonal relations are not overwhelmingly hierarchically-driven in this society. This might explain why *vous* is not used in as many contexts in Canadian French as other varieties of French (Gadet, 1992). Studies have also revealed that the number of domains of use of *vous* is declining in younger generations of speakers both in Canadian French (Vincent, 2001) and in France (Gardner-Chloros, 1991).

The use of address forms by FI students has been investigated by Harley et al. (1990)<sup>15</sup>. The researchers compared the performance of Grade 6 FI students to that of French native speakers of the same age on sociolinguistic measures of oral and written production and a sociolinguistic multiple-choice test. Data analysis revealed on the one hand that immersion students tended to produce fewer instances of *vous* in formal oral and written tasks than L1 speakers, and on the other hand FI students produced more *vous* than L1 speakers in the informal oral task. In addition, results of the sociolinguistic multiple choice test were significantly different. Swain and Lapkin (1990) found similar results in FI high school students. Lyster (1993, 1994) designed pedagogical materials for Grade 8 immersion students consisting of activities demonstrating to students how

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<sup>&</sup>lt;sup>15</sup> Harley et al. (1990) study was designed so as to gather measures of linguistic competence (i.e. grammatical accuracy) sociolinguistic competence and discourse competence so as to obtain a bigger picture of these Grade 6 FI students' overall communicative competence. I am however only reporting on the results of the use of *tu* and *vous*.

language varies according to social context; these activities were then followed by production activities requiring students to make appropriate socio-stylistic choices. The results indicated that a functional-analytic pedagogical intervention can help increase students' ability to understand the distinction between *tu* and *vous*, and in turn use those pronouns more appropriately in their respective contexts of use.

## 2.1.3.2 The acquisition of phonological, grammatical and lexical variants

The acquisition of Type 2 variation by FI students has also been investigated by Raymond Mougeon and his associates in a number of studies conducted using the Labovian framework of variationist sociolinguistics (e.g., Mougeon et al., 2003; Nadasdi et al., 2005; Rehner & Mougeon, 2003).

Mougeon et al. (2010) present a comprehensive synthesis of the results of their large scale study investigating Ontario FI students' acquisition of native norms of spoken French. The researchers' main aim was to determine the extent to which 41 Grade 9 and 12 FI students, who represent a pool of three levels of Frenchlanguage competence (high, mid, and low) as judged by their teachers, master a repertoire of 15 target socio-stylistic grammatical, lexical and phonological variables and whether they adhered to the same constraints on choice as L1 speakers. Their data consisted of recordings of individual semi-directed

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<sup>&</sup>lt;sup>16</sup> The target variables are the following: (1) use of on/nous as first person plural subject pronouns, (2) negative particle ne deletion / retention (3) use of être/avoir as past auxiliaries, (4) use of inflected future/periphrastic future/futurate present. (5) use of je vais/je vas/m'as as auxiliaries of the periphrastic future, (6) use of seulement/ne...que/juste/rien que to express restriction, (7)use of plural/singular verb forms in the third person plural, (8)use of donc/alors/(ça) fait que to express consequence, (9)use of chez/à la maison/su', etc. to express 'movement to one's home (10) use of chez/à la maison/su', etc 'location at' one's home, (11) use of travail/emploi/job/ouvrage,(12) Use of habiter/vivre/rester/demeurer, (13) Use of automobile/voiture/auto/char, (14) schwa deletion / retention and(15) /l/ deletion / retention (Mougeon et al., 2010).

interviews which were then transcribed and compared to a corpus of Montreal adult French L1 speakers and a corpus of Ontario French L1 adolescents which were collected under similar conditions in 1971 and 1982, respectively. They also compared their data with two educational input corpora consisting of French language arts materials used in the Toronto area and a FI teacher corpus collected by Allen et al. (1987). Their results indicated that compared to French L1 speakers, FI students have a limited socio-stylistic repertoire. FI students are found to produce utterances that are typically overly formal. In fact, compared to native speakers of Canadian French, FI students (1) seldom used marked informal variants (e.g. rien que, m'as, ouvrage), (2) underused mildly marked informal variants (e.g. *ça fait que*, /l/ deletion, *ne* deletion)<sup>17</sup> (3) overused formal and hyper-formal variants in comparison to French L1 speakers (e.g. schwa retention, nous) and (4) used neutral variants (e.g. auto, vivre) according to the specific systemic properties of a given variant and its frequency in the educational input. With the exception of the periphrastic future and futurate present<sup>18</sup>, their frequency of use of neutral variants is rarely in line with native speakers' norms. Mougeon et al. (2010) state FI students' tendency to underuse informal variants and conversely overuse their formal counterparts "reflects to a large extent the infrequency or absence of informal variants in the educational input of the students and, in contrast, the predominance of formal and hyper-formal variants in

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<sup>&</sup>lt;sup>17</sup> Mougeon *et al.* (2010) indicate the FI students' speech contains instances of features that coincide with marked or mildly-marked informal variants in native speaker speech (e.g. *je vas*), but their use reflects imperfect mastery of difficult standard variants.

<sup>&</sup>lt;sup>18</sup> Poplack & Turpin (1999) in their Ottawa-Hull corpus demonstrated that the future can be expressed with the inflected future (i.e *futur simple*), the periphrastic future and the present indicative which they refer to as the *futurate present*.

such input" (p.158). Mougeon et al. (2010) explain that other factors such as the availability of an English equivalent variant and structural complexity of the variants also explained the difference in levels of discursive frequency of target variants between L1 and L2 speakers.

To evaluate how university students enrolled at a bilingual post-secondary institution in Ontario compared to FI high school students in terms of acquisition of Type 2 variation, Françoise Mougeon gathered a corpus of 61 first year and fourth year undergraduate students, 42 of which had graduated from a FI program and 39 had completed a core French program. Following the Labovian paradigm, participants took part in a recorded semi-directed interview and answered a background questionnaire. Mougeon's corpus has been analysed to investigate the use of on vs. nous (Mougeon, F., & Rehner, 2009), the use of expressions of consequence alors /ça fait que / donc (Rehner & Beaulieu, 2008), ne deletion / retention (Rehner, 2010) and the use of travail / emploi / job / ouvrage as well as use of *habiter / vivre / rester / demeurer* (Rehner, 2011). The results of these studies are threefold. First, fourth year students outperform first year students regardless of the type of French instruction they had received in high school. Second, FI graduates outperform their peers who attended a core French program in terms of frequency of use and range of use of informal variants. Last, students with early and extended exposure to institutional French combined with frequent use of French outside the classroom tend to use target informal and formal variants in a more native like fashion than their peers. Rehner (2011) argues that "(t)hese findings suggest that the type of learning undertaken in the early years

sets learners up on differential footings with respect to the learning of sociolinguistic variants when they arrive at the university level" (p.256). Findings also underscore the importance of naturalistic exposure to French to develop a socio-stylistic repertoire more comparable to that of French native speakers.

Different results were found for third-year former FI students who seldom used French outside the classroom registered in an undergraduate program in Education at Campus Saint-Jean (CSJ) (Beaulieu, 2007). Five participants were asked to fill out a background questionnaire (adapted from Nadasdi et al., 2005) and then took part in a recorded face-to-face semi-directed interview with the researcher. The data were analysed to identify students' use of expressions of consequence, *ne* deletion / retention and schwa deletion / retention and results were compared to frequency rates reported by Nadasdi et al. (2005) for French L1 speakers and FI high school students. The results indicate that their performance was similar to that of the participants in Nadasdi et al. (2005): they made little use of informal register variants (see Table 1), conversely overusing their formal and hyperformal counterparts (see Tables 2 and 3). Although the participating FI graduates in Alberta have a better mastery of the social use of negative particle ne than Ontario FI high school students, the deletion rate is still far below nativespeaker usage which is quasi categorical in varieties of Canadian French.

Table 1.Use of mildly marked informal variants by L1 French speakers, FI students and FI graduates.

	L1 speakers		Ontario F	I students	Alberta FI graduates		
	N	%	N	%	N	%	
Ça fait que	not avail.	55	0	0	0	0	
Schwa deletion	not avail.	68	406	15	23	12	
Ne deletion	not avail.	99.5	559	27	16	41	

Table 2. Use of formal variants by L1 French speakers, FI students and FI graduates.

	L1 speakers		Ontario l	FI students	Alberta FI graduates		
	N	%	N	%	N	%	
alors	not avail.	43	484	78	19	79	
Schwa retention	not avail.	32	2301	85	172	88	

Table 3. Use of hyper-formal variants by L1 French speakers, FI students and FI graduates.

	L1 speakers		Ontario FI stude	nts	Alberta FI graduates		
	N	%	N	%	N	%	
donc	not avail.	2	96	15	5	21	
Ne retention	not avail.	0.5	1524	73	23	59	

The discrepancy between the more native-like sociolinguistic performance of Ontario FI graduates (Rehner & Beaulieu, 2008; Rehner, 2010) and the sociolinguistic performance of Alberta FI graduates, which is similar to that of Ontario FI students (Beaulieu, 2007), could be explained by the number of participants investigated (42 in Ontario, 5 in Alberta). Another explanation could be found in the institutional context and students' patterns of language use. CSJ students come from different French medium instruction programs: 50% are graduates from FI immersion, 38.5% attended a French L1 school (in a minority context in Canada or a majority context such Québec or other French-speaking countries) and 10.5% are international students who have not been taught through the medium of French<sup>19</sup>. Skogen's (2006) PhD research indicated that interactions among all these groups of students are infrequent outside the classroom. From the analysis of her interview data, she concludes there are at least four different communities of practice within CSJ student body: the FI graduates, the French minority speakers, the French majority speakers, and the international students. Although participants state that members of these four communities of practice

<sup>&</sup>lt;sup>19</sup> Statistics available through Campus Saint-Jean's rapport du comité de synthèse (2011).

meet and interact in their courses, they also argue that interaction among them is scarce in non-academic CSJ student life activities (i.e., at the student lounge, parties organized by CSJ's student union, etc.). Skogen's findings might explain why FI graduates at CSJ, whose use of French still appears to be limited to the classroom, have not developed a larger range of socio-stylistic variants such as 4<sup>th</sup> year students registered at a bilingual university in Ontario.

Mougeon et al. (2010) argue that FI students' limited socio-stylistic repertoire could be partly attributed to the fact that FI students and graduates are exposed to a narrow range of socio-stylistic variants. In fact, many have demonstrated that educational input provides learners with linguistic features that do not reflect authentic language use. Ellis (1986) points out that L2 learners are largely exposed to *teacher talk*, which is characterized by adjustments made at the syntactic, lexical, phonological and functional levels. These changes effectively facilitate learners' comprehension and promote the use of the target language in the classroom, but they do not expose learners to features and structures found in natural spoken discourse (Carter, 1998). It has also been demonstrated that L2 textbooks do not accurately reflect the nature of spoken language (Etienne & Sax, 2009; for more details, see section 2.4.1 below).

In addition, FI students rarely make productive use of their L2 outside the classroom, where they would be most likely exposed to informal and vernacular variants. Studies undertaken in predominantly English-speaking communities indicate that very little contact between FI students and native speakers of French exists. Lapkin et al. (1983) investigated the L2 use patterns of late immersion

students in their last year of high school in Peel County, Ontario and found that French was seldom used outside of school. Similarly, 78 French immersion graduates in Saskatchewan reported using their L2 only occasionally when watching television or reading a book, and only rarely used French in authentic communication situations, even though they held high positive attitudes towards their experience in a FI program and of francophones in general (Husum & Bryce, 1991). The same usage patterns are true for FI students living in cities where contact with French is more readily accessible. DeVries (1985) surveyed more than 400 FI graduates in the Ottawa-Carleton region. Her participants reported very little use of their L2 at the job or with their friends. Similarly, Genesee (1987) interviewed FI students and core French L2 learners in Montreal and found that although the former group of students was more comfortable using French than the non-immersion ones, their L2 contacts tended to be largely reactive in nature. They would respond in French when addressed in that language, but they rarely sought out opportunities to make use of their L2. Similarly, FI students in grades 5 to 8 in Sudbury reported more participation in out-of-class francophone activities than non-immersion students of the same grade levels; however, such participation was very limited (Van der Keilen, 1995). Lastly, Wesche et al. (1990) investigated the use of French of 81 early and late FI graduates undertaking postsecondary studies in Montreal, Ottawa and Kingston and found no significant differences among the groups: all of them used very little French. Early immersion graduates who had had prior contact with native speakers of French during their schooling where found to make more occasional use of

French. Moreover, students who chose the University of Ottawa, but who were not native of that region, tended to make slightly more use of French in their leisure time.

In sum, students who go through immersion programs outperform French L2 students who attended a core French program (Lyster, 2007). In spite of the success of FI programs in promoting higher proficiency skills than traditional French L2 programs, FI students are not native like in French: their performance in academic settings may be very good, and often comparable to that of native speakers of French in terms of receptive skills, but their productive skills and their ability to adapt their speech to match the (in)formality of the situation are limited. This appears to be due to the nature of educational input and lack of opportunities to use the language outside classroom. In fact, French immersion graduates in the Montreal area often complain that the many years they have spent learning French did not enable them to communicate with local native speakers in real-life settings such as the workplace (Auger, 2002).

These findings have important implications for bilingual nursing students in Western Canada because effective communication is a central aspect of their profession (Bowers-Ingram, 2009). The next section will highlight the role of communication for patients' health and safety and the communicative challenges faced by instructed L2 nurses in clinical settings.

#### 2. 2 Communication in nursing care encounters

Communication is a key skill for nurses; effective communication with patients is seen as a cornerstone of high-quality nursing practice (Bowers-Ingram,

2009). Sheppard (1993) suggests that, in the nurse-patient relationship, communication implies more than the mere transmission of information; it is also about the ability to bond with patients, to recognize their feelings and concerns and to show empathy and understanding. Moreover, Isaacs et al.'s study (2011) focusing on nursing-specific speech activities demonstrated that nurses must show these qualities across a range of nursing tasks which vary wildly in terms of linguistic demands: form partnerships with patients and their families, address complex acute and chronic biomedical and psychosocial problems, provide preventive care, clarify physician's message, manage patients' emotions, summarize health situations to patients and their families, ask routine questions, inform patients' of bad news and ensure informed decision making that respects patients' needs and preferences. In a review of the literature on health communication, Robinson (2002) identified that poor or limited communication (due to lack of effective communication strategies or lack of time) has been found to increase the risk of delivering delayed, incorrect, or improper nursing care.

Conversely, it has been demonstrated that communication based on open, transparent, professional and empathic interactions has the potential to create positive health outcomes in patients. Thorne et al. (2004) interviewed 12 patients suffering from multiple sclerosis about the communication practices of the nurses who cared for them. Through discourse analysis of the interview data, the researchers determined that patients who deal with nurses that use patient-centered communication strategies (i.e., they do not dismiss or minimize patients' symptoms, do not rush through their interventions and provide thorough

information) perceive that they can cope with and manage their illness better than participants who did not describe their nurses in such a light. Similar findings have been reported in studies focusing on mental health diseases. Kai and Crossland (2001) individually interviewed 32 patients who had been suffering from a mental illness for a significant number of years (mean duration of mental illness of 21 years). Analysis of the interview data showed that patients who perceived they had been receiving empathic and understanding care also adhered more strongly to their prescribed treatments and followed their schedule with their specialists. Lautrette et al. (2007) conducted a randomized control trial on the efficiency of patient-centered communication strategies<sup>20</sup> used during an intervention with relatives of a dying patient. While 63 participants were briefed following a patient-centered approach, 63 other participants received standard end-of-life communication. Participants were interviewed 90 days after the death of their relative and measures of post-traumatic stress disorder symptoms and anxiety symptoms were taken via the Impact of Event Scale and the Hospital Anxiety and Depression Scale. The results indicated that participants who had received the patient-centered intervention had significantly lower scores on both. These results clearly indicate patient-centered intervention helped reduce family members' symptoms of post-traumatic stress disorder and anxiety.

Benefits of effective communication skills have also been reported in cancer patients. A study conducted by Rodger (1995) has captured the effects of nurse

<sup>&</sup>lt;sup>20</sup> Lautrette et al. (2007) implemented 5 communication strategies during these interventions: (1) value and appreciate what family members had to share, (2) acknowledge family members' emotions, (3) ask questions to understand who the patient was as a person, (4) elicit questions from family members and (5) actively listen.

communication strategies on four cancer patients using four physiological (muscle tension, electrical skin conductance, skin temperature and cardiovascular activities) and three psychological measures (the State Anxiety Inventory, the Subjective Units of Disturbance and a non-verbal behaviour worksheet).

Measures were taken twice, once during the intial encounter of the patient with the nurse at the beginning of a shift and once during a stressful treatment.

Patients' physiological and psychological data were collected over a two-day period four times with four different nurses who had been trained to use a set of verbal and non-verbal strategies to display empathy towards their patients in their interaction and 4 four times with 4 experienced nurses who had not received the training. The results indicated that patients treated by nurses who had received the training on patient-centered communication strategies showed significantly lower stress levels during these encounters. Rodger's (1995) results undoubtedly point to the powerful effect communication can have on patients' health and comfort.

The impact of communication is also apparent for senior patients. McGilton et al. (2009) conducted a meta analysis of studies focusing on outcomes of communication between nurses and senior patients in residential care settings published between January 1985 and December 2007. Their analysis indicates that patient-centered communication strategies have been linked to better management of patients' agitation and challenging behaviours and overall improved quality of life.

In their review of the literature, the Consultative Committee for French-Speaking Minority Communities (2007) identified key areas where communication is more likely to impact patients' health outcomes. Figure 2 reveals that good communication is more crucial when the intervention is psychological or interpersonal, rather than biomedical or technical in nature.

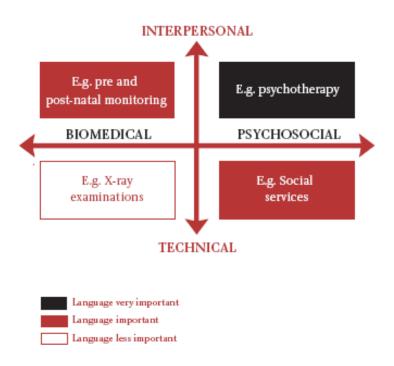


Figure 2.Quality of care and domains of language communication for minority French contexts (Consultative Committee for French-Speaking Minority Communities, 2007).

# 2.2.1 Communication in cross-cultural nursing care

Research has also demonstrated that communication is crucial in crosscultural nursing care encounters (Jirwe et al., 2010), which are becoming considerably more common in countries with large immigrant populations (Jones & Watson, 2009). Patients belonging to a minority culture group voiced their concerns in a number of studies about the perceived effects of language barriers on their health and well-being<sup>21</sup>. Cioffi (2006) interviewed 8 culturally diverse patients who had been hospitalised for at least three days in an acute care ward in a Syndey, Australia hospital. The patients mentioned they felt they did not receive sufficient information about their condition, its management and what they needed to do to improve their health. Similar findings are reported by Chan and Woodruff (1999) who compared the experience of 24 minority speakers and 106 English-speaking cancer patients in a palliative care unit at an Australian hospital. Participants were interviewed at each readmission at the hospital and by monthly phone interviews over a six-month period (the interviews were conducted in the participants' L1). Data analysis of the interviews revealed that compared to English native speakers, English L2 patients felt they did not possess all the information necessary to fully understand their disease. They also reported inferior symptom control and more severe mood disturbances than L1 patients.

Language barriers also have an impact on patients suffering from a mental illness. Reid et al. (2001) demonstrated that immigrant patients suffering from drug addiction faced language barriers accessing and using health services.

Researchers recruited participants from eight different ethnic communities in Sydney, Australia. They recorded 15 semi-directed focus group discussions which were led by a research assistant coming from the same ethnic community as the participants. Data analysis revealed trends that were similar across all communities: few ethnic communities turn to health centres for information

<sup>&</sup>lt;sup>21</sup> The review of the studies will focus solely on nurse-patient interactions, although similar findings have been reported in studies focusing on physician-patient interactions and psychologist-patient interactions (Bowen, 2001).

arguing that requesting advice and help about illicit drug problems is a difficult task in itself, even more so when it must be done in an L2. When patients did get access to services, they commented on the number of misunderstandings that occurred during the consultation with the nurse. Due to language barriers, patients felt they were not receiving the right assessment, referral or counseling. The participants were reluctant to go back for a second appointment and only a few participants reported having completed the treatments. Futhermore, Li et al. (1999) interviewed 70 members of the Chinese community in London, England who suffered from mild and temporary mental afflictions. The results of the study indicate that for the majority (64%) of the participants, the major barrier to effective treatment was language. Many stated they had misinterpreted what their initial diagnosis was, having understood their symptoms were physical rather than psychological in origin. Other participants stated they did not take their medication adequately because they did not fully understand doctor and nurses' explanations and consequently found the treatment ineffective.

#### 2.2.2 L2 nursing students

Studies focusing on L2 nursing students are scarce and are mostly found in the field of transcultural nursing; the majority of these studies are descriptive in nature and focus on the experience of ESL nursing students (Choi, 2005; Wang et al., 2008). This line of research reveals that participants experience difficulty or fail to meet the requirements of their clinical placements<sup>22</sup>.

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<sup>&</sup>lt;sup>22</sup> The review of the studies will focus solely on L2 university educated students so as to allow for better comparison with FI nursing students. Similar findings have, however, been reported for ESL resident care aides and home support workers enrolled in a work-oriented program sponsored by an immigrant services agency in Western Canada (Duff et al., 2000). When interviewed about

The Faculty of Nursing of the University of South Australia identified a number of communication problems in their ESL student body. Such issues included difficulty in explaining procedures and offering reassurance to patients, problems performing change of shift with medical staff, and inappropriate use of communication strategies (e.g. smiling and nodding instead of responding verbally when misunderstandings occur) (Hussin, 1999). Malu and Figlear (1998) periodically observed and interviewed ESL nursing students during their first year in a nursing school in the United States and found that participants lacked fluency and vocabulary to engage in meaningful technical discussions with medical staff and nurse educators. They also found that students struggled to make small talk with patients and to respond to their comments appropriately. Shakya and Horsfall (2000) interviewed 9 ESL students in Australia about their experience at the end of their first year of an undergraduate degree in nursing. Their data analysis showed that the participants experienced various language related issues which ranged from difficulties in using technical language in interactions with peers and medical staff, difficulty with spoken English when dealing with patients, concerns that they would not be understood well by patients, and problems understanding patients and peers due to accent, use of colloquial expressions and fast rate of speech. Similar findings were found in Rogan et al. (2006) who asked 15 ESL nursing students to participate in focus group discussions to investigate their perceptions towards their performance in their first clinical placement.

Participants commented on their problems understanding abbreviations or

their experience in the course, the participants stated they faced challenges "navigating between technical, non-technical, polite and highly colloquial and functional oral English use with instructors, colleagues, patients / residents, residents' family members" (p.29).

terminology used by nurses. They also struggled to understand slang and ironical comments used by patients which impeded them from responding appropriately. Students mentioned that they wished they had been better prepared to create rapport with patients and families.

The participants in the studies reviewed above had all met the language requirements set by their universities or nursing schools. Although L2 proficiency is usually seen as a good predictor of academic success, it does not, in the case of nursing students, guarantee success in clinical settings as the mastery of communication skills other than academic English are required of them. Interestingly, in spite of communication problems with native English speakers, it was found that ESL nurses have more effective intercultural communication skills to successfully deal with non-native patients than unilingual English-speaking nurses (Shakya & Horsfall, 2000).

The descriptive, interpretative study designs used in the studies reported here allowed to cover the range of language-related challenges ESL nursing students face in their clinical placement and identify the nature of their communication problems. L2 nurses clearly face challenges with their receptive and productive English-language skills in a clinical context, a competence that Canale and Swain (1980) and Bachman (1990) refer to as *sociolinguistic competence*, and Celce-Murcia (2007) as *socio-cultural competence*<sup>23</sup>.

In light of these research findings, and what L2 research has revealed with respect to FI students' communicative competence, similar challenges are thus expected for FI graduates specializing in nursing studies. On the one hand, since

<sup>&</sup>lt;sup>23</sup>I will adopt the term *sociolinguistic competence* in the remainder of the dissertation.

FI graduates have typically learned French in a classroom setting with little interactions or contact with native speakers outside the classroom, they have seldom been exposed to informal variants found in natural day-to-day speech (Mougeon et al., 2002). Thus, similar to L2 nurses working in English dominant settings they might experience receptive difficulties when dealing with French L1 patients from a variety of backgrounds. Moreover, assuming that similar to other former immersion students studying at Campus Saint-Jean, FI nursing students have a limited sociolinguistic repertoire and may not possess all the necessary linguistic resources to carry out effectively all their nursing tasks.

Given the importance of communication in nursing care, it is clear that FI nursing students' linguistic training must address the gaps in their sociolinguistic competence so that they can develop their ability to adapt their speech according to the demands of real life nursing settings. The next section of this chapter will thus examine the relevant literature on the design of L2 courses for professional purposes.

# Part 2: Designing a language for professional purposes course

In light of the review of the literature presented above, we can conclude that it is essential for FI nursing students to become successful L2 *users* of French in order to produce, sustain or amplify positive differential health outcomes in their patients. In that regard, I will evaluate the relevance of LSP, a type of L2 instruction that aims at preparing students for the professional roles they will assume in their L2, for the linguistic training of FI nursing students.

## 2.3 Languages for specific purposes

The literature on teaching LSP has been inspired mostly by research in English for Specific Purposes (ESP) (Martin, 2000). The term LSP is broadly used to refer to the teaching of languages tailored to the communicative needs of L2 learners involved in a particular academic or professional context (Basturkmen & Elder, 2004). Thus, LSP courses focus on the acquisition of a limited range of communicative events found in the target situation (Dudley-Evans & St John, 1998).

Basturkmen and Elder (2004) state that the design of LSP programs and courses start with two important initial steps: needs analysis and description of language use in target situations (see Figure 3). Needs analysis involves the use of numerous methods of data collection (i.e. observation of participants in the target situation, structured interviews with different stakeholders) to assess the current levels of learners' L2 language proficiency and to identify the types of language situations L2 learners will face in the target context (Jordan, 1997). In that regard, Lousada (2004) states that spoken language is becoming increasingly predominant in professional environments. Needs analysis is often concerned with a description of language use in the target situations. The approaches used to describe language use have greatly evolved over the years and have become more sophisticated in terms of descriptions; the field of LSP now widely embraces genre analysis, an approach developed by John Swales (Dudley-Evans, 1994; Basturkmen, 2002, Swales, 1990). This approach, based on analysis of genres in specific discourse communities, is privileged because genres are thought to be

highly structured and conventionalized in terms of form and content (ibid). In their review of the literature on LSP teaching, Basturkmen and Elder (2004) report on a number of studies that have used genre analysis, but none of them have focused on the spoken genres of a given target community. Needs analysis and description of target language thus provide an inventory of language action situations proper to the professional domain in question which is then organized into a number of didactic sequences to enable learners to develop an array of linguistic abilities (Lousada, 2004).



Figure 3. Recommended steps for setting up and implementing an LSP program (Jordan, 1997)  $\,$ 

LSP courses are created under the assumption that all that is required of LSP learners to successfully integrate the target community is to emulate the language use of those who have already attained membership in that community (Basturkmen & Elder, 2004, Kramsch, 2002), or in other words, to master native speaker norms. There are, however, many problems with the native speaker yardstick. First, research in second language acquisition (SLA) has revealed that although achievable for some L2 learners, near-native proficiency is a goal that is difficult to attain (for an overview see Abrahamsson & Hyltenstam (2009). Second, the literature on language at work indicates that the most challenging aspect of workplace communication is not transactional, information-oriented

aspects of workplace talk (which represent the type of data typically taught to LSP learners according to Lousada, 2004), but rather the relation aspects of workplace interactions (Holmes, 2005; Holmes et al., 2009). Indeed, this body of research has demonstrated that the process of becoming a member of a given professional community of practice involves not only acquiring specialized vocabulary and linguistic routines, but also the underlying norms that allow for the development and maintenance of harmonious work relations (Wenger, 1998). The relational aspects of workplace communication implies, among others, the appropriate use of type and style of humour (Holmes & Marra, 2002; Holmes, 2007), use of small talk (Holmes, 2000), and ability to display leadership skills (Holmes, 2008). Holmes et al. (2009) argue that L2 courses designed for professional purposes should "encourage them [the L2 learners] to see their role not as imitators of native speakers, but as social actors engaging with other social actors in a particular kind of communication and interaction which is different from that between native speakers, and which expresses their professional identity in a way they find satisfactory and satisfying" (p.40). One last problem with the native speaker norm in the workplace is that native target community members might not expect or want L2 learners to reproduce their discourse. In fact, Valdman (2000) argues that

l'utilisation de la part d'alloglottes de traits associés au niveau de langue familier choquerait provenant d'une personne censée avoir appris le français en milieu scolaire. D'autre part, l'appropriation de cette variante est perçue comme une intrusion puisque généralement les alloglottes ne participent pas aux réseaux de la communication vernaculaire, c'est-à-dire au sein du groupe familial, d'un groupe de voisinage, etc. (p.657).

(allophones' use of elements associated with familiar language would be jarring when coming from a person supposed to have learned French in school. Furthermore, the appropriation of this variant is perceived as an intrusion because usually allophones do not participate in vernacular communication networks, that is, within families, neighbourhood groups, etc.)

However, no empirical evidence exists to support his opinion.

In spite of the limitations of LSP course design, it nevertheless offers an important starting point. It is concerned with assessing the gap between students' L2 proficiency and the communicative demands of the target situations, and identifying the communicative problems they may encounter. LSP course design does not, however, set a reliable yardstick for L2 production. Consequently another teaching principle must be considered. Cook (1999) proposes that language teaching would benefit from taking as its model the L2 user rather than concentrating primarily on the native speaker, a model explained in the following section.

#### 2.4 The multi-competent model

In his review of models for L2 acquisition, Cook (2008) introduces his multi-competence approach to L2 teaching whose main linguistic target is "L2 user goals, not approximations of native speaker norms" (p.232). This model could thus potentially address some of the limitations of LSP course design.

The term *multi-competence* was first used by Cook (1991) to refer to the compound state of a mind with two languages. He argued (Cook, 2002) that multi-competent minds are qualitatively different from those of monolingual L1 speakers in a number of ways: they think more flexibly, have increased language awareness, and have better communication skills in their L1. According to Cook

(1999, 2002, 2008), because L2 users differ from monolinguals, language teaching should place more emphasis on the student as a potential and actual L2 user and be less concerned with the monolingual L1 speaker.

In a sense, the multi-competence model, compared to other theories of L2 acquisition (e.g., Universal Grammar, cognitivism, interactionism, socioeducational), does not assume that bilingualism or multilingualism is an uncommon individual characteristic. The key foundation of this model is that "the person who speaks more than one language should be considered in their own right, not as a monolingual who has tacked another language to their repertoire" (Cook, 2008, p. 231). Hence, the bilingual, namely the successful L2 user, is the linguistic yardstick which should serve as a model to L2 learners because bilinguals' knowledge and uses of the target language differ from that of monolingual native speakers (Cook, 2002). In that, Cook (2008) advocates that "acquiring a second language does not mean acquiring the self-contained language system of a monolingual, but a second language system that coexists with the first in the same mind" (p.232). Cook (2002, 2008) states that adopting this model has major implications for L2 teaching practices and objectives. The main consequence, relevant to this dissertation<sup>24</sup>, is that the target of acquisition is not the constructed standard language, nor the monolingual native speaker norm, but rather the proficient L2 user who is capable of functioning successfully in

<sup>&</sup>lt;sup>24</sup> Other implications which are beyond the scope of this dissertation include the importance of setting standards against which L2 users are measured which are L2 user standards, not L1 native speaker standards (Cook, 2002).

target situations. Therefore, according to Cook (2002, 2008), L2 teaching and learning materials should be based on features used by successful bilinguals.

## 2.4.1 Textbook analysis

Evidence from the analysis of L2 textbooks indicates that Cook's multicompetence model has not been generally adopted. In the case of French L2 teaching, the standard language remains the ideal to be attained. Mougeon et al. (2002) analysed French language arts materials designed for French immersion students in Ontario and found that the dialogues used to represent spoken discourse do not expose students to informal variants but rather almost exclusively to formal and hyper-formal usage, typical of standard written speech. Similarly, Auger (2002) examined the presence of informal Québecois vocabulary in 7 textbooks used in primary and high school French-immersion programs in Québec. Her analysis reveals that a small number of *québécismes* are found in her corpus: words that are unique to Québec or North America (e.g., Action de Grâces, tourtière, sirop d'érable), and lexical items that are found more frequently in Québec than in France (e.g., chandelle, fin de semaine). However, Auger found no example of lexical variants that are strongly stigmatized. Similarly in French as a foreign language materials in the United States, Etienne and Sax (2009) analysed whether and to what extent 22 beginner and intermediate French L2 textbooks used in the United States treated stylistic variation phenomena. They focused their analysis on three frequently used stylistic variables found in oral varieties of French: ne deletion / retention, interrogative formation and use of first person plural pronoun subjects on vs. nous. They

concluded that even though the majority of the manuals stated in their preface that their main objective was the development of oral skills, and practice in context, little sociolinguistic information is provided to the learner. In addition, the three target variables were unrepresented in their corpus.

# 2.4.1.1 Textbooks for French L2 nursing students

The disproportionate attention given to the standard French is also apparent in French L2 textbooks designed for nursing students. For the purpose of this dissertation, I analyzed two commercial French L2 textbooks for nursing students. The first, Nursing in two languages (Fizaine, 1994), a Belgian manual, was designed not only for student nurses learning their professional practice, but also to help certified nurses in hospitals faced with patients of another culture; their target students are both French and English-speaking nursing students. The preface of this textbook specifies that it is constructed like a lexicon, that is to say that expressions are meant to match the circumstances and actions found in the professional context (p. 16). The second manual that was analyzed is entitled Santé-Médecine.com. Its target population is all those who wish to improve their use of French in situations where health is an issue (Mourlhon-Dallie & Tolas, 2004. p. 2) and is designed for health care professionals who wish to practice in France. Its pedagogical goals are the learning of cultural, institutional and linguistic (grammar and vocabulary) aspects of health care professions. The last chapter focuses on the nursing profession; and it was this section of the book that was analyzed.

My analysis of these textbooks involved manually examining how four frequently used variables in varieties of spoken French across the French Diaspora (Gadet, 1992) (i.e. schwa deletion vs. retention, /l/ deletion vs. retention, ne deletion vs. retention, first person plural subject pronouns on vs. nous) were treated in these textbooks. First, phonological variables were analysed even though the French textbooks were not accompanied with audio materials<sup>25</sup>. Data analysis consisted of a first analysis of the corpus to identify the contexts where each target stylistic variable was used. Then, all the identified occurrences were examined to determine whether stylistic variation could occur in that context. As a result, a number of features were excluded from the analysis. In the case of /l/ deletion vs. /l/ retention, only third person personal pronouns were retained for analysis, and all instances of disjunctive object pronouns were eliminated as no variation occurs in that linguistic context (Ashby, 1984). For the variable schwa deletion vs. schwa retention, a number of phonological contexts that do not allow variation were also excluded from the analysis. First, the presence of schwa in final syllables, or syllables at the end of rhythmic groups as schwa deletion is quasi-categorical in oral Canadian French (Uritescu et al., 2002). Linguistic contexts where a schwa is always maintained such as the rule of the three consonants were also excluded. "According to this rule, a schwa cannot be deleted when the outcome of this deletion is a cluster of three (or more) consonants (e.g., mercredi→\*mercr'di) (Antes, 2007, p. 24). For the variable first

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<sup>&</sup>lt;sup>25</sup> This decision was taken because it possible to account for sound deletions in writing. For example, the English language uses apostrophes to indicate sound deletion: (e.g., I'm, you're). The textbook *Nursing in two languages* also indicates as a footnote that the expression *aller* à *la selle* is usually pronounced *aller* à *selle*, These two examples illustrate that the writing system can be used to illustrate phonological variation, is such is the authors' intention.

person plural pronouns *nous* vs. *on*, instances of *on* used as an indefinite personal pronoun were excluded from the analysis because of its difference in meaning.

Last, for the variable *ne* deletion vs. retention, constructions in which the usage of *ne* is categorical (e.g., *n'est-ce pas*) were also omitted. Once all contexts of use of the target variables were validated, a new analysis was undertaken to determine whether the informal or formal variant was used in that context.

The analysis revealed that the authors consistently selected the formal phonological variants, schwa retention and /l/ retention, to portray both nurses' and patients' speech (for an overview of the results see Table 4). Similarly, because the dialogues in both manuals are portrayed according to standard written language spelling and syntax, and since no notes are inserted to explain to learners grammatical variation, both manuals present nurses' and patients' speech that respect written norms without explaining the stylistic value of the variants. As for the lexical variable on vs. nous, Santé-Médecine.com makes consistent use of the informal variant on (3/3). However, on appears in slightly more than half the contexts where the variable is used (21/39) in Nursing in two languages, which indicates to the learner (and the language teacher who does not have explicit sociolinguistic knowledge of French) that both forms occur in free variation (e.g., "Nous venons changer vos pansements." and "On retire le drain d'aspiration aujourd'hui.", Fizaine, 1994, p. 189). This is in keeping with Etienne and Sax (2009) who observed that French L2 textbooks generally consider these two pronouns as stylistically equivalent.

Table 4. Use of stylistic variables in French L2 nursing textbooks

	Mildly mai informal var			Formal variants		
		N	%		N	%
Nursing in two languages	Schwa deletion	0	0	Schwa retention	739	100
	/l/ deletion	0	0	/l/ retention	300	100
	Ne deletion	0	0	Ne retention	233	100
	on	19	47.5	nous	21	52.5
	Schwa deletion	0	0	Schwa retention	8	100
Santé-	/l/ deletion	0	0	/l/ retention	5	100
médecine.com	Ne deletion	0	0	Ne retention	4	100
	on	3	100	nous	0	0

Even though the two textbooks that have been analyzed attempt to present real nursing situations to learners (e.g. performing routine examinations, getting the patient up, washing and dressing the patient, and administering medications), the examples of language use recommended to perform these functions failed to provide students with features that may be found in spoken French, choosing to portray an idealized variety of standard spoken French in clinical settings. The prevalence of formal features, in line with the written language usage, is surprising given that these textbooks aim at preparing students for real life nursing contexts.

Cook (2002) argues that L2 instruction that does not orient to the standard norms, adopts monolingual native speaker norms "(t)ypical examples found on the Web are the Alliance Française claiming French 'taught by French nationals' or the Eurolingua Institute saying 'All Eurolingua tutors are fully-qualified teachers and native speakers, experienced in teaching their mother tongue as a foreign language" (p.337). Cook (1999, 2002) also argues that portrayal of L2 users or usages in learning materials is scarce. The rare exceptions being L2

tourists or students who ask help to decipher a restaurant menu, to find their way in a neighborhood, or try to get a train from one place to another (Cook, 2002)

Cook's multi-competence model addresses the issues of LSP course design by proposing the proficient L2 user who has gained membership into the target community of practice as a linguistic model in the L2 classroom. However, a limitation of his approach is that it cannot be applied to contexts where no successful L2 users have yet joined the target community of practice; such appears to be the case of clinical contexts in French minority environments. The first three cohorts of graduates from the University of Alberta's bilingual nursing program had all accepted job appointments in English-majority hospitals and clinics or opted for a career change<sup>26</sup>. Hence, Valdman's concept of *pedagogical norm*, which is constructed from target community members' linguistic behaviour and expectations towards L2 usage, could be used to overcome issues faced by LSP course design and implement into the L2 classrooms an ideology similar to that proposed by the multi-competence model.

# 2.5 Valdman's pedagogical norm

In an effort to address the limitations of teaching the standard or monolingual L1 speakers' norm, Valdman proposes the concept of a *pedagogical norm*. He first introduced this notion in 1967 and has developed his theoretical principles in various publications over a 36-year period (Valdman 1967; 1976; 1988; 1989; 1992; 1993; 2000; 2003) His pedagogical norm has been adopted as a theoretical framework in a number of studies focusing on L2 grammar,

<sup>26</sup> Statistics made available by the liaison of CNFS at Campus Saint-Jean.

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vocabulary, pronunciation, and sociolinguistic instruction (for an overview Bardovi-Harling & Gass, 2002).

Valdman's pedagogical norm is based on three criteria (2000, 2003). The sociolinguistic criterion specifies that a pedagogical norm should reflect target language users' actual speech in authentic communicative situations. The epilinguistic criterion stipulates that a pedagogical norm should be based on target community members' expectations towards L2 learners' linguistic behaviour. Last, according to the acquisitional criterion, the pedagogical norm should take into account factors that promote L2 learning. In other words, the pedagogical norm focuses on high frequency linguistic features that are acceptable to native speakers and which initially offer low degree of complexity to language learners. As L2 competence develops, more complex features are introduced to learners.

In this dissertation, I focus on defining a pedagogical norm for FI nursing students from the sociolinguistic and epilinguistic criteria as my interest lies in identifying the high frequency stylistic features that are most valued by target community members. The third criterion has been left for future studies, as the target learners have already developed an interlanguage system that allows them to get their meaning across (Lapkin & Swain, 1984)<sup>27</sup>. Let us now review in more details the sociolinguistic and epilinguistic criteria.

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<sup>&</sup>lt;sup>27</sup>The aquisitional criterion, which focuses on the sequencing of the target features to facilitate acquisition, will not be taken into account in the design of the studies reported in this dissertation. However, due to the nature of French immersion graduates' fossilised interlanguage (Lyster, 1987, Ranta & Lyster, 2007), I acknowledge that these learners have special learning needs that must not be overlooked. Rather than focusing on 'when' to introduce the target features as Valdman proposes, I will shift the focus of this criterion to briefly address 'how' to teach post-immersion students in Chapter 5.

## 2.5.1 The sociolinguistic criterion

Valdman (2000) stipulates that a pedagogical norm must be based on target community members' authentic usage of the language. In other words, he proposes to identify the target population's *descriptive norms* of language use.

Moreau (1997) states that descriptive norms are descriptions deprived of judgment of the language behaviour that a language group displays. They are opposed to *injunctive norms* which are prescriptive in nature, specifying language behaviours that one ought to (or ought not to) engage in. Descriptions of language are derived from corpora where language features become objects of study.

Typically, language description focuses on phonetics, phonology, morphology, syntax and sociolinguistic variation (Liddicoat & Curnow, 2004).

Descriptive norms of language use have been widely studied by variationist sociolinguistics, a field a study developed by Labov in the 1960's and 1970's in New York City and in Martha's Vineyard (Labov, 1972). At the centre of the variationist sociolinguistics analysis is the notion of *linguistic variable*, a linguistic feature that has alternate realizations called *linguistic variants*. "The central claim of this approach is that the alternative forms of linguistic elements do not occur randomly" (Preston, 1995, p.230). Indeed, the occurrence of linguistic variants is governed by external factors (e.g. social class, sex, style) and internal ones (e.g. the linguistic environment in which the variant is uttered) (Tagliamonte, 2006).

This field of study has shed light on the relation between language features (or varieties) and the notion of prestige within a society. Labov (1972) noticed

that speakers of non-standard varieties judged their speech as 'bad' or 'inferior', but never refrained from speaking it. He thus hypothesized that an underlying reason for this behavior must exist, and postulated that non-standard varieties carry *covert* prestige. In fact, Labov (1972) found that non-standard varieties were used strategically either to gain recognition, acceptance, enhance solidarity with a group of people, or to signal to other speakers their identification with a specific group of speakers.

## 2.5.2 The epilinguistic criterion

Unlike research focusing on the design of Languages for Specific Purposes courses, Valdman's pedagogical norm does not assume that L2 learners must emulate native speakers' speech in order to be successful in target language situations.

Valdman argues that native speaker norms may not be an appropriate target for L2 speakers inasmuch as they are not part of the inner group. He proposes that a pedagogical norm must rely on native speakers' judgments and intuitions about social acceptability. Community members' epilinguistic discourse, i.e., discourse about language and language practices marked by value judgments (Valdman, 2000), offers insights into that group's perceptions towards which language variety or varieties and linguistic variants they most value.

# 2.5.2.1 The study of linguistic attitudes

It is possible to gain insights into community members' attitudes and perceptions through the study of linguistic attitudes, which have typically been investigated through *direct* and *indirect* approaches (Garrett et al., 2003). Direct measures involve overt elicitation of participants' attitudes through interviews

and/ or questionnaires. In these investigations, participants are asked direct and specific questions pertaining to their language and linguistic preferences (Bee Chin & Wigglesworth, 2007). Another direct questioning technique involves participants rating a range of statements about how much they value certain linguistic practices (Garrett et al., 2003). Thus, in direct measures, respondents articulate explicitly what their language attitudes are. Although direct measures have been used in a number of studies (see Garrett, 2010), they face important validity issues. Garrett et al. (2003) have argued that direct questions requiring participants to answer hypothetically have proven to be a poor predictor of future behaviour as participants tend to provide socially desirable answers, especially when questions focus on racial and linguistic minorities. Similarly, participants could also refrain from revealing their linguistic values or preferences for prestige reasons (Oppenheim, 1992). Ostrom et al. (1994) state that the acquiescence bias is another limitation of direct measures. According to them, some participants might be inclined to agree or react positively to questions that are presented to them regardless of their actual beliefs. Hence, direct measures do not always tap into respondents' actual attitudes. Given the importance of accessing such privately and maybe unconsciously held attitudes, researchers have developed indirect approaches to linguistic attitudes to counterbalance the possible deficiencies of direct measures.

Indirect methods seek to investigate language attitudes without the participants knowing what the object of the study is (Bee Chin & Wigglesworth, 2007). The procedure that has been most used in that regard is the matched guise

technique (MGT) developed by Lambert (1967) whose intention was to measure social evaluations of English and French among French-speaking and English-speaking Montrealers (Giles et al., 1987). MGTs consist of recordings of the same speaker who can pass as native in two different languages or varieties reading the same passage in different speech styles (Garrett, 2010). Because the speaker is the same in all speech styles, varieties, or language, the procedure ensures that the only variable being judged is language (Giles et al., 1987), and not other extraneous variables such as voice quality – thus isolating attitudes towards language from attitudes towards individual speakers. Participants are told they will be exposed to a variety of speakers when in fact they listen to the same person speaking in different guises. After listening to each speech sample, respondents are asked to fill an attitude rating scale ranking the speaker on a variety of personality traits such as intelligence and kindness.

Listeners are aware that the procedure is an attitude rating task, but they are not explicitly aware of which linguistic phenomena they are evaluating. For this reason, Lambert (1967) believes the MGT is a better instrument than direct questioning to obtain participants' private reactions and opinions. The results of MGT studies are analyzed by statistical measures in order to identify factors that contributed to the attitudinal rankings. Since it was first introduced, the MGT has been refined and used in a plethora of studies to investigate attitudes towards different languages, social or regional language varieties and L1 and L2 accents (e.g., Bettoni & Gibbons, 1988; Kristiansen, 1997; Papapavlou, 1998; Zhou 2000, for an overview see Garrett, 2010.)

The design of MGTs has been criticized because of the way speech samples are presented to judges for evaluation. Fasold (1984) states the speakers are judged based on their reading performance, and not on the language variety they are using with a real communicative intent. Moreover, the authenticity of the varieties that the respondents are asked to judge in MGT studies have also been questioned (Garrett et al., 2003). It has been pointed out that speech samples may not represent the kind of speech that people would typically encounter in the target speech communities. For this reason, many researchers interested in language attitudes have designed their studies differently from the standard MGT, and used different speakers to record the speech samples. This procedure is referred to as a *verbal guise* technique (VGT). Although the verbal guise experiment introduces other speaker-related variables than the MGT, it is nevertheless recognised as a commonly accepted way of eliciting information about attitudes to language without explicitly drawing attention to the target language features and / or practices (Garrett, 2010).

The results of MGT/ VGT studies demonstrate clearly that participants differentiate between standard and non-standard language varieties and hold stereotyped attitudes towards them. In fact, in the vast majority of studies, results indicate that while standard speech is evaluated more positively on status / competence traits (e.g., educated, professional), non-standard practices are judged more favourably on solidarity / social attractiveness traits (e.g., honest, friendly). These results thus echo the findings of sociolinguistics variationists about *overt* and *covert* prestige (Labov, 1972).

MGT / VGT studies have generally investigated linguistic attitudes of monolingual speakers. They found that results are rarely socially stratified (Garrett, 2010). To my knowledge, only two studies have examined the linguistic attitudes of a bilingual population. Lepicq (1980) investigated the attitudes of 96 female French L1 and L2 towards Grade 6 immersion students and Grade 6 French L1 students. Half the judges were university students between the ages of 20 and 24 and the other half were 48 Grade 6 students age 11,5 to 12,5, and each age group consisted of 24 French monolinguals and 24 French-English bilinguals. The judges listened to a recording of the researcher and a Grade 6 pupil engaged in a spontaneous conversation about the child's personal life experiences. Results suggest that age and linguistic background affect the judges' ratings. It was found on the one hand that younger participants and bilingual participants of all ages rated the Grade 6 immersion guise more favourably on acceptability and pleasantness of her speech than monolingual and older judges.

Anderson and Toribio (2007) evaluated bilinguals' attitudes towards language contact forms (i.e. code-switching) manifested in the speech of Spanish-English bilinguals in the United States. The judges were 49 bilinguals, twenty-five of which were assigned through background questionnaire data to the Spanish high-proficiency group, while twenty-four were assigned to the Spanish low-proficiency group on the same basis. Judges rated five oral renditions of the fairytale *Little Red Riding Hood/La Caperucita Roja*. One version was performed entirely in Spanish. Two texts were performed almost entirely in Spanish, but they included English insertions; one contained English words for concepts that are

specific to the fairytale (e.g., grandma, hunter) and the other incorporated commonly used nouns (e.g., house, bed). The last two versions were performed in Spanish-English code-switching; one contained switches commonly found in bilingual speech and the other one comprised switches that violate code-switching norms (e.g., between auxiliary and main verb). After listening to each text, judges had to rate the narrator on a Likert scale on six personality traits (e.g., attractive / unattractive, literate /illiterate). Overall results indicate that the monolingual guise was judged the most favourably, followed by the English lexical insertions ones and last came the code-switching guises. When results were reanalysed taking linguistic proficiency in Spanish into account, it was found that the participants in the low Spanish proficiency group judged the monolingual guise most positively and greatly disfavored the code-switching guises. Statistical analyses revealed that both groups of bilinguals offered significantly different ratings for the monolingual guise and the code-switching guises. These results suggest that degree of bilingualism has an influence on language attitudes and that more proficient bilinguals have more positive attitudes towards non-standard linguistic practices such as codeswitching than incipient bilinguals.

In light of the limitations of current L2 teaching approaches, Valdman's sociolinguistic and epilinguistic criteria serve as a useful framework to establish the language behaviour of the target community and the expected language behaviour of new members who wish to attain membership in that community. As we will see in the next two chapters, observations of the target community

language use (chapter 3), combined with a verbal guise experiment (chapter 4), serve as empirical instruments to find out how these two criteria play out for the community under study.

#### 2.6 Summary

In the first part of the chapter we reviewed the relevant literature on FI students' communicative competence. It was shown that students who attend immersion programs are likely to develop high levels of receptive skills in academic French; however, their productive skills and their ability to adapt their speech to match the (in)formality of the situation are rather limited. These linguistic issues become of interest when FI graduates specialize in a field such as nursing where communication has a direct impact on patients' health and safety. The review of ESL nursing students working in English dominant settings reveals that the linguistic challenges they face are in the domain of sociolinguistic competence. Their linguistic proficiency was judged sufficient to be accepted into their program, but they nevertheless faced problems offering linguistically appropriate care to patients during their clinical placements. Given FI graduates' limited exposure to spoken French outside the classroom and their underdeveloped socio-linguistic repertoire, we anticipate similar challenges for them. Knowing that patients' health is at stake under these conditions, L2 teaching models available to address FI graduates' sociolinguistic weaknesses were reviewed. First, LSP was considered as this type of L2 instruction has been developed to prepare students for real-life professional interactions. LSP course design is not an appropriate solution because it works under the assumption that

LSP students have to emulate native speakers' speech in order to gain membership in the target community. Second, the multi-competence model (Cook, 2002), based on various research into bilinguals' cognition processes and knowledge, proposes the competent L2 user as the linguistic yardstick for L2 learning. This model suggests basing language descriptions on the linguistic practices of L2 users who can successfully function in the target situation, which current L2 teaching practices have largely ignored. As sound as this model appears, it has one important limitation which prevents its application in the current study: no successful L2 users have yet gained membership in bilingual clinical contexts in Alberta. Then, a third pedagogical idea was examined, Valdman's pedagogical norm. Based on a community members' observable linguistic behaviour (sociolinguistic criterion) and expectations towards L2 usage (epilinguistic behaviour), the pedagogical norm offers an informed compromise to the teaching of standard French and emulation of monolingual usage. The field of sociolinguistics offers methodologies (e.g., matched and verbal guise studies) that allow for the elaboration of a pedagogical norm for French L2 nursing students working in a French as a minority context. The next chapter, the sociolinguistic criterion, presents the procedures and results for Study 1.

# Chapter 3

# **Study 1: The sociolinguistic criterion**

This chapter reports on the design and analysis of a variationist sociolinguistics<sup>28</sup> study which aims to document, as Valdman (1976, 2000) proposes, the linguistic behaviour of the target population. The findings of this study will highlight which styles are favoured by French-speaking patients and bilingual health-care professionals in French-speaking nurse-patient interactions in Western Canada.

#### 3.1 Data collection sites and participants

Data collection took place in two bilingual nursing homes that care for an important number of French-speaking senior residents in the Edmonton area. It is also in these two health care institutions that second year bilingual nursing students do their very first clinical placement. Participating nurses (n=3) and patients (n=8) were recruited through the help of the coordinator of the bilingual nursing program who was familiar with these two sites. She made initial contact with potential participants who I then individually approached. I shadowed the interventions that involved them during an entire shift.

French-speaking nurses and patients who showed interest in the study were given an informed consent form (see Appendix 1) to read and sign prior to participating in the observation and recording process. Potential participants whose declining vision prevented them from reading the document were read the

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<sup>&</sup>lt;sup>28</sup> Research in variationist studies take into account linguistic factors such as the syntactic, lexical or phonological context to identify the patterns of use of target variants (Tagliamonte, 2006). This type of analysis is however beyond the scope of this dissertation, as we are mostly concerned with identifying the overall patterns of variants' use in the target population irrespective of linguistic constraints.

consent form by the researcher. They were ensured confidentiality and were informed that they had the right to refuse to participate or to withdraw from the study at any time without penalty or repercussions. In addition, participants were informed of the covert goals of the study only after data collection ended so as to minimize the chances of them changing their linguistic practices while recordings of interaction taking place.

The three participating nurses come from a French as a minority language environment in Western Canada and stated that French was their mother tongue. They are in their late forties. Two of them had always practiced in bilingual clinical contexts and believed that they spoke French and English equally well. Both attended a French immersion school attended by a majority of French L1 students until the high school level. They then pursued postsecondary studies in nursing in an English-speaking university. The third nurse had been working in a bilingual nursing home for five years at the time of data collection and had always practiced her profession in English prior to the Fall 2004. She spent most of her early childhood speaking French only and attended a French minority school. As a teenager her family moved to a community where French-medium education was not available and thus continued her schooling in an English majority school. She later spent her adult life speaking English only. For this reason, she believes her dominant language is now English though she still self-identifies as a francophone. For the patient population, only senior patients (i.e.; 65 and over), male and female, were recruited. The rationale behind this decision is that they represent a priority population for the *Réseau santé albertain*, the organisation

responsible for promoting and offering health care services in French in Alberta (Réseau santé albertain, 2007). All of the senior participants were born in Alberta and French was their mother tongue. They indicated that they preferred receiving nursing care in French, even though they were proficient speakers of English. All of the senior participants were from a working class background. They received little formal education in French as they were brought up at a time when French-speaking Albertans struggled for their rights to French-language education to be recognized. Typically, Grade 1 was taught predominantly in French and in the subsequent grades French was allowed for up to one hour of instruction time per day. None of the participants completed their primary school education (up to Grade 6).

Data collection took place over a 3-week period in the first institution in November and December 2009, I visited the site on three separate occasions.

Data was gathered at the second institution in March 2010 where I spent three 8-hour shifts accompanying the participating nurses on their rounds. The corpus consists of eleven hours of recorded professional interactions between French L1 nurses and patients occurring predominantly in French<sup>29</sup>.

## 3.2 Research questions and hypotheses

The study was carried out to answer the following research questions:

(1) What is the stylistic norm used in nurse-patient interactions in French-speaking clinical contexts in Alberta?

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<sup>&</sup>lt;sup>29</sup> Recordings consisting of interactions between French L2 nursing students and senior patients were also gathered on those occasions, but their analysis is beyond the scope of this dissertation. Data gathered about French L2 usage in clinical context was, however, used to inform the design of the verbal guise experiment reported in Chapter 4.

(2) Which pronouns of address are used by French-speaking nurses and senior patients in their interactions?

The first hypothesis, relating to the first research question, concerns participants' use of phonological, grammatical and phonological variables. It is hypothesised that French-speaking nurses and patients in Alberta will make frequent use of mildly marked informal variants in their interactions as they are forms representative of a number of varieties of oral French (Etienne & Sax, 2006; Gadet, 1997). It also expected that patients will make use of marked informal variants because they come from lower socio-economic backgrounds (Labov, 1972).

The second hypothesis relates to the second research question and to the use of second person address pronouns tu and vous. As described in Chapter 2, the use of tu and vous in contemporary French is governed by a contextual index as well as a social distance index and the use of tu extends to more communicative contexts (Dewaele, 2004). Since nurses will likely want to display respect towards their patients and since clinical interactions with elderly patients remain a stable context where vous is expected (Bogar et al., 2007), it was anticipated that French-speaking nurses in Alberta would use the second person plural pronoun (vous) to address their patients. As for the patients' speech, it was predicted that French-speaking patients in Alberta would use tu as interpersonal relations are not hierarchically-driven among speakers of Canadian French (Gadet, 1997).

#### 3.3 Data analysis

# 3.3.1 Selection of target variables

All clinical nurse-patient interactions occurring predominantly in French were transcribed with the objective of reproducing as accurately as possible the participants' speech (i.e., the data were not tidied up to match the conventions of standard written language). The marked and mildly marked informal lexical and grammatical features were preserved and the marked and mildly marked informal phonological features were transcribed phonetically when there was no common spelling for that feature, as in the following example:

Patient : *Oui. Pis avant ça ch'travaillais su' un chantier (pr:f ãkie) moé.* (Yes. And before that, I used to work on a construction site.)

The oral corpus was analysed so as to identify the phonological, lexical and grammatical variables most frequently used by the nurses and the patients. Table 5 reveals which variants were selected for analysis based on their relatively high frequency in the corpus.

Table 5. Variants selected for analysis

Marked informal variants	Mildly marked informal variants	Formal variants						
	Phonological variants							
n/a	/l/ deletion	/l/ retention						
n/a	Schwa deletion	Schwa retention						
Moé	n/a	Moi						
Icitte	n/a	Ici						
Lexical variants								
n/a	On	Nous						
Rien que	Juste	Ne que						
Grammatical variants								
n/a	Ne deletion	Ne retention						
M'as	Je vas	Je vais						
Auxiliary avoir	n/a	Auxiliary être						

The classification of variants according to their degree of formality and markedness is based on previous sociolinguistic variationist studies: Sankoff and Cedergren (1976) and Poplack and Walker (1986) for /l/ deletion vs. retention, Uresticu et al. (2002) for schwa deletion vs. retention, Laberge (1977) and Coveney (2000) for *on* vs. *nous*, Thibault and Daveluy (1989) and Massicotte (1986) for expressions of restriction *rien que, juste* and *seulement*, Sankoff and Vincent (1977) for *ne* deletion vs. retention, Mougeon and Beniak (1991) for auxiliaries to form the periphrastic future *m'as*, *je vas* and *je vais*, and lastly Sankoff and Thibault (1980) for *avoir* vs. *être* in past auxiliairies.

To my knowledge, the variables *moé* vs. *moi*, and *icitte* vs. *ici* have never been the subject of sociolinguistic variationist studies. The classification adopted is based on the description made in *Le dictionnaire québécois* (2010) which refers to *moé* and *icitte* as features that come "d'un vieil usage français datant du 11e siècle. Le Québec en a conservé la forme parlée jusqu'à récemment. Maintenant, on l'entend de moins en moins dans les populations plus jeunes" (an Old French usage dating from the 11th century. Québec has retained the spoken form until recently. Now, its use is less frequent in younger populations).

#### 3.3.2 Identification of variables and variants in the corpus

Once the corpus was transcribed, a first analysis was conducted with the search function available in *Microsoft Word* to identify the use of each target variable. Following Tagliamonte's (2006) recommendations, each context was carefully examined to determine whether variation between a formal and an

informal feature was possible in that context. Following that analysis, a number of features were excluded from the analysis.

# 3.3.2.1 Instances of exclusion for the variable /l/ deletion / retention

In the case of /l/ deletion vs. /l/ retention, only third person personal pronouns were retained for analysis (e.g.: "*I'ont essayé de s'cacher*." - They tried to hide-, participant #7), eliminating all instances of disjunctive object pronouns (e.g.: "*J'ai pas encore parlé avec elle*." - I haven't spoken with her, yet-, participant #5) as variation does not occur in that context (Ashby, 1984).

# 3.3.2.2 Instances of exclusion for the variable schwa deletion / retention

For the variable *schwa* deletion vs. *schwa* retention, a number of phonological contexts that do not allow variation were also excluded from the analysis. First, the presence of *schwa* in final syllables, or syllables at the end of rhythmic groups (e.g.: "*C'est pas trop pire*." -It's not too bad-, participant #1) were not retained as *schwa* deletion is quasi-categorical in oral Canadian French in that context (Uritescu et al., 2002). I also excluded phonological contexts where a *scwha* is always maintained such as the rule of the three consonants. "According to this rule, a schwa cannot be deleted when the outcome of this deletion is a cluster of three (or more) consonants (e.g., *vendredi* → \**vendr'di*; *mercredi* → \**mercr'di*)" (Uritescu et al., 2002, p. 3).

# 3.3.2.3 Instances of exclusion for the variable first person personal pronoun

For the variable *nous* vs. *on*, instances of *on* used as an indefinite personal pronoun were excluded from the analysis because of its difference in meaning (e.g. "On fait c'qu'on peut, en?" - We do what we can, eh?-, participant #7)

#### 3.3.2.4 Instances of exclusion for the variable ne deletion / retention

For this variable, two kinds of exclusions were made. Cases where the use or non-use of ne was blurred by the phonological context (e.g.: "On (n') est pas mal icitte,  $ts\acute{e}$ ." - It's not bad here, you know-, participant #8). In addition, utterances omitting the subject-clitic personal pronoun were not retained in the analysis (e.g. "( $\emptyset$ ) sais pas." - (I) don't know-, participant #1).

#### 3.3.2.5 Instances of exclusion for the variable auxiliary être or avoir

As for the variable auxiliairy *avoir* vs. *être*, I only analysed their use in pronominal verbs conjugated in *passé-composé* since there were too few instances of verbs conjugated with the auxiliary *être* in standard French in the clinical interactions corpus (e.g. "J'ai resté là 5 ans" - I stayed there for 5 years-, participant #5).

Once all contexts of use of the target variables were validated, a new analysis was undertaken to determine which variant was used in that context.

Each variant was colour-coded (to allow for easy identification and recounting) and counted on each page of the transcriptions. These steps were taken twice with two-week intervals to ensure the accuracy of the analysis and total scores. When there was a mismatch between the results found, a new recount was made. Lastly,

three colleagues reviewed my calculations and once again, when a mismatch was found, the counts were recalculated.

#### 3.4 Results

# 3.4.1 Research question 1

The first research question sought to determine the stylistic norm used in nurse-patient interactions in French-speaking and bilingual clinical contexts in Alberta. The data analysis suggests that both nurses and patients made little use of formal variants. However, patterns of use of informal variants varied between nurses and patients when a phonological, grammatical or lexical marked variant was available.

#### 3.4.1.1 Phonological variants

French-speaking nurses and patients' use of phonological variants is presented in Table 6. It appears that both groups of participants favour the use of informal variants in their interactions. In keeping with previous variationist sociolinguistics studies (i.e. Sankoff & Cedergren, 1976; Uresticu et al., 2002), bilingual nurses prefer *schwa* deletion and /l/ deletion (e.g.: "J'viens prendre votre pouls." (I'm coming to take your pulse), "I' fait beau aujourd'hui." (It's nice out today), participant #1). Similarly, Franco-Albertan patients' used the mildly marked informal variants *schwa* deletion and /l/ deletion in the majority of contexts where this variable can be found. While there is no instance of the variables *moi/moé* and *ici/icitte* in the nurses' speech, French-speaking patients appear to make systematic use of the marked informal variants *moé* and *icitte* (e.g.: "J'ai pas de problème avec ça, moé." (I don't have a problem with that),

participant #5, and "*Ça fait un peu mal icitte, là*." (It hurts a bit here), participant #4) which suggest that for these speakers these lexical variants are not marked, but mildly marked ones.

Interestingly, we note the presence of formal variants /l/ retention and schwa retention in certain communicative contexts. These features are used by participants as a communication strategy to repair an utterance that has been misunderstood. The following example illustrates how a patient repeats utterance (line 4) using schwa retention after a nurse had signalled a miscomprehension (line 3):

- 1 Nurse : Vous êtes d'où vous? (Where are you from?)
- 2 Patient : *J'viens d'Legal* (I'm from Legal)
- 3 Nurse: *Pardon?*
- 4 Patient : Je viens de Legal (I am from Legal)

These findings highlight the roles of phonological variants in clinical interactions: while informal phonological variants appear to be default features for target community members, formal variants seem to be part of the linguistic resources used by co-participants to initiate a self-repair move<sup>30</sup>.

and in the corpus.

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<sup>&</sup>lt;sup>30</sup> This observation is made on the basis of /l/ retention and schwa retention usage only. No instances of miscomprehension occurring in a context were variables *ici/icitte* or *moi/moé* were found in the corpus.

Table 6. French-speaking nurses and patients' use of phonological variants

	Marked informal		Mildly m	Formal variants					
			informal variants						
	variants								
		N	%		N	%		N	%
Murgag'	n/a	-	-	Schwa deletion	297	85.3	Schwa retention	51	14.7
Nurses' speech	n/a	-	-	/l/ deletion	121	92.4	/l/ retention	10	7.6
	Moé	0	0	n/a	-	-	Moi	0	0
	Icitte	0	0	n/a	-	-	Ici	0	0
Patients' speech	n/a	-	-	Schwa deletion	405	95.5	Schwa retention	19	4.5
	n/a	-	-	/l/ deletion	160	97	/l/ retention	5	3
	Moé	1	100	n/a	-	-	Moi	0	0
	Icitte	6	100	n/a	-	-	Ici	0	0

#### 3.4.1.2 Lexical variants

Two lexical variables were found in relatively high frequency in the clinical interaction corpus: first person plural personal pronouns on/nous and the expression of restriction seulement/juste/rien que ne ...que. The analysis indicates that formal variants are absent from both French-speaking nurses' and patients' speech, which is congruent with the patterns of use reported by Massicotte (1986) and Laberge (1977) (see results in Table 7). The pronoun on is used categorically by all participants (e.g., "On r'passe plus tard, ok?" (We'll stop by later, ok?) participant #3). As for the expression of restriction, there was no occurrence of that variable in the nurses' speech. Patients' speech, on the other hand, showed interspeaker variability as one patient systematically used the mildly marked variant juste (e.g.: "J'mange juste un bol de gruau l'matin." (I only eat a bowl of oatmeal in the morning), participant #8) and all the other patients used the marked variant rien que (e.g., "J'en ai eu rien qu'onze." (I only had eleven), participant #7). Thibault and Daveluy (1989) found in their corpus that informal expressions were constrained by linguistic factors: juste is associated with verbs and rien que with noun phrases. In addition, Thibault and Daveluy (1989) also found that *juste* 

is more frequent in younger speakers who use it 73% of the time while *rien que* is associated with speakers from working class backgrounds. Since all the patients have similar age and socioeconomic backgrounds, other social influences must operate on the speakers' selection of these features, but this is beyond the scope of the present analysis.

In sum, informal lexical variants are the default features used by target participants. Formal lexical variants appear to have no immediate communicative value as none of the 11 participants resorted to their use in their interactions.

Table 7. French-speaking nurses and patients' use of lexical variants

		Marked Mildly marked informal variants				Formal variants			
Ni-mana?		N	%		N	%		N	%
Nurses' speech	n/a	-	-	On	31	100	Nous	0	0
speech	Rien que	0	0	Juste	0	0	Ne que	0	0
Patients'	n/a	-	-	On	1	100	Nous	0	0
speech	Rien que	4	66.7	Juste	7	33.3	Ne que	0	0

#### 3.4.1.3 Grammatical variants

The use of three grammatical variables was also analysed (see Table 8). The nurses' and patients' linguistic behaviour in reference to *ne* deletion is congruent with the norm of other modern French varieties such as Montreal French (Sankoff & Vincent, 1977) and French from the Touraine region in France (Ashby, 1984). Interestingly, *ne* retention appears to play the same communicative role as formal phonological variants /l/ retention and schwa retention illustrated above. The four contexts where the use of *ne* is documented are utterances that are repeated at a slower pace (see line 4) to a patient who has signalled a miscomprehension (see line 3):

Patient: *Ma mère, a' m'disait tout l'temps qu'j'avais pas d'cœur*. My mother would always tell me I was heartless.

- Nurse: *Vous étiez pas un enfant parfait?* You weren't perfect as a child?
- Patient: *En*? Eh?
- 4 Nurse: ((she speaks louder and more slowly)) *Vous n'étiez pas un enfant parfait*?

  You were not perfect as a child?
- 5 Patient: ((laughs)) *Faut croire que non*! I guess not!

As for the use of the 1<sup>st</sup> person singular of aller in the present tense to form the periphrastic future, this form shows interspeaker variability in both the nurse and patient population. In the nurses' speech, the mildly marked informal variant *je vas* is used by the two nurses who claim balanced bilingual skills (e.g.: "*J'vas t'envoyer un autre formulaire*." (I'm going to send you another form), participant #2). This variant is also found in informal speech of adolescents from Québec City (Deshaies et al., 1981), as well as French native speakers from Ontario (Mougeon & Beniak, 1991). The formal variant *je vais* was used only twice, by the self-reported English-dominant nurse. The use of the periphrastic future is found in the speech of three patients only: two of them, one male and one female, make systematic use of the marked informal variant *m'as* (e.g.: "*M'as aller m'étendre un peu*" (I'm going to lie down for a bit), participant #7) while the other patient makes systematic use of the mildly marked form *je vas*.

There were no instances of pronominal verbs conjugated in the past in the nurses' speech; it is therefore impossible to describe their use of the variable *avoir/être*. In the patients' speech there is a preference for the marked informal

feature (e.g.: "J'm'ai fait mal au genou" (I hurt my knee), participant #5), with only two instances of the standard variant. This result differs from that of Sankoff and Thibault (1980) who in their corpus of Montréal French found few instances of pronominal verbs conjugated in the *passé-composé*. These verbs were not considered in their analysis. This difference may be due to the fact that nursepatient interactions involve discussions revolving around descriptions of symptoms and circumstances leading to illness or injury which naturally trigger the use of these verbs (e.g., j'm'ai cogné, j'm'ai couché, etc.).

Table 8. French-speaking nurses and patients' use of grammatical variants

	Mar informal		ts	Mildly informa			Formal va	ariant	s
		N	%		N	%		N	%
Nurses'	n/a	-	-	Ne deletion	47	92.2	Ne retention	4	7.8
speech	M'as	0	0	Je vas	21	91.3	Je vais	2	8.7
	Aux. avoir	0	0	n/a	n/a	n/a	Aux. être	0	0
Patients' speech	n/a	-		Ne deletion	87	100	Ne deletion	0	0
	M'as	12	60	Je vas	8	40	Je vais	0	0
	Aux. avoir	15	88.2	n/a	-	-	Aux. être	2	11.8

In sum, target community members favour the use of informal phonological, grammatical and phonological variants in their interactions. While French-speaking nurses make predominant use of mildly marked informal variants, patients, in general, prefer to use marked informal variants.

#### 3.4.2 Research question 2

The second research question dealt with the identification of pronouns of address used by French-speaking nurses and senior patients in their daily interactions. The data analysis indicates that there is more than one local practice favoured by nurses and patients.

## 3.4.2.1 The nurses' speech

The nurse who has spent most of her adult life in an English-speaking only environment used *vous* for interactions with patients, a linguistic practice that corresponds to the official recommendation made by health communication manuals (Bogar et al., 2007). Nonetheless, the two nurses who have always lived in a French as a minority language environment and have worked in bilingual clinical contexts for a significant number of years use *tu* with their patients. Nothing in the patients' verbal or non-verbal behaviour indicates that the use of one or the other pronouns offends them.

These findings suggest that, similar to Mougeon & Beniak (1991), linguistic restriction influences L1 speakers' linguistic behaviour: the more restricted the speaker, the more the linguistic practice aligns with standard language usage and recommendations.

#### 3.4.2.2 The patients' speech

With the exception of one patient, the youngest of the group of participants, Franco-Albertan patients prefer the use of *tu* with bilingual nurses (e.g.: *Vas-tu revenir me voir*?" (Are you going to come back?) , participant, #6, "*Tu m'fais mal*" (You're hurting me), participant #12).

#### 3.4.3 Other linguistic practices

In addition to the target variables reported in section 3.4.1 and 3.4.2, we also note the presence of two categories of non-standard linguistic features in the speech of the target population: English influence and grammatical features that show incomplete learning.

#### 3.4.3.1 Influence of English

Traces of the influence of English are found in forms of lexical borrowings and calques. Although the majority of utterances are formed essentially in French, there are occasional insertions of English lexical items

- (1) Ça fait mal en haut icitte fait que j'mets un euh le *tenser* euh pas le *tenser* mais euh [...] (participant #4)
  (It hurts up here so I put on a euh the tense euh not the tenser but euh)
- (2) Mais quand je l'ai pas on dirait que le le *knee cap* là on dirait que ça ça ça claque.
  (Participant #5)
  (But when I don't have it on, it seems that my my knee cap, it seems to to to snap)
- (3) C'est p't'être *twisted* (participant #2) (It may be twisted)

This type of English influence is found in all participants, except the English dominant nurse. Once again, these findings parallel those of Mougeon and Beniak (1991) as far as English influence is concerned. The researchers observed that while semi-restricted Franco-Ontarians preferred the variant *so* to introduce a consequence, French-speaking Ontarians whose usage is more restricted preferred a more French-sounding variant such as *alors*. Mougeon and Beniak (1991) argued that English lexical borrowings of English are symbolic markers of identity for semi-restricted speakers and that restricted speakers refrain from using them in fear of appearing as less proficient in French.

Other interlingual influences where found in the forms of calques:

(4) La diéticienne\* a'vient ici a' vient ici rencontrer les gens (participant #1)

(The dietician she comes here, she comes here to meet with patients)

(5) J'voulais que tu r'gardes à\* mon g'nou (paticipant #6) (I wanted you to look at my knee)

Similar examples of English influences were also detected in another Alberta French corpus (Beniak et al.,1984) as well as Ontario French in Mougeon and Beniak (1991), among others.

## 3.4.3.2 Simplification

In addition to contact-induced innovations in the speech of French L1 nurses and patients, interlingual innovations which find their source in simplification or regularization<sup>31</sup> of certain more challenging aspects of French morpho-syntactical system were also found in the corpus:

- (6) Il faut que j'vas\* aux toilettes (participant #6) (I must go to the restroom)
- (7) J'vas t'envoyer faire du\* physio (participant #2) (I'm going to have you do physiotherapy)

These linguistic innovations appear to be the result of overgeneralization of grammatical rules (i.e. in the case of example 6 overgeneralization of present indicative to subjunctive contexts, and overgeneralization of the masculine marking in example 7). These types of linguistic phenomena are not confined to Alberta French as they were also reported in the speech of French-speaking Ontarians (Mougeon & Beniak, 1991). The types of linguistic phenomena described above are most likely the result of the influence of speaking two languages and being exposed to both languages in ways that differ from monolingual speakers living in monolingual communities. The occurrence of these linguistic innovations should not obscure the fact that Alberta French

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<sup>31 (</sup>Beniak et al., 1984) refer to this phenomenon as incomplete learning.

predominantly displays linguistic patterns that are common to oral French syntax of a majority of spoken varieties (i.e, use of dislocation, use of parataxis) and of Canadian French in general (use of vernacular words such as *drette* (right), *escousse* (a while) and *litte* (bed)).

#### 3.5 Interpretation of the results

The present study was designed to identify the stylistic norm used by French-speaking patients and nurses in Alberta in accordance with Valdman's (1976, 2000) first criteria to establish a pedagogical norm for French L2 teaching.

My first research hypothesis was confirmed. It stipulated that participants would make use of informal phonological, grammatical and phonological variables. Nurses make predominant use of mildly marked informal variants and patients, in general, prefer to use marked informal variants, though this practice appears to show interspeaker variability. In fact, the results indicate that when a variable possesses a marked informal variant (*moé*, *icitte*, *m'as*, *rien que*), this feature will be most frequently selected by patients. In the case of variables where a standard variant is opposed to a mildly marked informal variant, it is the latter that patients prefer to use (*schwa* deletion, /l/ deletion and *on*).

The target formal variants are largely absent from the corpus. Their presence appears to be restricted to contexts where a co-participant resorts to their use to repair an utterance that had previously been formulated with informal variants that had been misunderstood. There is also one formal feature, namely *je vais* that is found in the speech of the only English-dominant participant.

Contrary to all of the other participants, she spent a significant number of years

disconnected from French. It is only with her involvement in the implementation of the bilingual nursing program at the University of Alberta that she has started using French again. This finding thus echoes the results of Mougeon and Beniak (1991) who observed that

un phénomène qui découle de la restriction linguistique est la réduction de la variation stylistique. Chez les jeunes Franco-Ontariens scolarisés en français, la réduction stylistique se traduit par une perte plus ou moins importante des variantes non-standard étant donné que leur emploi du français est limité au milieu scolaire, contexte où le vernaculaire est peu souvent utilisé. La réduction stylistique que l'on peut observer chez les francophones restreints est donc à l'inverse de celle que l'on observe généralement chez les locuteurs semi-restreints, chez qui on trouve habituellement la perte des variantes formelles. (p.130)

(One phenomenon that results from linguistic restriction is the reduction of stylistic variation. Among young Franco-Ontarians going to school in French, linguistic restriction takes the form of a greater or lesser loss of non-standard variants, given that their use of French is limited to the school environment in which the vernacular is only infrequently used. The linguistic restriction that can be observed among restricted Francophones is therefore the opposite of what is normally found among semi-restricted speakers, who have usually lost the formal variants.)

This phenomenon seemed, however, only to affect one grammatical form, which further indicates that schwa deletion, /l/ deletion, *ne* deletion, *on* and *juste* clearly are the default features in that community as they carry no social stigma, as in many other varieties of oral French (Etienne and Sax, 2006; Gadet, 1992).

The second hypothesis concerned the use of second person address pronouns *tu* and *vous*. In this case, my hypothesis was only partially confirmed as two local norms appear to coexist in that context. The English-dominant nurse uses *vous* with her patients, which follows official recommendations made in nursing communication textbooks (Bogar et al., 2007). Her linguistic behaviour can thus, once again, be compared to that of restricted speakers found in Mougeon

and Beniak's (1991) Franco-Ontarian corpus whose French included features similar to academic French promoted at school. As a matter of fact, this nurse stated that she had taken French remedial lessons before starting to offer nursing care in French and joining the teaching staff of the University of Alberta's bilingual nursing program. The other two nurses, who have always maintained French in Alberta, use tu with their patients. Chaudenson (1998) has argued that "dans certaines variétés minoritaires d'Amérique, on assistait à la disparition de l'opposition entre tu et vous, ce qui constituerait une simplification attribuable à l'effet de l'anglais qui n'a qu'une forme de deuxième personne, le pronom you"<sup>32</sup> (in certain North American minority varieties, we were witnessing the disappearance of the difference between tu and vous, which would constitute a simplification that could be attributed to the influence of English, which has only one form in the second person, namely the pronoun you.) Factors other than linguistic restriction may, however, be at play because the use of tu with senior patients is also found in younger health care in French majority settings "soit en signe d'affection ou pour gagner l'affection des patients, soit en réponse au tutoiement de la part des retraités" (either as a sign of affection or to win patients' affection, or in response to the retirees addressing them as 'tu') (Peeters, 2006, p.204). When informally questioned about this linguistic preference, both nurses stated that the use of the polite *vous* is not part of their actual linguistic practice: "On est du nord (de l'Alberta), nous-autres, et on vouvoie pas grand monde, nous-autres, là" (We're from the North (of Alberta), and we don't say 'vous' around here very much). One of them added that the use of vous seemed to create

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<sup>&</sup>lt;sup>32</sup> Chaudenson's (1998) hypothesis needs to be substantiated empirically.

too big of a distance between her and her patient. Since no signs of annoyance or vexation from the patients were noted during the clinical observations, we can hypothesize that this linguistic practice is either tolerated or accepted by the target population.

As for the patients, the majority of them addressed nurses using tu, which is the linguistic practice I had expected to find in this context since interactions involving speakers whose ages vary significantly typically trigger non-reciprocal use of the pronouns, with the older speaker addressing the younger one with tu (Morford, 1997). Only one patient used the second person plural form vous with the nurses. He is the youngest of the patient participants which suggests that pronoun of address practice may be age stratified. When this participant was informally questioned about his linguistic practice, he stated that since nurses were " $des\ \acute{e}trang\grave{e}res$  – strangers" he preferred to keep a polite distance with them, distance that he created by the use of vous. This patient is in relatively good health and requires minimal medical attention. He thus spends significantly less time with the nurses than all of the other participants which might be another factor explaining why he feels the need to maintain distance between him and the health care providers.

In addition, the presence of linguistic innovations from English found in the speech of participants is not surprising and has been reported in a number of studies focusing on French contact varieties (see Martineau & Nadasdi, 2011 for the latest research in this area). What is noteworthy in the context of clinical interactions in Alberta is that the majority of these influences are seen in

medically-related terms (i.e. knee cap, X-ray, diéticienne, twisted). These results might be explained in relation to Cummins' (1979) distinction between 'basic interpersonal communication skills' (BICS) vs. 'cognitive academic language proficiency' (CALP) (1979)<sup>33</sup>. While BICS refers to L2 proficiency required to take part in face-to-face interactions in every day situations, CALP refers to the kind of knowledge needed to manage more academic and work-oriented types of communication. CALP skills are largely developed in the school setting. Given that patients had limited instruction in French and given that nurses' underwent their professional training in English, it is not surprising to find lexical codeswitches into English and calques to deal with aspects of the interaction that required CALP. Participants' BICS allowed them to perform many communicative functions in clinical interactions: discussion revolving around feelings, family members and hobbies. However, when the topic is concerned with the description of symptoms or medical treatments which require the use of more technical terminology, associated with CALP, we note an increase in the use of English words or anglicized French terminology.

In sum, investigation of French L1 nurse-patient interactions in Alberta has allowed the identification of three trends that can inform our knowledge of the local norm. First, when a given notion can be expressed with several features, target community members will rarely choose the formal variant associated with standard language. Nurses generally prefer the use of mildly marked informal variants and, if available, patients will predominantly choose the marked variants.

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<sup>&</sup>lt;sup>33</sup> Cummins (2000) proposed new terminology for his distinction; BICS was replaced by conversational language proficiency and CALP with academic language proficiency.

Second, patients accept to be addressed with either the polite second person plural *vous* or the second personal singular *tu*. Both address practices were found in the corpus. The use of *vous* is associated with the English-dominant nurse and the use of *tu* with the two nurses who reported balanced skills in French and English. With the exception of the youngest and healthiest participant, patients preferred to use *tu* in their interactions with nurses. Last, the local norm appears to be influenced by English in the form of lexical borrowings and calques when interactions focus on precise medical matters. Instances of regularization of more complex morpho-syntactical French structures (i.e. overgeneralization of the present indicative to contexts where the subjunctive is used in standard French) are also present in the corpus. Thus, this local norm departs in several aspects from the standard variety that has traditionally served as linguistic model in the French L2 classroom.

#### 3.5.1 Pedagogical implications

Given the linguistic characteristics of the local norm and its structural differences with standard French that represents the object of acquisition in French L2 classrooms, the FI classroom being no exception (Mougeon et al., 2002), it appears crucial to acquaint FI nursing students with local linguistic practices to ensure, at the very minimum, that they can understand their patients.

Durán and McCool (2003), both French L2 learners and linguists, address the limitations of teaching to the standard, especially for a language such as French where the structural gap between its standard and oral varieties keeps widening. They argue that knowledge acquired in the French L2 classroom did

not allow one of the authors to understand a basic authentic expression uttered by a native French speaker in a real communicative context:

I (DURAN) recall an incident during my first stay in France as a recent college graduate studying at l'Alliance Française in Paris. While shopping in a department store, I needed help finding a particular item. I found a salesperson and asked in my pre-rehearsed French, "Pardon, Madame, où sont les ... (whatever it was that I was looking for)?" After quick reflection, she shook her head and replied "Chépas, m'sieur." Her response bewildered me until I recalled a conversation with a friend in college who had spent a summer studying in Paris. She happened to mention that Parisians frequently uttered "Chépas" instead of enunciating "Je ne sais pas." At the time, I failed to see any connection between the two dissimilar sounding phrases. Yet, if not for that chance conversation, I would have been entirely at a loss as to what that salesperson had said. No instructor in any of my French courses had ever alluded to the transformation of the formal je ne sais pas to the colloquial chépas (j'sais pas). I had taken three years of college French and, despite my success in those courses, I found my language preparation highly inadequate in certain contexts. I had no difficulty understanding my instructors at l'Alliance Française, but my comprehension of French radio, television, films, popular songs, and people on the street often fell woefully short (p. 288).

We can anticipate similar challenges for FI nursing students in clinical contexts with senior patients. We can observe, in light of the following example of a student completing her first clinical placement, that the nursing profession may in fact need familiarity with non-standard features to provide better care<sup>34</sup>. In this excerpt, whose analysis follows, a young French L2 nursing student is interacting with an elderly French-speaking patient and makes small talk with him after having treated him (S: student, P: Patient)

- 1 S Vous étiez pompier vous avant, n'est-ce pas? (You used to be a fireman, didn't you?)
- 2 P Ouais (.) Oui. Pis avant ça ch'travaillais su' un chantier (pr:∫ãkie) moé

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<sup>&</sup>lt;sup>34</sup> This excerpt is taken from a French L2 nursing student corpus I collected in the Fall 2009. The analysis of this corpus is beyond the scope of this dissertation.

(Yeah Yes. And before that I worked on a construction site)

- 3 S ((6.0)) ((nervous laughter)) C'est une photo de vot' fils ça? (Is that a picture of your son?)
- 4 P Ouais (.) I' reste en BC lui asteure. (Yeah. He lives in BC now)
- 5 S Oh, il est en Colombie-Britannique. Qu'est-ce qu'il fait là? (Oh, he is in British Columbia. What does he do there?)

In line 2, the patient produces a non-standard form of 'chantier' which may be a source of communication breakdown for the student, as demonstrated by the 6-second pause and the nervous laughter followed by a sudden change of topic.<sup>35</sup> Supposing that the student was familiar with the meaning of the word *chantier*, we could hypothesize that it is the non-standard pronunciation of that word, the only one that carries the global meaning of the sentence, that triggered that reaction. Although in this example the patient did not suffer any negative repercussions from the communication breakdown, limited knowledge of phonological variation among bilingual nurses could potentially jeopardize the patient's well-being. What if the patient had said "J'ai avalé mon dentier" (I swallowed my dentures, which he might have pronounced /dãkie/)? A nervous laugh followed by a change of topic would not have been an appropriate professional reaction. This example illustrates how at least receptive familiarly with linguistic variation is important in the context of nursing care offered to French-speaking patients in Western Canada and must be promoted in the L2 classroom.

<sup>35</sup>According to the perspective of conversation analysis (Sacks et al., 1974), when no communication breakdowns occur, turns are not marked by long pauses.

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It is vital to improve the sociolinguistic authenticity of French L2 educational input. Gadet (1992, 1997) and Etienne and Sax (2006) state that certain mildly marked informal features are found in the majority of spoken varieties of the francophone diaspora and are used "as default features" in every day usage (e.g.: *schwa* deletion, *ne* deletion). These forms could therefore easily be included in dialogues or in a special section of the manual dedicated to sociostylistic variation. Moreover, the ethnographic approach proposed by Valdman, based on the target community members' linguistic practices, and reproduced in the present study further supports a departure from a prescriptive norm that is too often disconnected from the target linguistic reality.

Another implication of the findings discussed in the study is the need to bring students' attention to the target patient population's use of English to address medical matters. L2 students sometimes develop highly prescriptive views of the language and are judgmental towards speakers whose linguistic behaviour may not be in line with standard practices (Gadet, 2003). Raising students' awareness on such issues as the history of French in Alberta, linguistic restriction, the BICS and CALP distinction, and bilingual proficiency would likely help students not to pass linguistic judgments on their patients and understand the value of English borrowings and codeswitches in clinical interactions. The ESL textbook developed by Gass & Lefkowitz (1995) which introduces learners to notions such as standard and non-standard languages, regional differences, social varieties and language attitudes throughawareness-raising tasks offers a good example of how this could be achieved.

Studies investigating the experiences of ESL nursing students have demonstrated that L2 users have problems understanding and using language in clinical settings. It is hypothesised that exposing students to the language norms of the target population will enhance their ability to understand real speech in this context. It is important to also determine a basis for productive skills for these French L2 nursing students, which is the focus of the following chapter.

# Chapter 4

# **Study 2: The epilinguistic criterion**

This chapter reports on the results of a verbal guise experiment designed to identify the linguistic attitudes towards French L1 and French L2 usage in nurse-patient interactions in Western Canada. The target population who participated in this study consisted of members of the elderly French-speaking population in Alberta as well as French L1 health care professionals involved in the training of the bilingual nursing students. The goal of this investigation was to define the participants' epilinguistic discourse about nursing students' linguistic behaviour, the second criterion proposed by Valdman (1976, 2000) for designing a pedagogical norm. This chapter is divided as follows: first, the research questions and hypotheses are stated followed by a description of the data collection instruments and procedures. Finally, this chapter ends with a general discussion about the interpretations and pedagogical implications of the results.

#### 4.1 Research questions and hypotheses

Using a verbal guise experiment, Study 2 sought to determine which stylistic features nursing students are expected to use when communicating with French-speaking senior patients in Alberta. More specifically, the following research questions are addressed:

- (1) Which forms of address are nursing students expected to use for communication with French-speaking senior patients in Western Canada (formal or informal)?
- (2) Which stylistic variants are nursing students expected to use for communication with French-speaking senior patients in Western Canada (formal or informal)?

(3) Are target community members' linguistic attitudes different for French L1 and French L2 nursing students?

Figure 4 illustrates how participants' background is expected to influence the types of reaction they display towards L1 and L2 nursing students' linguistic behaviour.

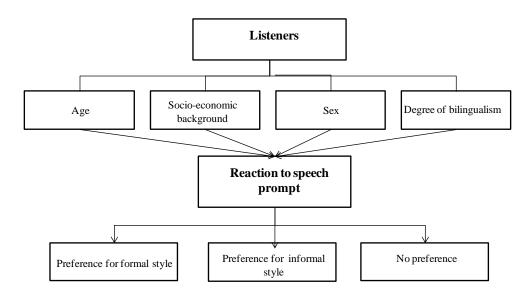


Figure 4. Background variables affecting target population's attitudes towards nursing students' linguistic behaviour

As for the first research question regarding the use of forms of address, it is hypothesized that target community members will prefer the use of *vous*. Health care professionals will favour the use of formal features since nursing communication textbooks recommend the use of *vous* with patients in retirement homes and long-term care units (Peeters, 2006). Moreover, it is expected that French-speaking seniors will share the same belief since *vous* has traditionally been associated with respect and politeness towards elders (Gadet, 1997). Therefore, I anticipate that factors such as sex, age, socio-economic background and degree of bilingualism will not exert an influence on participants' reactions.

Concerning the second research question, it is expected that participants' degree of bilingualism will affect perceptions and opinions. Based on previous studies investigating bilinguals' attitudes towards language use (Anderson & Toribio, 2007; Lepicq, 1980), it is hypothesized that both nurses and patients who report balanced abilities in French and English will display overall positive reactions towards both the informal and formal guises. Monolingual speakers and French-dominant bilinguals will hold opinions that are more normative in nature and will thus prefer the use of formal variants. Moreover, since research on speakers' attitudes toward varieties of language have often revealed patterns differentiated by socio-economic background, age and sex (McGroarty, 2006), it is likely that women and participants who have pursued post-secondary studies will react more favourably to formal variants.

For the third research question, I hypothesize that the target population will display more positive attitudes towards the French L1 nurse. As Tajfel (1982) points out, the "in-group/out-group bias" predicts that members of a group will generally tend to favour their own salient group.

#### **4.2 Data collection instruments**

To answer the research questions, a mixed-methods design (Tashakkori & Teddlie, 2010) was used to gather quantitative and qualitative data about the target community. Data were gathered using a background questionnaire, a verbal guise experiment and a semi-directed interview which are described in more details below (see Table 9). This approach was selected to not only address the shortcomings of one method by the advantages of the other, but also because it

allows for a broader interpretation of the overall findings due to the combination of different types of data.

Table 9. Description of data collection instruments

Instrument	Content	#		
		Items		
	a) Demographic information			
Background questionnaire	b) Direct measures of attitudes towards immersion French			
	c) Linguistic preferences in terms of medical care	2		
Verbal guise	Scenario 1 – forms of address (vous vs. tu + L1 vs. L2)	4		
	Scenario 2 – stylistic variables (informal vs. formal + L1 vs. L2)	4		
	Scenario 3 - distracters	5		
Follow-up semi-				
directed recorded interview	Questions directed at uncovering participants' reactions	n/a		

# 4.2.1 Background questionnaire

A questionnaire divided into three parts was developed to obtain participants' demographic data, direct measures of their beliefs about a number of statements about French and FI speakers, and their linguistic preferences in terms of health care services (see Appendix 2). Because studies investigating language attitudes found relationships between individuals' background and their perceptions (Garrett, 2010), the biographical questions were designed to gather information regarding the participants' sex, age, languages spoken, linguistic identity, linguistic environments in which they had lived, occupation and schooling.

The second part of the questionnaire elicited participants' views about the French spoken by FI graduates. After stating how many FI students they had come across on average in their lives, they had to rate 8 statements related to the perceived accuracy (i.e., anglicisé, archaïque, précis, grammaticalement correct -

anglicized, archaic, precise, grammatically correct) and pleasantness of the French spoken by FI students (i.e., *plaisant à l'oreille, mignon, intimidant, irritant*-pleasing to the ear, cute, intimidating, irritating). The last part of the questionnaire consisted of two questions requiring participants to express their opinions about their linguistic preferences for medical care (e.g.: do you prefer receiving medical care in French or in English?).

#### 4.2.2 The verbal guise experiment design

A verbal guise experiment was created to obtain indirect measures of participants' attitudes towards the French spoken by nursing students in a clinical context. Scripts were developed from naturalistic recordings of nurse-patient interactions in Alberta which had been previously collected during the first study (see Chapter 3). Two sets of scripts were designed.

The first script was manipulated so as to elicit participants' reactions towards forms of address and the second script targeted stylistic, grammatical, lexical and phonological variables. The first script consisted of a 30-second situation in which a patient is awakened by a nurse. A first version of this script portrays a nurse who addresses her patient with formal forms of address (i.e., *vous, Monsieur Sirois*). In the second version of this script, the same target variables were replaced with informal variants (i.e., *tu*, Jean-Paul). Example 8 shows an excerpt from the formal script and example 9 reveals its informal counterpart (see Appendix 3a for the complete versions). The first script was carefully written so as to avoid the presence of target phonological, lexical and grammatical variables (e.g.: /l/ deletion / retention, schwa deletion / retention) to

ensure that participants' reactions would be triggered by the target features and no other linguistic cues.

(8) Nurse: Bonjour (6.0)

Patient: ((we hear the patient snore))

Nurse: ((speaks a little louder)) Monsieur Sirois:

(9) Nurse: Salut (6.0)

Patient: ((we hear the patient snore))

Nurse: ((speaks a little louder)) Jean-Pau:1

The second script, where a patient is being washed and dressed by a nurse, was designed to capture reactions towards phonological (schwa deletion/retention, /l/ deletion/retention), grammatical (ne deletion/retention, on/nous) and lexical variables (face/visage, d'ssous d'bras/aisselles, bedaine/ventre, par exemple / par contre). Although it would be more challenging to tease apart the influence of grammatical vs. lexical vs. phonological variants in participants' reactions, these features were clustered together for practical reasons. Creating different scripts isolating grammatical, lexical and phonological variables would have made for a much longer task which might have deterred participants from taking part in the experiment. In addition, the scripts would have lacked construct validity as grammatical variants are not likely found in isolation in real speech without the presence of other lexical or phonological variants, as the results of the study reported in Chapter 3 revealed.

The follow-up interview was designed so as to address this limitation and gather specific information about each of these categories.

The target variables were selected given their high frequencies in real nursepatient interactions in Alberta, as determined by the sociolinguistic variationist study reported in Chapter 3. While the first version of the script, designed with formal variants, represents the pedagogical norm portrayed in French L2 textbooks for nursing students (as discussed in Chapter 2, section 2.4.1.1), the second version which uses mildly marked informal variants is typical of the local norm used by French L1 nurses in Alberta, observed in Study 1. Examples 10 and 11 show examples of the situations performed with standard and mildly marked non-standard variants, respectively (see Appendix 3b for the complete versions).

- (10) Patient: ((yawn)) Oh, ça fait du bien ça
  Nurse: Je vais lever vos bras pour vous laver les aisselles.
  Patient: C'est bien! Envoye fort!
  Nurse: Nous allons mettre la chemise rouge aujourd'hui parce que vous allez avoir de la visite, Ok?
  - (11) Patient: ((yawn)) Oh, ça fait du bien ça
    Nurse: J' vas l'ver vos bras pour vous laver les d'ssous d'bras
    Patient: C'est bien! Envoye fort!
    Nurse: On va mettre la ch'mise rouge aujourd'hui parce que vous
    allez avoir d' la visite. Ok?

Distracters (see Appendix 4) were also included so as to minimize the chance that the listeners would recognize the voice of the guises from one recording to another. Three actors were hired to role play the situations<sup>36</sup>. A 20-year old French L1 Albertan played the French L1 nurse, a 21-year old FI graduate played the French L2 nurse and a 55-year old Québécois played the roles of the patient. Their speech samples were recorded individually with a digital voice recorder and a microphone. The recordings were then transferred to and edited on a computer. The software *Magix Music Maker* (version 18) was used to normalize the samples in terms of volume and background noises. The samples

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<sup>&</sup>lt;sup>36</sup> Actors were used in order to preserve the confidentiality of real nurse-patient interactions.

were then uploaded to the online survey tool available on Moodle, an open source e-learning software platform available at the University of Alberta.

To accompany the speech prompts, an 8-item questionnaire was designed to yield indirect measures of participants' opinions about French L1 and L2 nursing students interacting with French speaking elderly patients. In an effort to create scales that would be meaningful to the participants, the eight statements were based on the nursing literature on essential nursing attributes (Burhans & Alligood, 2010, Doss & al., 2011, Rodger, 1995), input from four teaching staff from the University of Alberta's Faculty of Nursing (who did not participate in the data collection) and five French-speaking adults who had had extensive experience with the healthcare system in Alberta. The nursing teaching staff and patients were asked to list the qualities they most valued in a nurse treating an older patient. This list was then compared to the most frequent traits found in the literature. Reviewing all the results, two general trends emerged: traits related to the nurse's competence (i.e., good problem solver, knowledgeable) and those pertaining to social attractiveness (i.e., warm, caring). The four most frequent traits in each category were then selected to develop the statements that participants were to evaluate. The adjectives *professionnel*, *respectueuse*, compétente, consciencieuse (professional, respectful, qualified, conscientious) were used to create the competence construct and dévouée, gentille, chaleureuse and digne de confiance (dedicated, nice, warm and trustworthy) were the descriptors selected to define aspects of social attractiveness. The statements used a five-point Likert scale, with responses ranging from strongly disagree to

strongly agree (see Appendix 5). Participants were instructed to use the neutral option only if they were not able to offer an opinion about that trait.

While computer-literate participants filled out an online version of the questionnaire available on Moodle, the researcher played the same audio prompts to participants with limited computer literacy who then completed a pen and paper version of the questionnaire.

#### 4.2.3 The follow-up semi-directed recorded interview

After each prompt, a semi-directed interview was conducted, in the participant's language of choice, on a voluntary basis to shed light on the raters' reactions. The following guiding questions were asked orally:

- *Que pensez-vous de cette infirmière*? What do you think about this nurse?
- Pensez-vous qu'elle a les qualities nécessaires pour bien s'occuper de patients francophones? Does she sound competent or good at taking care of French-speaking patients?
- Est-ce que vous aimeriez qu'elle soit votre infirmière (or souhaiteriez-vous qu'elle soit l'infirmière d'un de vos proches)? Would you like to be treated by her (or would you like your relatives/ loved ones to be treated by her?)
- *Que pensez-vous de la façon dont elle s'adresse à son patient?* What do you think about the way she addresses the patient?
- L'infirmière a utilisé (strucrure cible, e.g. j'vas). Que pensez-vous de ça? The nurse used (target feature, e.g. j'vas). What do you think about that?

# 4.3 Data collection procedures

Data collection initially started with a pilot study to test the reliability of the data collection instruments. Then, participation from both targeted populations was solicited in the Edmonton and Peace River areas (see details in section 4.3.2).

The volunteers were then met at a time and location of their convenience to take part in the experiment.

#### 4.3.1 Pilot Study

The instruments were piloted between October 31 and December 20, 2010. The participants were 34 French-speaking adults working in the Edmonton area who were neither members of the targeted health care professionals nor targeted elderly populations. They were contacted by email and were given an Internet link to access the pilot questionnaire

(http://coursenligne.csj.ualberta.ca/course/view.php?id=2231). After giving their consent, they provided the requested background information and rated the 13 speech samples. Participants were also encouraged to provide feedback on the user friendliness of the instrument and clarity of the questions. The main function of the pilot study was to test the reliability of the instruments before undertaking the larger-scale survey with the target participants. Statistical tests were undertaken to determine the internal reliability of the statements pertaining to the French spoken by FI students (see item 2 of the second part of the background questionnaire, Appendix 2). The statements were found to have good internal consistency (i.e. the four statements reliably measured the same construct), with an average Cronbach's alpha coefficient of 0.84 for the four accuracy statements and 0.92 for the pleasantness criteria. Internal reliability was also measured for the statements found on the verbal guise questionnaire. The items had also strong internal consistency with a Cronbach's alpha coefficient of .91 for the competence traits and .94 for the social attractiveness measures.

A few minor modifications were made to the scripts following comments and reactions from pilot study participants. First, since the results from the pilot study revealed that participants reacted strongly to the use of *tu*, and since *vous* received no comments or neutral ones, it was decided to retain the latter form in the second script that manipulated formal vs. mildly marked informal variants. This step was crucial to ensure that participants' reactions were triggered by the targeted variable (i.e., style, or formal vs. mildly marked informal variants). Moreover, since the script in which the nurse washed and dressed her patient received many comments related to the speed at which she performed her actions, longer pauses between turns were added in the final versions in an effort to trigger comments pertaining to the nurse's linguistic performance rather than her nursing skills.

# 4.3.2 Recruitment of participants

Members of the elderly French-speaking population (i.e. 65+) in Alberta participated in this investigation as they represent important stakeholders being identified by *Le Réseau Santé Albertain* (2007) as the French-speaking group with the most pressing medical needs. Potential participants in the Edmonton area were solicited through the help of heads of local non-profit organisations such as *La fédération des ainés francophones de l'Alberta* and *Le club des retraités d'Edmonton*. The coordinator of Alberta Health Services for the Northern Alberta region made initial contact with potential participants in the Peace River area (i.e. Falher, Donnelly, St-Isidore and Peace River) and pre-arranged visits at different long-term care facilities in these communities with potential participants. The

contacts were instructed by the researcher to identify volunteers who did not suffer from illnesses preventing them from giving an informed consent and who were 65 and above. The Edmonton and Peace River areas were targeted so as to provide a good overview of the French-speaking Albertan population (rural vs. city) and because they differ in terms of current and historical presence of French in that region. The Peace Area has a higher density of French speakers (Walker, 2005) and has a branch of Alberta Health Services operating in French.

The second group of participants was composed of French-speaking health care professionals involved in the training of bilingual nurses in Alberta. They were chosen on the basis of playing a key role in the professional socialization of the bilingual nursing students. It was important to identify their attitudes to determine if their linguistic expectations differed from those of French-speaking patients. Potential participants were recruited with the help of the coordinator of the bilingual nursing program who contacted them by email and set up meetings with potential participants.

At the time of participant recruitment, potential participants were provided with oral and written explanations of the study and with the data collection procedures. All prospective subjects who were to complete the paper questionnaire version were given a consent form (Appendix 6) to sign prior to the experiment. The researcher read the consent form to participants whose declining vision prevented them from reading its content. Participants who completed the online questionnaires were first directed to a page where they were given information about the study and where their consent was requested. Once

participants agreed to participate, they were then given access to the survey page. Participation in the study was voluntary. In addition to being informed that they could opt out at any time and leave the study without any repercussions, participants were also guaranteed confidentiality and anonymity.

#### 4.3.3 Data collection

Data collection with the target population took place over a three-month period, between February and May 2011. Data was collected at participants' convenience either in a quiet office at the University of Alberta or in their homes. After providing informed written consent, participants were asked to answer the background questionnaire. Then, background information about the speech prompts they were about to hear was given (i.e, it is a 20-year old nurse, it is her first professional appointment, the patient is sleeping and needs to be woken up). Each speech sample was played once, and participants were asked to rate the nurse's speech on a 5-point Likert scale. The fact that the French L1 guise was always played by the same person, as was the French L2 guise, was not revealed to the participants. After, completing the first rating scale, participants who had agreed to take part in the interview were invited to comment on their reactions orally. When the main points had been discussed, another speech prompt was played to the participant, until the 13 speech samples were heard, evaluated and discussed. The task lasted approximately 50 minutes.

#### 4.4 Data analysis and results

#### 4.4.1 The Background Questionnaire

# 4.4.1.1 Participants' demographic information

A total of 53 participants took part in the verbal guise experiment: 42 were retired French-speaking men and women and 11 French-speaking health care professionals involved in the training of bilingual nurses in Alberta. General demographic information about the target population is presented is Table 10.

#### 4.4.1.2 The senior participants

This group (n=42) was composed of 31 females and 11 males, a sample considered representative of the general population in the organizations and health care facilities where data collection took place, as stated by the contact people who helped in the recruitment of these participants. The average age of the group was 79 years old (s.d.: 8.4), with the youngest participant being 65 and the oldest 93 years old.

All the retired participants had attended elementary school: 20 in French only, 7 in English only and 15 received bilingual education. Bilingual education in the context of elderly French speaking Albertan means that, by law<sup>37</sup>, they could only be instructed in their L1 at the Grade 1 level and in the subsequent

students who did not understand English. This situation prevailed until 1968, when the Government of Alberta passed a legislation to permit French-language instruction for up to 50% of the school day. In 1976, Regulation 250/76 extended this provision to allow the use of French for up to 80% of the school day. In 1993, the Alberta government amended the *Alberta School Act* which allowed francophones to obtain management control over their own schools (Levasseur-Ouimet & McMahon, 2007). There are now 35 francophone schools (Alberta Education, 2012) and 210 schools offering a French immersion program (Canadian Parents for French, 2012) across the province.

<sup>&</sup>lt;sup>37</sup> In 1892, Ordinance No. 22, Section 83, established English as the official language of instruction in the territory now known as Alberta. The ordinance was modified in 1896 and again in 1901 to allow the teaching of French (and other school subjects) at the Grade 1 level only, for

grades, up to one hour /day of instruction time could be devoted to French. More than half of the participants did not pursue or complete studies at the high school level whereas 11 completed undergraduate studies and 5 postgraduate studies.

The elderly participants reported having French as their mother tongue. The majority stated it was their dominant or their only language (26/42) and the rest reported that they spoke French and English equally well. While the majority of the French-dominant speakers (23/26) reported a preference for receiving medical care in French, 15 participants answered that they could receive medical treatment in either language and 4 participants reported that they would prefer to receive it in English.

#### 4.4.1.3 The health care professionals

This group was mostly made up of women (n=9). The average age was 41 years old (s.d.: 12.5); the youngest of this group was a 21-year old preceptor (i.e., a nurse that offers practical experience and training to a student nurse) and the oldest a 60-year Faculty member and founding member of the bilingual nursing program offered at the University of Alberta. This sample is also representative of the teaching staff at the University of Alberta's Faculty of Nursing.

All the French-speaking health care professionals had completed postsecondary studies. Five of them attended French-speaking institutions; three a bilingual one and three completed their studies in English only.

The health care professional group is composed of a majority of self-reported balanced bilinguals (8/11) and three French-dominant speakers.

Table 10. Participants' demographic data

	Age range	Sex		Lang. dom.		Level of education			
		F	M	F	F & E	El.	Sec.	B.A.	Grad
Elders	65-93	31	11	26	16	42	17	11	5
Health care prof.	21-60	9	2	3	8	9	9	9	4

# 4.4.1.4 Direct measures of language attitudes

The background questionnaire contained two questions designed to obtain direct measures of participants' language attitudes. The first question targeted general attitudes about the French spoken by FI students. The second question asked participants to offer their opinion about the French variety or varieties that French L2 nursing students' linguistic training should target to foster effective communication with French-speaking patients in Alberta.

#### 4.4.1.4.1 Familiarity with immersion students

All French-speaking seniors reported being familiar with a minimum of 11 people who were attending or had attended a FI program. Their ratings to the question "Que pensez-vous du français utilisé par les gens qui ont suivi un programme d'immersion française" reveal very high scores concerning traits related to accent pleasantness (mean=4.03); however, they rated their French more severely on the precision scale (mean=1.43).

The French-speaking health care professionals were also very familiar with former or current FI students, all reporting knowing a minimum of 20 on average. They are mostly neutral about the pleasantness of French immersion students' accent (mean: 3.4) and also perceived their French as lacking precision (mean=1.6).

These results indicate that the target population is well acquainted with the French L2 variety spoken by FI students. Although they found their accent somewhat pleasant or were neutral about it, they believed that their language skills in French lacked grammatical and lexical precision.

## 4.4.1.4.2 Preferred linguistic variety for French L2 nurses

The question "Quelle(s) variété(s) de français faudrait-il enseigner dans les cours de français langue seconde en Alberta?" triggered an array of responses which are summarized in Table 11. The majority of the participants preferred a Canadian French variety. Half of the elderly participants answered a combination Québécois French and Western Canadian French (21/42). They stated it was crucial for nurses to speak and understand Canadian French, as this 65-year female participant states:

(12) On vit pas en Europe icitte. Pis c'est pas les mêmes expressions, c'est pas la même chose. C'est vraiment différent pis quand t'es malade pis que t'es franco-canadien pis que tu te fais parler par quelqu'un qui parle français de France, il me semble que t'es plus malade encore.

(Senior participant #42)

(We're not in Europe here. And we don' have the same expressions, it's not the same thing. It's really different and when you're sick, and you're French-Canadian and somebody talks to you in French French, I think it makes you even sicker.)

A participant from Northern Alberta similarly rejects the European French variety drawing on a negative experience with a French doctor who was hired to work in their community:

(13) Pas de la France certain, on les comprend pas, pis i' nous comprennent pas. I' a un médecin français qui m'a demandé si je voulais parler français ou anglais, je lui ai dit français. Mais là,

j'comprenais pas ce qu'i' me disait ça fait que j'lui répondais en anglais...le peu que j'comprenais j'lui répondais ça en anglais. Pis, il s'est mis à me parler en anglais. (Senior participant #21)

(Not from France, that's for sure, we don' understand 'em, an' they don' understand us. A French doctor asked me if I wanted to speak French or English and I said French. But, I didn' understand what he was telling me so I answered him in English...as far as I understood, I answered in English. So he spoke English to me.)

Five French-speaking health care professionals also answered with the same combination of varieties (i.e. Québécois French and Western Canadian French) stating that they are the most frequently heard in Alberta.

Nine senior participants answered the question by choosing the option "other". They stated that no one variety was valid, but rather that linguistic training should focus on effective communicative strategies to deal with the older generation as well as the changing demographics of the French-speaking community in Alberta. The same preference was found in two health care professionals.

(14) C'est pas le français, l'accent qui est important. C'est le vocabulaire, pis c'est les stratégies qui vont faire en sorte que le patient va te comprendre.
 (Health care professional participant #44)

(It's not the French, the accent that's important. It's the vocabulary, and strategies that ensure that the patient will understand)

Eight senior participants indicated that French L2 courses should be based on local Western Canadian French, rejecting Québecois French for its use of swear words and *joual*, and European French for its perceived pretentiousness.

According to many of these participants, the type of Western Canadian French that should be taught in French L2 courses is similar to the French spoken and written by France Levasseur-Ouimet, a playwright and professor emeritus who has dedicated her career to the cultural and linguistic development of French-speaking Albertans (RAFA, 2011). One nurse working in Northern Alberta similarly believes Western Canadian French should be taught because patients in her region are not acquainted with Québécois and European expressions.

(15) Moi, je pense que ça devrait être le français de France Levasseur-Ouimet. Vous la connaissez? Jamais vous allez l'entendre dire un mot anglais. Jamais. C'est pas comme les Québécois. Pis elle est pas prétentieuse comme les Français. Pis sa fille est pareille, pis son mari i'est pareil. Pour moi, i'a pas de meilleur modèle. (Senior participant #68)

(I think it should be France Levasseur-Ouimet's French. You know her? You'll never hear her use an English word. It's not like the Québécois. And she's not as pretentious as the French. And her daughter's the same, and her husband's the same. I don't think there is a better model)

Two elderly participants who were born in Québec believed Québécois

French, equated with Radio-Canada French, should be the norm taught in French

L2 courses because, according to them, this is the official linguistic norm for

French in Canada. Three nurses also agreed that Québécois French should be the

target norm because, according to them, only patients originally from Québec do

not speak English and they are thus the only ones who need French-speaking

medical care.

(16) Avec le français de Radio-Canada, on ne peut pas se tromper. C'est notre standard à nous, avec nos expressions à nous. (Senior participant #1)

(With Radio-Canada French, you can't go wrong. It's our standard, with our expressions.)

Only two participants (native of France) suggested that European French should be the target variety taught in Alberta. According to them, this variety is clearer and more precise than any Canadian French varieties. They also believed tt is also error free and thus more valid as a pedagogical standard to be emulated by L2 users.

(17) Étant donné que nous voulons améliorer le français dans une région minoritaire, je trouve que le français européen donnerait une meilleure base, surtout à cause de la prononciation. (Senior participant #7)

(Since our goal is to improve French in a minority region, I find that European French would offer a better basis, mostly because of its pronunciation.)

It is interesting to note how participants' ethnocentric attitudes are revealed in their justifications of target linguistic norm for French L2 nursing students.

The findings shed light on how participants' representations of what constitutes a valid linguistic norm for French L2 nurses in Alberta. Canadian French varieties are clearly preferred over the European French variety, except for those who are from Europe.

Table 11. Participants' preference with respect to French linguistic norm

	Ser	niors	Health professionals		
	N	N % N			
Français québécois	2	4.8	3	27.3	
Français de l'Ouest	8	19	1	9.1	
Français européen	2	4.8	0	0	
Français québecois + Ouest	21	50	5	45.5	
Autre	9	21.4	2	18.1	

# 4.4.2 Analysis of the verbal guise experiment

The quantitative data gathered from the verbal guise experiment were analyzed using SPSS (version 19.0). First, descriptive statistics were calculated to determine the average score attributed to each guise on both the competence and social attractiveness constructs. Then, t-tests were conducted to assess whether the average scores were significantly different. Last, an analysis of variance (ANOVA) was used to examine whether dependent variables (i.e. participants' age, language dominance) had a significant effect on the dependent variable (judgments of nursing student's linguistic behaviour).

The qualitative data collected during the follow-up interviews were examined through a content analysis. The initial step of this analysis involved the identification of words and phrases related to the research questions. They were then clustered into six categories during a secondary coding process. The first category "normative references" regroups comments made in reference to "speaking properly" (e.g.: "C'est mieux dire 'ventre' que 'bedaine'. C'est trop familier. C'est mieux d'utiliser les vrais mots" -It's better to say 'stomach' than 'belly'. It's too familiar. It's better to use the / right words- participant #15). The second category "stereotypical speakers" categorizes opinions that view the nurse as a representative of a certain style or a certain French-speaking group (e.g.: "On dirait qu'elle parle un peu comme une personne qui vient de la Beauce... c'est pas bon ça..." - It seems like she talks a bit like somebody who comes from Beauce...and that's not good..., participant #46). The third category "adaptation" refers to comments made about the nurse's (in)ability to adapt her speech to her

patient (e.g.: "Son vocabulaire est très bien adapté à son patient"- Her vocabulary is very appropriate for her patient, participant #4). The fourth category "presentation" refers to comments made about the nurse's self-presentation and her perceived communicative intentions (e.g.: "Elle a l'air plus enjouée et elle créerait un bon lien avec son patient" - She seems more cheerful and she would have a good rapport with her patient, participant #30). The fifth category "nursing" refer to comments made about the importance of the nursing profession (e.g.: "Une garde-malade c'est une garde-malade. Le malade n'a pas tellement le choix. Tant qu'il n'y a pas de menace ou rien, moi ça me convient" - A nurse is a nurse. The patient doesn't have much choice. As long as there aren't any threats or anything, that's okay with me, participant#5) and the last category is made up of comments that are more general in nature (e.g.: "J'vois aucun problème avec ça, moé" - I have no problem whatsoever with that). Comments were entered in a grid (see an example in Table 12) and general trends were then derived for discussion.

Table 12. Content analysis grid

		Wh	o evalu	ates?			Kind	of attitu	ıde	
Comment	Sex	Age	Dom. Lang	Bil.	School ing.	Norm/ règle	Speak. stereot	Adap. talk	Pres.	Gen.
Moi, je ne vois pas de problème ici parce qu'elle adapte son vocabulaire à son patient pis lui l'a bien compris (#44)	М	51	F	late	B.A (F,A)			x		
Elle est pas mal stricte, peut- être nerveuse. Elle était too stiff – relaxe! On peut être professionnelle sans être trop « carré ». (#49)	F	42	A	early	B.A (F,A)				x	
C'est comme l'autre, mais elle a utilisé des mots plus propres. Je l'aime aussi. (#2)	F	93	F	early	H.S (F et A	Х				

#### 4.4.3 Results - forms of address

## 4.4.3.1 Target community overall profile

Table 13 provides descriptive statistics that offer a general overview of how the French L1 and French L2 nurses were judged by the raters on measures of competence and social attractiveness for their use of address practices. The mean scores indicate that formal forms of address are favoured by the target population, receiving slightly higher scores on measures of social attractiveness. The low standard variation values for the formal forms of address suggest that this opinion is rather consistent within the population. The use of informal forms of address triggered a wide array of reactions from participants as indicated by the higher value for standard variation. The scores ranged from very negative 4/20 to very

positive 20/20. The lower mean scores suggest this form is not highly valued in the target community.

Table 13. Descriptive statistics on competence and social attractiveness measures

	Tu – L1 Comp. /20	Tu – L1 S.Attrac. /20	Vous –L1 Comp. /20	Vous – L1 S.Attrac. /20	Tu – L2 Comp. /20	Tu – L2 S.Attrac. /20	Vous – L2 Comp. /20	Vous –L2 S.Attrac. /20
N	53	53	53	53	53	53	53	53
Mean	14.28	15.89	18.30	18.64	14.11	15.96	17.91	18.47
Std. dev.	5.15	4.64	2.72	2.24	5.24	4.50	2.80	1.94
Minimum	4.00	4.00	8.00	12.00	4.00	4.00	8.00	14.00
Maximum	20.00	20.00	20.00	20.00	20.00	20.00	20.00	20.00

The content analysis of the interviews that took place after the participants were exposed to the situations in which forms of address were isolated reveals a similar trend. While the nurses using *vous* received predominantly positive appreciation comments (87.7%), the use of informal forms of address triggered an array of different reactions: 39.5% were positive, 51.2% were negative and 9.3% offered more nuanced opinion

- (18) Moi, j'aurais confiance en elle. Moi, je trouve ça plus chaleureux de dire TU. Moi, j'ai pas de misère avec ça. (Senior participant #32)
  (I'd trust her. I think it's friendly to say "tu". I don't have any problem with that.)
- (19) « Salut, tu » c'est pas professionnel du tout. (Senior participant #41)("Salut, tu"it's not professional at all.)
- (20) Quand ça fait une secousse que t'es à l'hôpital pis qu'ils t'appellent par ton ti-nom, on dirait que ça fait chaleureux. Les premiers temps, non—mais après une secousse oui—ça fait qu'ils sont plus proches. (Senior participant #26) (When you've been at the hospital for a while and they call you by your first name, it feels warm. The first time, no- but after a while yes—they seem closer)

#### 4.4.3.2 Statistical significance – Tu vs. Vous

Then, paired-sample t-tests were conducted to determine whether the difference in mean scores was significant (see Table 13). The results indicate that the preference for formal forms of address is significant (p=.00 < .01) on measures of competence and social attractiveness for both the French L1 and French L2 nurses.

Table 14. Paired sample t-tests scores on measures of competence and social attractiveness (forms of address)

Variable	99% CI	Mean 1 (SD1)	Mean 2 (SD2)	N	t- value	p- value	Effect size
Tu vs. Vous –L1 competence	-5.89, -2.14	14.28 (5.15)	18.3 (2.72)	53	-5.73	.00	98
Tu vs. Vous –L1 social attract.	-4.49, -1.02	15.89 (4.64)	18.64 (2.24)	53	-4.24	.00	76
Tu vs. Vous –L2 competence	-5.54, -2.05	14.11 (5.24)	17.91 (2.8)	53	-5.81	.00	91
Tu vs. Vous –L2 social attract.	-4.03,99	15.96 (4.5)	18.47 (1.94)	53	-4.4	.00	72

The interview data offers insights into participants' opinions regarding the target features. First, we notice that positive ratings regarding the use of formal forms of address are mostly general in nature (70%), as in the following example:

(21) Elle est très bonne, je ne vois rien à redire sur elle. (Senior participant #2) (She's really good, I have nothing bad to say about her.)

For the majority of the comments, it is impossible to determine whether interviewees noticed the form *vous* and the formal greetings. However, their comments to the nurses' speech triggered positive reactions due to her overall presence.

(22) Elle est bonne, elle a de la patience. Elle a l'air dévouée et respectueuse. Je pense pas qu'il y ait quelque chose qu'elle aurait pu faire de plus.

(Senior participant #3)

(She's good, she's patient. She seems serious and respectful. I don't think she could've done anything more.)

When interviewees indicated they had noticed the target formal features, their reactions were always accompanied by normative comments, as example 23 illustrates it:

(23) Je trouve qu'elle était pas mal professionnelle, pis elle a vouvoyé le patient. Moi, je trouve que dans le cadre d'être professionnelle, pis d'être respectueuse...c'est important de vouvoyer.

(Participant #51, female, early bilingual, 21)

(I think she was pretty professional, and she said "vous" to her patients. I think when you want to be professional, and respectful, it's important to say "vous".)

There are only three participants who reacted negatively to the use of *vous;* they perceived these nurses as cold and lacking interpersonal skills. They also questioned her enthusiasm towards her job and the nursing profession in general. These interviewees are three French-speaking retirees who have grown up and lived their adult life in a bilingual environment in Alberta. Their difference in attitudes from the rest of the participants could be explained by one participant's comment stating he has never fully mastered the distinction between *tu* and *vous*, adopting *tu* as his default second person address pronoun across all sociolinguistic contexts as the following excerpt reveals

(24) Le tutoiement c'est une dimension de la langue française à laquelle je suis totalement insensible. C'est un élément de la langue auquel je ne me suis jamais habitué. Des fois, j'y pense, mais je suis certain que je pourrais tutoyer la Reine. Je sais que pour certaines personnes c'est très important. Je sais pas pourquoi, ça n'a jamais pénétré chez moi. (Senior participant #7)

(Saying "tu" is a dimension of French that I just don't get. It's an element of the language that I've never gotten used to. Sometimes

I think of it, but I'm sure I could say "tu" to the Queen. I know that for some people, it's really important. I don't know why, it's just never sunk in with me.)

The use of informal forms of address prompted different reactions in interviewees. A little more than half of the comments contained negative attitude judgements (51.2%) or somewhat negative comments (9.3%) about the target features. The nature of these comments reflected perceived normative conventions that were non-respected (77%). At the heart of participants' explanations was sometimes a social rule (example 25), or a linguistic practice that had been witnessed in a French-majority environment (example 26) that had been violated.

- (25) En général, quand il y a une grande différence d'âge, il faut vouvoyer. (Senior participant #30)(Generally speaking, when there's a big age difference, you have to say "vous".)
  - (26) Au Québec, y a 30 ans, je me faisais dire « vous » à l'hôpital. Les infirmières vouvoyaient tout le monde sauf les enfants au Québec. Il faudrait qu'elle vouvoie son patient, franchement! (Senior participant #42)

(In Québec, 30 years ago, I had to say "vous" at the hospital. Nurses said "vous" to everybody except kids in Québec. She really should say "vous" to her patient)

However, with 39.5% of positive comments regarding the use of informal forms of address, we can suppose that, to some extent, these features are valued in this community. The majority of the positive remarks (38.9%) emphasized the positive qualities the nurse brings forth to the intervention, as example (27) illustrates:

(27) *C'est personnel, c'est plus familier pis c'est moins gênant.* (Participant #1, male, French monolingual, 92)

(It's personal, it's more familiar and it's not as intimidating.)

A group of participants composed of male health professionals and older female early bilinguals seemed to initially question the use of tu, but explained that linguistic behaviour as not intentionally displaying lack of respect to her patient (see example 28) and they therefore did not evaluate the nurse negatively. One participant also stated that because the patient in the interaction did not react negatively to the use of tu, this linguistic practice is acceptable.

(28) Je suis vraiment embêté par cette affaire de tu ou de vous. On sent le respect envers son patient, même si elle le tutoie. Je crois qu'elle n'est pas consciente de cette faute. Elle utilise la norme locale et la norme locale ici c'est d'utiliser le " tu " tout le temps. (Health professional participant #43)

(I'm really bothered by this business of "tu" or "vous". You can see her respect for her patient, even if she says "tu" to him. I don't think she's aware of her mistake. She's using the local norm and the local norm is to use "tu" all the time.)

## 4.4.3.3 Statistical significance – French L1 vs French L2 usage

Paired samples t-tests were also conducted to determine whether the participants judged the French L1 and French L2 nurses differently. Table 15 suggests that participants' judgements were not significantly different, with p values well above the 0.05 degree of significance on three measures. The low correlation coefficients d also indicate that there is little relation between the four pairs. The results show however that the French L2 nurse who uses formal forms of address is not perceived as competent as the French L1 nurse.

Table 15. Paired sample t-tests scores L1 vs. L2 on measures of competence and social attractiveness

Variable	99% CI	Mean 1 (SD1)	Mean 2 (SD2)	N	t- value	p-value	Effect size
Tu - L1 vs L2	58, .92	14.28 (5.15)	14.11 (5.24)	53	.61	p = .55	d=.03
competence Tu - L1 vs L2 social attract.	89, .74	15.89 (4.64)	15.96 (4.5)	53	25	p =.81	d=02
Vous - L1 vs L2 competence	.13, .93	18.30 (2.72)	17.91 (2.8)	53	2.01	p=.05	d=.14
Vous - L1 vs L2 social attract.	30, .64	18.64 (2.24)	18.47 (1.94)	53	.96	p=.34	d=.08

Let us now turn to the qualitative data to make sense of the quantitative trends. A closer look at the participants opinions reveal that participants' reactions to forms of address do not seem to be affected by the nurse's linguistic proficiency in French. Participants either reacted equally negatively or equally positively to these features in the French L1 and French L2 varieties. Participants who reacted strongly to the use of informal forms of address were asked in the interviews whether this linguistic faux-pas would be more acceptable if uttered by a French L1 or a French L2 nurse. All the participants mentioned that the nurse's linguistic background was not an important criterion in their evaluation of the intervention. Example 29 illustrates well the opinion shared by many participants:

(29) Pour moi, c'est pas l'accent qui compte. C'est la personne, c'est comment elle agit dans la situation. Ce qui est important, c'est la relation. Le patient est dans une situation vulnérable et puis la garde-malade a la responsabilité d'optimiser la valeur du patient. (Participant # 37, female, late bilingual, 67)

(To me, it's not the accent that counts. It's the person, it's how she acts in the situation. What's important is the relationship. The patient is in a vulnerable situation and it's the nurse's the responsibility to value the patient as much as possible.)

The fact that the French L2 nurse appeared to have been judged more negatively on the competence construct than the French L1 nurse may be an artifact of the data collection procedures. It seems that the order in which the situations were presented to participants affected the initial judgments made on the speech samples. The majority of the participants were exposed to the French L2 nurse using formal forms of address before the French L1 script. When hearing this situation for the first time a number of participants (n=10) commented on the inappropriateness of her intervention (i.e. waking a patient up to feed him), even though they had been instructed before listening to the excerpt that it is a common procedure in long-term care facilities. They thus gave a poor rating to the nurse on the four competence traits, as example 30 reveals. The second time these participants were exposed to the same script they did not react to the nursing intervention, but rather the nurse's linguistic performance.

(30) Pourquoi elle le réveille le pauvre vieux? I' dérangeait personne lui. Moé, j'trouve ça inhumain la façon qu'ils les traitent des fois. (Participant #41, female, late bilingual, 65)

Why is she waking him up, the poor old guy? He's not bothering anybody. I think it's inhuman, the way they treat them sometimes.

#### 4.4.3.4 Interaction effects

The mean scores were then analyzed using an analysis of variance (ANOVA), with repeated measures with the nurse's language (L1 or L2) and level of formality as the within-subjects factors and the dominant language (French, French and English) and age as between-subjects factors. Because of a low representation of male participants and uneven representation of the various academic backgrounds, it was impossible to include these background variables in

the statistical analyses. The repeated measures ANOVA performed on the competence and social attractiveness mean scores, yielded results shown in Table 16.

Table 16. MR ANOVA results for informal vs. formal forms of address

		Con	npetenc	e	So	ocial att	ractive	ness
Sources	df	F	p- value	Partial n <sup>2</sup>	df	F	p- value	Partial n <sup>2</sup>
Within								
Language	1	1.62	.21	.032	1	.02	.88	.000
Language x dominant language	1	.02	.90	.000	1	.05	.83	.001
Language x age	1	.06	.81	.001	1	.26	.61	.005
Language x dominant language x age	1	1.94	.17	.038	1	.59	.45	.012
Formality	1	32.0	00*	.395	1	14.4 6	.00*	.228
Formality x dominant language	1	2.16	.15	.042	1	6.25	.02*	.113
Formality x age	1	2.07	.16	.041	1	.26	.61	.005
Formality x dominant language x age	1	.60	.44	.012	1	.26	.61	.005
Language x formality	1	.28	.60	.006	1	.49	.49	.010
Language x Formality x dominant language	1	.09	.76	.002	1	2.31	.14	.045
Language x Formality x age	1	.04	.84	.001	1	.23	.63	.005
Language x formality x dominant language x age	1	.18	.67	.004	1	.37	.54	.008
Between								
Dominant language	1	1.19	.281	.024	1	3.03	.09	.058
Age	1	2.65	.110	.051	1	.15	.70	.003
Dominant language x age	1	.31	.582	.006	1	.11	.74	.002

As seen with the paired samples t-tests, the level of formality of the situation had a significant effect on competence and social attractiveness mean scores. Moreover, the interaction between formality of the speech sample and participants' dominant language had a significant effect on social attractiveness mean scores, indicating that language dominance has an effect on participants' reaction to the different speech samples. None of the other factors or combination of factors significantly influenced the participants' perceptions.

A closer look at the participants' profile reveals that low valorization of informal forms of address is more present in participants who are less than 70

years old, who were born in an environment where French is a majority language (i.e., Québec, France, Acadie and Northern Ontario) and later moved to Alberta as young adults. Their criticisms emerged from a perceived violation of their own usage of that feature (see example 31). According to these participants, violation of this rule makes the nurse appear unprofessional, disrespectful, patronizing or too casual (see example 32).

- (31) Elle a dit tu? Nous autres chez-nous, ça a toujours été que si tu parles à une personne âgée, tu utilises vous. Pis c'est ça que j'ai enseigné à mes enfants aussi.

  (Health professional participant #47)
  - (Did she say "tu"? Around here, it's always been the rule that if you're talking to an elderly person, you use "vous". And that's what I taught my kids to do, too.)
- (32) Avec les personnes âgées, il faut utiliser le vous. Pis, c'est mieux de pas l'appeler par son ti-nom aussi, ça garde le respect. C'est pas un membre de sa famille ça!"

  (Senior participant #25)

(With old people, you have to use "vous". And it's better not to call them by their first name, either, to stay respectful. She's not a family member, after all.)

The group of participants for whom the situation in which *tu* and other informal forms of address triggered positive reactions is made up of a majority of male and female early bilinguals who are older than 70. For some of them, their positive evaluations were not prompted by *tu* as they stated not having noticed the use of that linguistic feature; they rather commented on the nurses' skills and approach, as example 33 illustrates. In fact, the majority of these participants appear to give more value to good nursing skills and friendliness than French linguistic skills (see example 34).

- (33) Elle l'a tutoyé? J'avais même pas remarqué! Ça me dérange pas ben ben, moé le "tu". Je l'ai trouvé gentille, elle n'a pas été brusque.
  (Senior participant#16)
  (Did she say "tu" to him? I didn't even notice! It doesn't bother me much, saying "tu". I found her nice, she wasn't brusque.)
- (34) Moé en autant qu'elle fasse bien son travail et qu'elle nous bourrasse pas, j'ai pas de problème avec la façon qu'ils nous adressent.
   (Senior participant #5)

(As far as I'm concerned, as long as she does her work and doesn't push us around, I'm not worried about how she addresses us.)

The group of participants who noticed and valued the use of *tu* also belonged to the group of early bilingual seniors above 70. They explained that the nurse's intervention appeared personal. Example 35 shows how the nurse is perceived as warm and trustworthy. Example 36 reveals that French-speaking immigrants who show signs of acculturation to perceived French-speaking Albertans' linguistic practices also hold positive opinions towards the use of *tu*.

- (35) Moi, j'aurais confiance en elle. Moi, je trouve ça chaleureux de dire "tu". Moi, j'aurais pas de misère avec ça. (Participant #32)
  - (I'd trust her. I think it's friendly to say "tu". I don't have any problem with that.)
- (36) Ça ne me dérange pas le tu. Les gens tutoient beaucoup ici et m'appelle par mon prénom et je me suis habituée, je m'y suis fait. Ça ne me choque pas le "tu", c'est gentil. Moi, je n'ose pas faire pareil, par contre. Ça me met en confiance, j'ai beaucoup aimé ça.

  (Participant #20)

(Saying "tu" doesn't bother me. People do it a lot around here, and call me by my first name and I'm used to it, I got used to it. Saying "tu" doesn't shock me, it's nice. But I wouldn't do it myself, mind you. It's reassuring; I thought it was just fine.)

The qualitative analysis can thus provide some explanations as to why the age factor contributed to significant results on mean scores of social attractiveness. The participants aged 70 and above either positively valued good nursing skills in general or the level of familiarity that the use of informal forms of address seems to trigger. On the other hand, the younger participants seem to believe that the use of *tu*, *salut* and the patient's first name appear as an offence to social etiquette. Had a larger pool of participants been investigated, we could determine whether other factors, such as French language dominance, could also explain this result.

#### 4.4.4 Results – stylistic phonological, lexical and grammatical variables

This section will report on the attitudes participants had towards target phonological (i.e., schwa deletion vs. retention, /l/ deletion vs. retention), lexical (par contre vs. par exemple, face vs. visage, aisselles vs. d'ssous d'bras, ventre vs. bedaine and nous vs. on) and grammatical (je vais vs. je vas, ne deletion / retention) variables.

#### 4.4.4.1 Target community overall profile

General descriptive statistics were run to obtain a broad picture of how formal and mildly marked informal variants were evaluated in the population sample on the sclaes of perceived competence and social attractiveness (see table 17). The analysis suggests that participants judged favourably both formal and informal variants, with mean scores above 16/20. The mean scores indicate there is a slight preference for the mildly marked informal variants, especially for social attractiveness traits.

Table 17. Mean scores of competence and social attractiveness for mildly marked informal and formal variants

-	M .marked L1	M .marked L1	Informal L1	Informal L1	M .marked L2	M .marked L2	Informal L2	Informal L2
	Comp. /20	S.Attract. /20	Comp. /20	S.Attract. /20	Comp. /20	S.Attract. /20	Comp. /20	S.Attract. /20
N	53	53	53	53	53	53	53	53
Mean	17.81	18.34	17.49	16.32	17.91	18.32	17.26	16.40
Std. dev.	2.89	2.17	2.98	3.73	2.66	2.10	2.96	3.34
Minimum	8.00	12.00	7.00	6.00	8.00	12.00	7.00	8.00
Maximum	20.00	20.00	20.00	20.00	20.00	20.00	20.00	20.00

The content analysis confirms that, overall, mildly marked informal variants are seen in a more positive light than their formal counterparts. While the formal version of the script triggered 44.8% of positive comments (the majority being largely negative and one neutral comment), the majority of the comments that followed the informal script were positive (72.4%).

When judging the situations, the majority of the interviewees mentioned the nurse's choices of lexical variants as opposed to grammatical or phonological ones (see examples 37 and 38).

- (37) C'est mieux de dire "ventre" que "bedaine". C'est trop familier, c'est mieux d'utiliser les vrais mots.
  (Participant # 15)
  (It's better to say "stomach" than "belly". It's too familiar, it's better to use the right words)
- (38) Oh non! Quand ils utilisent des grands mots de même, moé j'aime mieux parler en anglais dans c'temps là. Pis, me semble que c'est plus froid, pis c'est plus gênant de se faire parler avec des mots comme ça.

  (Participant #24)

(Oh, no! When they use big words like that, I'd rather speak English. It feels colder, and it's too formal, when people use words like that to talk to you.)

Some participants were also influenced to a lesser degree by the phonological aspects of the nurse's speech:

(39) Elle, c'est elle, qui a le plus gros accent anglais. Il y un manque de liaison, ce qui fait que ça a l'air laborieux de parler. Peut-être que dans ce cas-là, un aîné à l'aise en anglais pourrait lui dire « écoute, c'est de la torture, parle-moi en anglais »...les patients franco-albertains seraient très soucieux de rendre la vie plus facile à la jeune infirmière.

(Participant #45)

(She's the one with the strongest English accent. She doesn't link her words together, and it makes it sound like work when she talks. Maybe in a situation like that, an older person who's comfortable in English could say to her, "Look, this is torture, talk to me in English." Francophone patients would just want to make her life easier.)

Participants only commented on grammatical variants when the interviewer attracted their attention to that matter, as example 40 illustrates.

(40) R: Pis, elle dit des choses comme « j'vas », ça, ça vous dérange-tu? (And, she says things like « gonna », does does that bother you?

P: J'vas? J'ai pas de problème avec ça du tout. C'est ben correct. Moi, c'est le vocabulaire que je trouve le plus important. (Participant #7, male, late bilingual, 79)

("Gonna?" I have no problem with that at all. It's just fine. The vocabulary's the most important thing, I think.)

## 4.4.4.2 Statistical significance – formal vs. informal target variants

Paired samples t-tests were conducted to determine whether the difference in mean scores between the formal and informal scripts was significant (see Table 18). The results indicate that the scripts triggered different reactions reaching significance (p=0.00 < .05) from participants in terms of social attractiveness for both the French L1 and French L2 nurses. The high values for correlation coefficients d also indicate there exists a strong relation between social attractiveness and style of the speech prompt (d= .66, .69 > .37). Stylistic choices

do not seem to affect participants' perceptions on competence; this is especially true for the French L1 nurse.

Table 18. Paired sample t-tests scores on measures of competence and social attractiveness (mildly marked vs. formal variants)

Variable	99% CI	Mean 1 (SD1)	Mean 2 (SD2)	N	t-value	p-value	Effect size
Inform. vs. formal L1- competence	80, 1.44	17.81 (2.89)	17.49 (2.98)	53	.76	.45	d=.11
Inform. vs. formal L1 - social attract.	.55, 3.49	18.34 (2.17)	16.32 (3.73)	53	3.67	.001*	d=.66
Inform. vs. formal L2- competence	25, 154	17.91 (2.66)	17.26 (2.96)	53	1.92	.06	d=.23
Inform. vs. formal L2 - social attract.	.64, 3.21	18.32 (2.10)	16.39 (3.34)	53	4.01	*00	d=.69

The analyses of the interview data confirm the quantitative trends and shed light on the participants' opinions. The majority of the comments that followed the formal and informal scripts are found in the category "presentation of oneself" with participants commenting on traits that are directly connected to social attractiveness. In fact, a majority of participants reacted negatively to the formal variants. They stated that the FL1 nurse appeared cold, distant, aloof, presumptuous, authoritative or uptight (see example 41). While the same comments were also made for the FL2 nurse, participants also mentioned that her speech appeared unnatural and mechanical making them question whether she enjoys speaking French at work (see example 42).

- (41) Les mots qu'elle a employés...je trouve ça bizarre, je la trouve moins chaleureuse....juste à cause des mots qu'elle a employés.

  (Participant #53, female, early bilingual, 25)
  - (The words she used...I find them strange, I find her less warm...just because of the words she used.
- (42) Elle semble moins maîtriser la langue celle-ci puis elle a l'air moins enjouée. On sent que c'est plus un devoir, une obligation,

une tâche de parler français. C'est un peu comme si elle récitait un poème!

(Participant#46, female, late bilingual, 55)

(She doesn't seem the master the language this one and she seems less cheerful. We feel like it's a duty, an obligation, as task to speak French. It's a little bit as though she were reciting a poem!)

The vast majority of participants reacted favourably to the use of mildly marked informal variants. They attributed positive personal characteristics to both the FL1 and FL2 nurse such as warmth, kindness and trustworthiness (see example 43)

(43) Elle a l'air chaleureuse, elle a l'air près de son patient. Moi, j'me sentirais en confiance avec elle.
(Participant #38, male, late bilingual, 66).
(She seems warm and friendly, close to her patient. I'd feel safe with her)

The use of mildly marked informal variants also received positive reviews because of the perceived nurse's willingness to adapt her speech style to her patient. This ability is valued by both the health care professionals (example 44) and the retirees (example 45).

- (44) Elle s'adapte à son niveau de français à lui. En général, les patients d'ici ils aiment mieux les plus familiers.

  (Participant #49, female, early bilingual, 42)
  - (She adjusts her level of French to him. Generally speaking, patients around here like the friendly ones better.)
- (45) Son français, je peux comprendre qu'elle utilise des mots comme « face », « bedaine », « d'ssous d'bras ». Elle s'adapte à son patient et c'est très bien comme ça.

  (Participant #37, female, late bilingual, 67)
  - (Her French...I can understand why she uses words like "belly" and "armpit". She adjusts to her patient and that's okay like that.)

# 4.4.4.3 Statistical significance – French L1 vs. French L2 stylistic choices

More paired samples t-tests were conducted to determine whether the French L1 and French L2 varieties received similar ratings (see Table 19). Once again, no significant differences were found in the way participants evaluated the French L1 and French L2 nurses, although it is clear that participants accurately noticed the linguistic background of the guises they were exposed to, as examples 46 and 47 reveal:

- (46) Même si elle casse son français, on n'aurait pas de problème à la comprendre.
   (Participant #2, female, French monolingual, 91)
   (Even if she mangles her French, we wouldn't have any problems understanding her.)
- (47) Elle est un peu trop « uppity » celle-là, elle a moins de chaleur que les p'tites anglophones.
  (Participant#32, female, early bilingual, 72)
  (She's a bit too "uppity", that one, she's not as friendly as the little anglophones.)

Table 19. Paired sample t-tests scores on measures of competence and social attractiveness (L1 vs. L2)  $\,$ 

Variable	99% CI	Mean 1 (SD1)	Mean 2 (SD2)	N	t- value	p- value	Effect size
L1 vs. L2 – inform. competence	74, .56	17.81 (2.89)	17.91 (2.66)	53	39	.70	d=04
L1 vs. L2 –inform. social attract.	50, .54	18.34 (2.17)	18.32 (2.10)	53	.10	.92	d=.00
L1 vs. L2 - formal competence	50, .95	17.49 (2.98)	17.26 (2.96)	53	.84	.41	d=.08
L1 vs. L2 - formal social attract.	87, .71	16.32 (3.73)	16.40 (3.34)	53	26	.80	d=02

In the follow-up interviews, participants were asked whether it was more appropriate for the French L1 or the French L2 nurse to use informal features such as *bedaine* and *j'vas*. Participants who did not favour the use of informal variants

in clinical contexts believed it was a linguistic practice that should not be adopted by any linguistic groups. Similarly, interviewees who valued the use of informal variants believed these features could be used by everyone.

# 4.4.4.4 Interaction effects

Finally, an ANOVA with repeated measures was conducted on the mean scores with, once again, nurse's language (L1 or L2) and level of formality as the within-subjects factors and dominant language (French, French and English) and age as between-subjects factors. The results of this analysis are shown in Table 20.

Table 20. MR ANOVA results for informal vs. formal stylistic variants

		Con	petence			Social a	ıttractive	ness
Sources	df	F	р-	Partial	df	F	р-	Partial
			value	$n^2$			value	$n^2$
Within								
Language	1	.16	.69	.003	1	.09	.76	.002
Language x dominant language	1	.02	.88	.000	1	.28	.60	.006
Language x age	1	.12	.74	.002	1	.34	.56	.007
Language x dom language x	1	.05	.83	.001	1	.02	.90	.000
age	1	.03			1			.000
Style	1	.04	.83	.001	1	9.72	*00	.166
Style x dominant language	1	.65	.42	.013	1	.03	.87	.001
Style x age	1	12.9	*00	.208	1	1.86	.18	.037
Style x dominant language x	1	.73	.40	.015	1	1.09	.30	.022
age	_				_			
Language x style	1	4.02	.05	.076	1	.98	.32	.020
Language x style x dominant	1	2.84	.10	.055	1	5.49	.02*	.101
language								
Language x style x age	1	7.53	.01*	.133	1	6.13	.02*	.111
Language x style x dominant	1	3.99	.05	.075	1	7.30	.01*	.130
language x age	_							
Between								
Dominant language	1	.21	.65	.004	1	.01	.92	.000
Age	1	.87	.36	.017	1	.00	.96	.000
Dominant language X age	1	.11	.74	.002	1	.06	.81	.001

The statistical analysis indicates that the interaction between stylistic features of the speech sample and age of the participants, as well as the interaction between speech style, the guise's linguistic group and the participants' age, had a

significant effect on competence mean scores. Mean scores for the social attractiveness construct were significantly affected by the style of the speech sample which validate the results offered by the paired-sample t-tests. Moreover, the mean scores were significantly affected by the interaction between the guise's linguistic group, style of the speech sample and participants' age and dominant language. Post-hoc analyses would have helped account for the nature of these interactions and how they affected the mean scores had the number of participants for each background variables been higher. Qualitative data can however help uncover some of the answers.

Content analysis of the interview data shows that 25% of the participants (13/53) were not influenced by the nurse's stylistic choices, giving high rankings to all four situations regardless of the variants used or the nurse's linguistic background. This group consists of the oldest participants and participants from the community of St-Isidore, in the Peace River area. While women from this group tended to base their opinions on the nurse's social attractiveness, the men positively evaluated the nurse on traits of nursing competence. Many of these participants stated they would be satisfied being treated by a nurse who has minimal French communication skills.

A closer look at the interviewees' comments on competence traits reveals that new retirees (65 to 70), two retired French teachers (age 74 and 79) and the three professors of the University of Alberta's Faculty of Nursing hold different opinions from the rest of the participants on the use of lexical mildly-marked informal variants. All but the two retired French teachers grew up in an

environment where French was a majority language and moved to Alberta as young adults. This group of participants commented that the nurse's lexical choices made her appear unprofessional, disrespectful and patronizing, as examples 48 and 49 illustrate.

- (48) Bedaine? Il faudrait utiliser des mots plus formels comme visage. C'est pas un enfant. Il faut être en mesure d'utiliser les bons mots pour respecter ce que cette personne est et a été. (Senior participant #35, male, late bilingual, 68)
  - ("Belly"? It'd be better to use more formal words, like "face". She's not a child. You have to be able to use the right words to respect what this person is and was.)
- (49) Nous autres ici, on utilise plus les vrais termes par exemple, c'est plus professionnel.
  (Health professional participant #47, female, late bilingual, 52)
  (Around here, we use the right terms more, though. It's more

Although this group of participants reacted negatively to the use of lexical informal variants regardless of the guise's linguistic background, the French L1 guise seemed to be associated with more stigmatized varieties of Canadian French (example 50):

(50) Participant: ((laughs)) *Elle parle un peu comme une personne qui vient de la Beauce.*(She talks a bit like somebody who comes from

(She talks a bit like somebody who comes from Beauce.)

Interviewer: Ok. C'est-tu bon ça?

professional.)

Participant: Ben, c'est pas bon ça...j'trouve qu

(Is that good?)

Ben, c'est pas bon ça...j'trouve que son langage à celle-là ...ça fait que non....son français, ça lui fait perdre des points du côté professionnalisme...et ça peut avoir un impact sur le patient qui peut-être lui

*fera moins confiance par exemple.* (Health professional participant #46)

(Well, it's not good...I think her language...that one's...it's just that, no...her French docks her points on professionalism...and that could have an impact on the patient who would maybe, for example, not trust her as much)

These participants were very consistent in their opinions as they highly valued the formal variants (see example 51).

(51) C'est beau ça! C'est professionnel, c'est mieux! Elle a dit les aisselles, c'est l'vrai mot.(Participant #41, female, late bilingual, 65)

(That's more like it! It's professional, it's better! She said "underarms", that's the right word.)

When we examine the comments pertaining to social attractiveness traits, they originate from early bilingual women (see example 52) and first-generation French-speaking immigrant women who value the perceived local norm (see example 53).

- (52) Elle est plus sérieuse et moins chaleureuse, celle-là. (Participant #38, female, early bilingual, 66)
  - (She's more serious, less friendly, that one.)
- (53) Elle emploie des termes qui....je suis habituée maintenant, ça ne me surprend plus. Je la trouve même plus gentille et chaleureuse cette petite que celle qu'on a entendu avant.

  (Participant #20, female, French monolingual, 84)

(She uses terms that...I'm used to it now, it doesn't surprise me anymore. I find her even nicer and friendlier, this one, than the one we heard before)

There is no evidence in the participants' comments that they were influenced by the guise's French linguistic background.

### 4.5 Interpretation of the results

This study was designed to identify which stylistic features nursing students are expected to use for communication with French-speaking patients in Alberta, in accordance with Valdman's (1976, 2000) second criteria for designing a pedagogical norm for French L2 teaching.

The results of this study will be discussed in light of the research hypotheses stated in section 4.1. Figure 5 (in section 4.5.2) will be used to illustrate which independent variables can predict target population's language attitudes towards nursing students' linguistic behaviour in clinical contexts.

## 4.5.1 The first research question

The first research question aimed to provide a perspective on preferred address practices in nurse-patient interactions in French-speaking clinical contexts in Alberta. The first hypothesis was confirmed as the quantitative data, further substantiated by interview data, demonstrated that there is an overwhelming preference for *vous* and formal forms of address in the target community. In fact, formal forms of address appear to be unmarked features not being noticed or commented on by a majority of participants. Moreover, for a number of participants who did notice the feature, the use of *vous* was essential to create the social distance they expect to find between a young female nurse and an older patient. For other participants, the use of *vous* and formal use of address is crucial to show respect to the elders. Hence, as expected, this linguistic preference in not affected by social factors such as age or degree of bilingualism.

Interestingly, although formal forms of address triggered significantly more positive reactions from the participants, informal forms of address also received a non-negligible number of positive ratings. For many participants, the use of tu in nurse-patient interactions is also regarded as an unmarked linguistic trait. We can argue that such is the case because in certain North American varieties, we are witnessing the disappearance of the difference between tu and vous, which is seen as a simplification attributed to the influence of English (Chaudenson, 1998). As pointed out in the previous chapter, Peeters (2006) reported occurrences of tu in clinical communication with patients in France, which indicates that this phenomenon is not only typical of French-minority settings where contactinduced linguistic innovations are likely to take place. These results suggest that changes to the social meanings attributed to the second person singular pronoun address may be occurring within the Francophone Diaspora. Norrby and Warren (2006) hypothesized this change can be attributed to a shift from previously more static societies where roles were clearly defined, to societies characterized by social and occupational mobility which has thus increased closeness between social groups. The interview data indicate that certain participants do assign positive social meanings such as friendliness and warmth to informal forms of address uttered by a young nurse to an elderly patient. It was also revealed that for some participants the notion of respect is no longer attached to the use of a prescribed pronoun, but rather to the overall attitude the nurse displays towards her patient. This is reflected in the comments of this 71 year old Québec-born woman who has lived in Alberta for more than 35 years:

"Tu ou vous les deux sont respectueux — c'est le ton employé qui fait la différence. On peut manquer de respect avec le vous. Une infirmière qui dit : Levez-vous vieille folle, 'est pas ben ben respectueuse même s'il elle a utilisé le vous "

("Tu" or "vous", both are respectful – it's the tone of voice that makes the difference. You cannot be respectful and say "vous". A nurse who says, "Get up, you old bat" is not very respectful, even if she used "vous".)

Statistical analysis showed the only background variable that appeared to have an influence on judgments was language dominance. The interview data further substantiate this finding as participants who reported balanced bilingual skills provided overall more positive ratings to this speech prompt.

It thus appears that preference for a form of address is motivated by markedly different understanding of how respect and social distance ought to be linguistically displayed in a clinical setting. These findings have important repercussions for L2 learning because patterns of pronoun use are typically presented to L2 learners in reference or pedagogical grammars in terms of stable, monolithic systems in which *tu* implies familiarity and use of *vous* signals a certain distance, especially when it involves an unknown person or a person to whom respect is owed (van Compernolle, 2010). However, the analysis of the qualitative data proposes a more complex picture where the use of pronouns of address is negotiated between the patient and the nurse.

Because of the variability and range of potential social meanings associated with address practices in the target population, French L2 nurses may face challenges identifying which term of address to use in order to develop and maintain a positive bond with their French-speaking patients. Milroy and Milroy (1991) believe that in order to overcome these challenges, language teachers need

to help L2 learners better understand the social value and social meanings associated with forms of address, and thus equip them with the right linguistic tools to achieve the social meaning they wish to convey. They state that learners do not need to be provided with a new set of prescriptive rules; they rather need to develop the ability to make alternative choices according to situational contexts. In this regard, researchers such as Lyster (1993), Lemmerich (2010) and van Compernolle (2010) have proposed promising pedagogical approaches that aim to achieve these goals and break from the view that *vous* is always associated with respect and *tu* with familiarity. Their pedagogical approaches will be discussed in further details in the next chapter.

## 4.5.2 The second research question

Concerning the second research question regarding partipants' attitudes towards mildly marked informal and formal variants, quantitative and qualitative analyses suggest that participants judged favourably both formal and informal variants, with a slight preference for the mildly marked informal variants. The results reveal a picture of the participants that is more complex than what was first hypothesised. First, there were a number of participants who were not affected by the nurse's stylistic choices. This group is composed of the 5 oldest participants (90 and above), the 6 participants from the community of St-Isidore, a small French-speaking hamlet in the Peace River area, and two nurses from the Falher area. The older participants, who received daily nursing care, tended to judge the nurse in the speech samples by her nursing skills rather than her linguistic ability. Their expectations were met as long as the nurse showed that she was caring and

professional. The participants from St-Isidore, who are all French monolinguals, once had access to medical care in French in their community, but this is no longer the case. They now rely on their relatives to facilitate their interactions with health care professionals. When interviewed, they commented that they often feel ashamed or uncomfortable to have to rely on their children to get medical care, and would warmly welcome in their community any health care professional who would have minimal linguistic skills in French. The fact that they longed for health care services in French appears to minimise their linguistic expectations towards nursing students. The two nurses who rated the guises positively in all the conditions in which register variants were manipulated did so because, in their experience, French-speaking patients are always glad to be addressed in French regardless of the nurse's linguistic proficiency in French. Consequently, they believed that no matter how stylistically (in)appropriate a nurse may appear, it will not affect the relation with the patient or the quality of her nursing care. Thus, current reliance on health care services is an important background variable predicting minimal linguistic expectations, which explains the changes made to the model used to illustrate how background variables affect partipants' attitudes towards nurses' linguistic practices (see Figure 5).

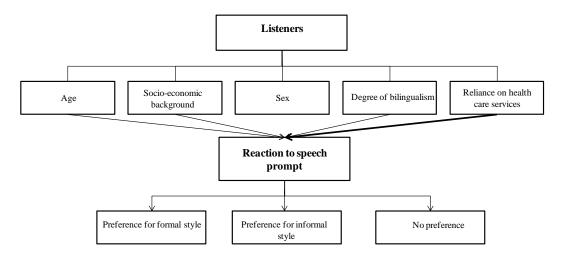


Figure 5. Revised model for illustrating how background variables affecting target population's attitudes towards nursing students' linguistic behaviour

The rest of the participants reacted to the nurse's choices of stylistic variants, and more specifically to lexical variants. A majority of participants attributed significantly lower values to formal variants on measures of social attractiveness, and conversely favoured the mildly marked informal variants. These results echo the findings of Segalowitz (1976) who found that French native speakers judged French L2 speakers belonging to the same age group as distant and uncooperative because of their use of too formal a register when taking part in a casual conversation. Thus, these results contradict Ryan and Giles (1982) and Valdman (2000) who argued that informal registers serve as powerful symbols of ethnic and cultural identity that native speakers may not want to share with L2 speakers. In addition, the results further indicate that address practices and stylistic variants operate under different sets of constraints. While the formal forms of address appear as the default feature, informal stylistic variants are the features that most likely offer the greatest linguistic payback. These results were to be expected as /l/ deletion, schwa deletion and ne deletion have been identified

in a number of studies as the default features in conversational French (see Etienne & Sax, 2006 and Gadet, 1997).

Factors such as age and linguistic dominance influenced participants' attitudes. The highest scores attributed to informal variants were found in participants between the ages of 70 and 90. The majority of them were born and grew up in Alberta, and claimed to have balanced linguistic abilities in French and English. They valued the joy and warmth that the nurses were perceived to bring to their interventions. A group composed of new retirees and members of the Faculty of Nursing, who are not Alberta-born but have lived in this province for most of their adult life, as well as two retired French teachers from Northern Alberta, held opposite views: they favoured the professionalism and competence the nurse displayed when she addressed her patient with formal variants. In light of these findings, we can conclude that when nursing care is available in French, age and degree of bilingualism does appear to have an influence on participants' perceptions and opinions of stylistic cues.

We can find explanations for the influence of such factors in McGroarty (2006) who states that there are "clear indications that the relationships between a person's linguistic and academic experience, the social context of instruction, and the results of formal language instruction have complex and reciprocal connections with each other" (p.4) that influence language attitudes. The educational situation for early bilinguals who were born and educated in a minority environment was much different from the educational setting of participants born and educated in a majority setting such as Québec or France.

The former group was educated at a time when French-speaking Albertans struggled for their rights to French-language education to be recognized. The objectives of French-language schools in Alberta focused primarily on Franco-Albertans' linguistic and cultural maintenance (Kermoal, 2003) whereas the objectives of French-majority language schools in Québec or France were the acquisition of literacy in French and the addition of prestige variants to pupils' existing linguistic repertoire in French (Milroy & Milroy, 1991). In other words, using Cummins (1979, 2000) bilingual proficiency constructs, early bilinguals in Alberta developed BICS skills in their family and community, but their CALP skills were only developed in English for those who attended school long enough. On the other hand, late bilinguals developed their CALP skills in French and thus valued more CALP oriented clinical interactions.

In addition, since "schools are one of the central arenas for the promotion of prescriptive norms or written language" (McGroarty, 2006, p.25), and since late bilinguals and retired French teachers spent significantly more time being exposed to normative views of the language through their schooling, they seem to have been more inclined to evaluate the spoken speech samples presented to them on the model of standard written language and thus attribute higher values to formal features. Milroy and Milroy (1991) state that in the prescriptive view there exists a strong compulsion to select only one form from a set of equivalent usages and elevate it to the status of the 'correct' form. For late bilinguals, mildly marked non-standard lexical items such as *bedaine* and *d'ssous d'bras* are not in line with their concept of 'correct' usage. To them, such words could be accepted in a

sentence addressed to a child. Therefore, when mildly marked variants are used by a nurse in an interaction with an older patient, she is perceived as being patronizing, condescending and highly unprofessional. The same words are clearly judged according to a different set of social norms by the early bilinguals, norms that seem to value solidarity and social proximity. Moreover, although people are assumed to have full passive competence in the standard (Milroy & Milroy, 1991), the reaction towards standard lexical variants found in the interview data indicate that this might not be the case for French speakers educated in a minority environment. Limited knowledge of formal variants could also explain why these features received low ratings in terms of social attractiveness from this group of participants.

The results of this study point to the potential social costs associated with inappropriate choice of linguistic variant in nurse-patient interactions. The implications of such findings are important because they indicate that FI graduates, due to their lack of contact with French native speakers and thus limited experience with non-academic and non-standard French (Auger, 2002; Genesee, 1987; Husum & Bryce, 1991; Lapkin et al., 1983; Van der Keilen, 1995) and their reported tendency to overuse formal variants (Beaulieu, 2007), may not possess the stylistic repertoire needed to offer linguistically appropriate nursing care to the target French-speaking senior population in Alberta. Hence, the results of this study provide empirical evidence in support of a call for a pedagogical intervention to expand the linguistic resources French immersion graduates currently possess. As Lemmerich (2010) points out, there is now a growing

consensus among second language scholars and teachers that in order to better equip language learners with the ability to use the target language in a variety of social settings, educational input should not only be limited to standard language features because they mainly reflect written language use. Since lexical variables were the features that appeared most salient to participants in this study, it seems appropriate to design a pedagogical intervention that first targets the teaching of the social meanings attached to the most frequently used lexical variants. How this can be done effectively is the next stage of the research project.

## 4.5.3 Third research question

It was anticipated that participants would display more positive attitudes towards the French L1 nurse because of the "in-group/out-group bias" which predicts that members of a group will generally tend to favour their own salient group (Tajfel, 1982). This hypothesis was clearly rejected. The questionnaire and interview data indicated that participants were well acquainted with FI students or FI graduates. All the participants reported knowing a minimum of 11 people who have attended or are attending a French immersion program, and the majority stated they know a minimum of 20. These FI students are found in their family (grandchildren, nephews) and are present in the social activities organised in the community. In the case of the health care professionals, FI graduates are their students or their interns. It appears then, that FI students have gained at least partial membership in the target community, and their speech – although recognized as not native-like – is well-accepted. This result could also be attributed to the fact that many patients stated that they would be thankful to

receive nursing care in French, even if the nurse had minimal linguistic competence in that language.

Evidence from the interview data reveals that in spite of attributing similar ratings to the French L1 and French L2 speech samples, participants did not always base their opinions on the same constructs. This was especially true for negative reactions towards standard variants. While the French L1 nurse was judged as being as 'uppity' and 'authoritative', the French L2 nurse appeared to participants as though speaking French was an ordeal for her and that she was less competent in French. These results indicate the importance of teaching mildly marked informal variants to advanced L2 learners so that their perceived fluency matches their level of competence in the language.

This chapter illustrates how language ideology vs. personal need, as well as institutional vs. sociological forces, all contribute to and influence the processes by which nurse-patient interactions are interpreted. Since the practice of nursing is moving toward a patient-centered model of care (Doss et al., 2011), the ability of L2 nurses to meet the linguistic expectations of their patient is even more crucial. The next chapter will focus in more detail on the pedagogical implications of the results reported in Chapters 3 and 4.

# **Chapter 5: Discussion**

The aim of this chapter is to discuss the larger pedagogical implications related to the findings reported in Chapters 3 and 4. This chapter starts with a call to adopt a sociolinguistically informed pedagogy in French L2 classrooms that are communicatively oriented. Then, arguments in favour of the pedagogical statusquo, a position that advocates the acquisition of the standard written norm in the L2 classroom will be addressed. Last, I will demonstrate how a sociolinguistically oriented pedagogy, based on Valdman's notion of pedagogical norm, can be adapted and implemented in a French L2 course for FI graduates specialising in nursing studies in Alberta.

# **5.** 1 Towards the adoption of a sociolinguistically informed French L2 pedagogy

As indicated by the results of Study 1,neither French-speaking nurses nor French-speaking patients in Alberta make much use of formal language variants in their interactions, a result that parallels the findings of a number of traditional sociolinguistic variationist studies both in monolingual (i.e., Ashby, 1984; Coveney, 1996) and bilingual settings (Mougeon & Beniak, 1991; Poplack & Walker, 1986). Congruent with these results is the observation discussed in Study 2 that French L1 and L2 nurses who used formal phonological, grammatical and lexical variants in their interactions were judged as cold and distant and received generally less favourable judgments, in terms of social attractiveness, from a majority of participants than nurses who used the local norm. These results resonate with those of Segalowitz (1976) who found that adolescent French L2 speakers were considered distant and uncooperative by French L1 learners of the

same age because of their use of formal features in casual talk. These findings point to the social costs associated with a limited ability to navigate the speech style continuum in real-life L2 interactions. In light of these results, it is clear that French L2 instruction, traditionally largely oriented towards the acquisition of the idealized written standard norm (Kramsch, 2002), should aim at the acquisition of a wider range of speech styles so as to embrace a broader view of communicative competence as promoted by Canale and Swain (1980), Bachman (1990) and Celce-Murcia (2007). Considering Ontario FI students' limited stylistic repertoire, Nadasdi et al. (2005) argue that a "reasonable goal for French immersion students to attain, and for French immersion teachers to promote, is productive knowledge of the middle points of the stylistic continuum and passive knowledge of the extreme points of this continuum" (p.554) so that students' French is more in line with French L1 speakers' norm. Although the results of the studies reported in this dissertation point to the same conclusions as Nadasdi et al. (2005), the justification is rather different and more empirically grounded: a pedagogical intervention targeting knowledge and use of stylistic variants is needed because it would allow FI graduates to meet the linguistic demands of the target community. Valdman's pedagogical norm, a data-driven approach to defining community norms and language attitudes, offers a sound pedagogical alternative to the ideal native speaker's norm. Adopting the notion of pedagogical norm would allow teachers and textbook designers to present language features within their sociolinguistic and situational contexts of use (what Gadet & Guérin, 2008 refer

to as *actualisations situées*). It would also offer LSP professionals a principled way to consider the needs of professional target communities.

# 5.1.1 The need to reconceptualise French as the object of acquisition in L2 pedagogy

Adopting Valdman's pedagogical norm would mean that French L2 practitioners "critically examine the deep-seated standardness of the pedagogical constructs of language and culture that undergird the teaching-learning endeavour in the classroom" (Train, 2003, p.18). To my knowledge, however, French L2 pedagogy has provided little space for a competing non-hierarchical ideology that would better reflect what French is, in all its forms.

Although (standard) French is a highly normative language, it is not homogeneous. In spite of relentless prescriptive efforts, French has evolved through time under the influences of geographical, societal and situational factors which have affected its lexical, morpho-syntactical and phonological characteristics (Gadet, 2003). The standard, the product of the standardization process, is one of the many socio-stylistic realizations that French can take. Other varieties of French exist, mainly in its spoken forms (and increasingly now in informal writing genres found in electronic communication). In fact, Guérin (2011) argues that French is a language that covers all domains of the linguistic market. Thus, according to her, "(p)rétendre enseigner le français signifie donc tendre à la transmission de savoirs relatifs à un objet dynamique, évolutif, nécessairement hétérogène" (p.139) (To claim teaching French thus means to target the transmission of knowledge related to a dynamic, evolving and necessarily heterogeneous object). This heterogeneity is what sociolinguists

observe, describe and analyze. The empirical findings proposed by sociolinguists should in fact be the object of acquisition in the L2 classroom, if the goal of instruction is to prepare L2 learners to become effective and successful L2 users.

Failing to recognize the legitimacy of French features atypical of prescriptive usage reduces L2 instruction to the teaching of word phonology, morphology, syntax and "denotative word meaning rather than associative word meaning (consisting of connotations and stylistic properties)" more typical of written usage (Dewaele, 2007, 231). These objectives might be valid for people interested in learning languages with the sole intention of understanding the famous literary works of the target language (Spolsky, 2002). However, Joseph (1988) believes that focusing solely on the standard variety is inconsistent with the goals of current communicative language teaching approaches that favour interaction and authentic communication. Valdman (1992) agrees with this position, arguing that limiting teaching to standard features is misleading to students, as they will rarely be exposed to these forms in authentic oral texts.

After all, the standard in an idealization: there does not exist a speaker of purely standard French (Gadet, 1992, p. 22).

In addition, the standard, contrary to popular belief (Auger, 2009), has no *inherent* linguistic advantages or qualities over so-called non-standard varieties. In fact, these non-standard varieties make use of the same word classes as the standard variety in just as systematic a way. The main linguistic difference between them is that non-standard varieties tend towards optimization and homogeneity of the linguistic system (Leclerc, 1989). The prestige ascribed to the

standard forms stems from culture-bound stereotypes perpetuated by prescriptive grammarians passed on from one generation of speakers to the next (Bourhis, 1982). In fact, Milroy and Milroy (1991) argue that today's guardians of the language

"have often lost sight of the fact that such [prescriptive] 'rules' are only guidelines (sometimes outdated ones) for efficient communication in writing and in the most careful kind of speaking. Narrow and uncritical application of such rules may reduce potential for effective communication, especially in conversation and at less formal levels of usage" (p.263-264).

In that sense, Koch & Oesterreicher (2001 cited in Guérin, 2006) offer French L2 teachers an alternative to distance themselves from the ideology of the standard and notions of correctness and purity. They propose a model which highlights domains of importance for the written code and thus the standard variety: the greater the (temporal, spatial and social) communicative distance between interlocutors, the more the standard appears as the most valid variety to use (see Figure 6).

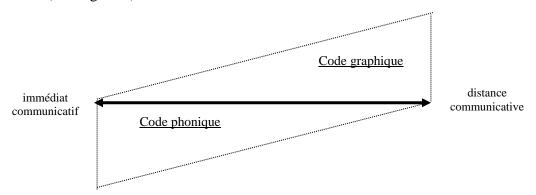


Figure 6. Model for selection of language code according to Koch & Oesterreicher, 2001

Koch & Oesterreicher's (2001) model also offers an overview of the characteristics that shape communicative events occurring at both ends of the communicative continuum (see Table 21). According to their model, communicative situations that take place in an immediate temporal, spatial and

social distance are more intimate and interactive in nature while communicative acts occurring within a greater distance are more neutral and are typical of public domains.

Table 21. Koch & Oesterreicher's (2001) communicational parameters

Tendency to Communicational	Tendency to Communicational	
Immediacy	Distance	
Private Communication	Public Communication	
Dialogue Partner Who is Close	Unknown Dialogue Partner	
Strong Emotionality	Weak Emotionality	
Behavioural and Situational Anchorage	Behavioural and Situational	
Referential Anchorage in the Situation	Detachment	
Intense Communicative Cooperation	Referential Detachment of the Situation	
Dialogue	Minimal Communicative Cooperation	
	Monologue	

This model and its parameters could serve as a useful guide to L2 instructors to situate the domains of use of standard features in an informed, unbiased way. It also reveals that teaching an L2 solely based on formal usage might not be sufficient because it disregards important domains of language use. Casual and emotionally-loaded situations require the use of vernacular or informal usage, i.e., contexts of use in which so-called non-standard linguistic features are common and accepted if not expected. As Pohl (1975) points out, "il y a des cas où parler trop bien le français, c'est un peu le parler mal" (p.23) (There are instances when speaking French too well, is almost speaking it badly). The notion of 'bon français' then takes a new meaning within this model. Rather than being equated with prescriptive usage, it refers to the type(s) of French that will increase the likelihood of successful communication in target situations. Within this model, informal and formal features are part of a dynamic and heterogeneous linguistic system and are recognised as equals. The use of a given set of stylistic

variants is not arbitrarily motivated but responds to the communicative demands and situational constraints of naturally occurring speech events.

Using the findings from Study 1, we could then predict the presence of certain socio-stylistic features in Alberta French in reference to Koch & Oesterreicher's model (Table 22).

Table 22. Koch & Oesterreicher's model adapted to Alberta French

	immédiat communicatif	distance communicative
Phonological features		
<ul> <li>/l/ deletion</li> </ul>	+	-
<ul> <li>Schwa deletion</li> </ul>	+	+/-
<ul> <li>Moé / toé</li> </ul>	+	-
Grammatical features		
<ul> <li>Ne deletion</li> </ul>	+	+/-
<ul> <li>Auxiliary avoir</li> </ul>	+	-
<ul> <li>M'as, je vas</li> </ul>	+	-
Lexical features		
• On	+	-
<ul> <li>Rien que / juste</li> </ul>	+	-
<ul> <li>Calques</li> </ul>	+	-
<ul> <li>English borrowings</li> </ul>	+	-

One of the benefits of situating French within its socio-cultural and communicational contexts is that it allows learners to develop knowledge that will have social meanings beyond the L2 classroom. In addition, in a sociolinguistically-anchored pedagogy, all linguistic practices, including those typical of French contact varieties which have long been stigmatised by monolingual speakers of French (Beniak et al., 1984), can become the object of acquisition provided that they are relevant in the target situations. This ideology is thus well suited for language minority settings.

In spite of its potential benefits for French L2 pedagogy, I anticipate that a shift from a pedagogical practice highly governed by the ideology of the standard to one based on answering the practical sociolinguistic demands of the target communicative situations will face resistance from teachers. As Prćić (2010) points out, language teachers feel a certain pride in their role of 'rule enforcer' and think it is their most important duty to sternly pinpoint 'incorrect' uses of spelling, pronunciation, grammar and vocabulary in the classroom. The ideology of the standard is well rooted in their pedagogical practices (Gadet & Guérin, 2008; Milroy & Milroy, 1991; Siskin, 2007) (Féral, 2011 refers to this phenomenon as 'surdité normative') and thus needs to be examined and challenged if we want to see the implementation of a sociolinguistically informed L2 pedagogy to take place.

# 5.1.2 French L2 teachers' resistance to teaching sociolinguistic variation phenomena

There are a number of reasons that might prevent French L2 teachers from introducing stylistic variation to their learners (Auger, 2002; Etienne & Sax, 2009). I will address each of these reasons and propose pedagogical practices to overcome them.

#### 5.1.2.1 The apprenticeship of observation

Research has demonstrated that student teachers are strongly influenced by their 'apprenticeship of observation' (a term coined by Lortie, 1975): years spent in a classroom as a learner-observer. Pre-service teachers' pedagogical decisions and practices are largely informed by their own experiences as students. If these beliefs are unchallenged, the apprenticeship of observation serves to reproduce

traditions at the expense of reflective and informed change (Schempp, 1987). Given the number of years being exposed to normative views of the language in schools and the social value attributed to the standard variety in the society at large, French L2 teachers tend not to question the appropriateness of the standard as the ideal target for acquisition (Gadet & Guérin, 2008).

Borg (1999) states that teacher education has the potential to strongly influence teachers' practices. To overcome the assumption from the apprenticeship of observation, teacher training focusing on basic concepts of sociolinguistics (i.e., the grammar of spoken varieties of a language, the distinction between linguistic vs. social value of variety, the arbitrariness of social prestige attributed to certain linguistic features), the notion of stylistic continuum (i.e., every native speaker possesses more than one speech style, the importance of adapting one's style to the degree of formality of the situation) and Koch & Oesterreicher's (2001) model of communicative continuum could help future teachers question their apprenticeship of observation and their bias towards an idealized French variety deprived of variation<sup>38</sup>.

# 5.1.2.2 Non-standard features are associated with stigmatised varieties of French

As discussed in Chapter 3, Auger (2002) and Etienne and Sax (2009) observe that informal features are often equated with "working class" French and are consequently perceived as fautifs (incorrect) (Gadet, 1992). This belief may be

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from mentors and availability of pedagogical resources.

<sup>&</sup>lt;sup>38</sup> Ogilvie & Dunn (2010) demonstrated that teacher training has the potential to challenge preservice teachers' apprenticeship of observation. In their case, however, the new sets of pedagogical beliefs did not translate to actual changes in teaching practices due to lack of support

due to the fact that "la classification des grammaires confond niveau stylistique et niveau social, et d'une grammaire à l'autre, les même formes sont taxées de populaires, familières, relâchées, vulgaires, ces termes pouvant de plus être modifiés par un *très*" (the classification found in reference grammars confuses stylistic and social factors, and from grammar to another, terms may be modified with a *very*.) (Gadet, 1992, p. 23). Thus, all informal features, even those found regularly in the speech of educated native speakers, appear to be negatively perceived, which in turn makes teachers reluctant to introduce those forms as formal objects of study (Etienne &Sax, 2009). This may also be attributed to the fact that there exists a confusion between written and spoken norms (Gadet & Guérin, 2008).

As Gadet (1992, 1997), Etienne & Sax (2006) and Auger (2009) have argued, some informal variants are used as 'default' features in many, if not all, French L1 communities and present no or little social marking. They could therefore easily be introduced to learners. A list of these features follows:

#### 5.1.2.2.1 *Ne deletion*

While in standard French the notion of negation is expressed with two elements, preverbal *ne* and post-verbal negator (eg.: *ne...pas*, *ne...jamais*, *ne...personne*), in more casual spoken interactions the preverbal particle *ne* is often omitted (eg.: *c'est pas vrai*) (Gadet, 1992). This phenomenon has been documented in a large number of sociolinguistic variationist studies focusing on a spoken variety of European French (Ashby, 1984; Coveney 1996; Fonseca-Greber 2007; Hansen & Malderez, 2004) and Canadian French (Poplak & St-Amand,

2007; Sankoff & Vincent 1977). Even though these studies have revealed differences in overall rates of deletion (omission of *ne* is quasi categorical in Canadian French, 99.5% in Sankoff and Vincent (1977) and 99.8% in Poplack and St-Amand (2007), they indicate that the omission of *ne* is widespread and not socially marked.

### 5.1.2.2.2 *Question formation – inversion and est-ce que*

Question formation is another grammatical variable where stylistic variation occurs (Gadet, 1992). Interrogative structures can be divided into two types: total interrogatives (i.e. yes-no questions) and partial interrogatives (open-ended questions) (Gadet, 1992). While inversion (Vient-il? D'où vient-il?) is the variant prescribed in normative grammars to form both types of questions, it is not the variant that are most used in native-speakers' oral usage. In fact, questions formed with expression est-ce que (Est-ce qu'il vient? D'où est-ce qu'il vient?) or rising intonation (Il vient? D'où il vient?) are the preferred variants, with rising intonation being more prominent (Désirat & Hordé, 1988, Gadet, 1992; Picard, 2002). In a study investigating L1 speech directed at L2 speakers, Painchaud, d'Anglejan & Vincent (cited in Lightbown & d'Anglejan, 1985) found higher occurrences of questions formed with est-ce que than rising uninverted questions. Valdman (2000) believes that since the latter structures follow the more natural SVO structure and since they are so prevalent in authentic speech, they should be introduced first to learners.

### 5.1.2.2.3 On

The notion of first person plural is another grammatical variable that has two variants: *on* and *nous*. The use of *on* as the preferred variant in spoken French has been noted in descriptive grammars (Hawkins, 2001). Its use is so prevalent that even prescriptive grammars do not offer value judgments on its use: "Sans aucune nuance particulière, 'on' s'emploie souvent à la place de 'nous' dans le français oral familier" (Without any particular nuance, *on* is often used instead of *nous* in familiar oral French) (Grevisse, 2008, 213). The widespread preference for *on* over *nous* has also been documented by Laberge (1977) in a Montreal French corpus as well as by Coveney (2000) in European French<sup>39</sup>. Nadasdi et al. (2005) argued that the acquisition of *on* should occur before the acquisition of *nous* because it would "allow learners to master a more regularized system before coming to grips with a more complex one as [...] as the verb forms used with the former are unmarked, whereas those used with *nous* are irregular (e.g., *nous mange* + -ons versus on mange)" (p.558)

#### 5.1.2.2.4 Schwa deletion

Variation also occurs at the phonological level. The mid vowel  $/\partial$  /, known as schwa, may or may not be omitted in certain linguistic contexts. As seen in Chapter 4, there are two contexts schwa is obligatorily deleted. The first context is in word or phrase finals (e.g..: *épaul'*, *mal de têt'*). The second context is when, within a word or phrase, schwa is preceded by a single consonant and is followed by no more than one consonant (eg.:*sam'di*). When this same context is found in

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<sup>&</sup>lt;sup>39</sup> On was found in 98% of first person plural pronoun contexts in Montreal French and 96% of contexts in European French.

the first syllable of a word or phrase schwa deletion may or may not occur (eg.:genou or g'nou; je veux or j'veux). Variation is rather frequent with these nine monosyllable words: je, me, te, se, ce, le, ne, de and que (Gadet, 1992). It has been observed that schwa deletion in certain contexts triggers another phonological phenomenon, known as voicing assimilation (i.e., when voiced consonants become voiceless when they are followed by other voiceless consonants, je pense = ch'pense). High frequencies of schwa deletion (65%) have been found in the speech of French-speaking Ontarians engaged in a semi-directed taped interview (Mougeon et al., 2002), a communicative task used in sociolinguistic variationist studies to gather samples of authentic speech from native speakers (Tagliamonte, 2006).

# 5.1.2.2.5 /l/ deletion in 3rd person subject pronouns

Auger (2009) and Etienne & Sax (2006) argue that /l/ deletion in 3<sup>rd</sup> person subject pronouns is another phonological feature that is widely used by French L1 speakers that is not stigmatised (e.g.: *I' fait beau aujourd'hui*). Frequent /l/ deletion is observed in 3<sup>rd</sup> person subject pronouns in a number of sociolinguistic variationist studies such as Sankoff and Cedergren (1976) in Montréal, and Ashby (1984) in Tours, France, Poplack and Walker (1986) in Ottawa-Hull, and Armstrong (1996) in Lorraine, France. These studies have revealed that although higher deletion rates are found in Canadian French varieties, the same trends are observed across all varieties which suggest that linguistic constraints are operating systematically across all of these communities. It was found that /l/ deletion is very nearly categorical in the impersonal pronoun *il*. While very high /l/ deletion

rates are also found in pre-consonantal masculine subject pronouns il and ils (e.g.: I' veut pas), /l/ non-use is not as categorical in the pre-vocalic position (e.g.: Il aime). Armstrong (1996) states that due to a lower usage of the feminine subject pronouns elle and elles, trends are harder to define. Sankoff and Cedergren (1976) observed that /l/ deletion in the subject pronoun elle may sometimes trigger a phonological change in the vowel from /ɛ/ to /a/ in pre-consonantal contexts (e.g.: A' pas ben faite c in the speech of speakers from lower socioeconomic background. This phenomenon has thus more social marking.

It is believed that phonological informal features are those that pose the greater challenge for L2 learners who have only been exposed to French in the classroom because French is considered to be one of the languages that offer the greatest phonological gap between its standard written variety and its non-standard spoken ones (Joseph, 1988; Lodge, 1991). It thus seems logical to exposes students to variants that are highly frequent and mildly to not socially marked and introduce the kind of phonological transformations that may accompany them. Indeed, certain common and useful phrases undergo phonological and syntactical radical changes in informal speech (eg.:  $je ne sais pas \rightarrow chépa$ ) which may become unintelligible to L2 learners who have never been introduced to common and frequent sociolinguistic variants. One helpful technique to help students become aware of such changes might be to draw parallels with other examples where the written and spoken systems differ. For example, students know that a word like beaucoup only has four phonemes. It is

thus common for one not to pronounce written letters; as such, they should better understand that the /l/ in 'il faut' may also be silent.

### 5.1.2.3 The standard increases social mobility

Auger (2002) states that teachers often favour the teaching of formal standard features because they are believed to promote social mobility and economic advancement. Roy (2003) has indeed demonstrated that incomplete active knowledge of the standard French Canadian variety prevented Frenchspeaking Ontarians from getting access to bilingual positions in a call centre. However, as I have demonstrated in Chapter 3, this situation may not be generalizable to all domains of employment or all communicative encounters within a domain of employment. I have demonstrated that for L2 nurses, the ability to navigate the speech style continuum in terms of receptive and productive skills is a necessity. Other domains of employment in the global market also appear to require workers to be socio-stylistically flexible. Myles (2009) identified the type and range of communicative activities found in a large computer software company which employs considerable numbers of English L2 speakers. He found that oral and computer mediated communication predominated amongst coworkers in this work environment. He demonstrated that for L2 speakers to be successful within this company, they need to not only possess knowledge of technical computer language, but they also need to use and understand colloquial language, cultural connotations and different speech styles to successfully engage in face-to-face and computer-mediated interactions. In short, although the assumption that the standard language increases social

mobility might be valid for monolingual societies, bilingual workers who want to increase their chances of successfully integrating the global linguistic market do need knowledge of the standard, but they most importantly need to be stylistically flexible in their L1 and L2.

# 5.1.2.4 Informal features are identity markers that belong to native speakers

It is believed that French L2 teachers, as pointed out by Ryan and Giles (1982), may regard informal features as powerful symbols of ethnic and cultural identity that cannot be shared with L2 learners. They expect L2 speakers using informal features to be judged negatively or to be ridiculed. This position is challenged by the results of Study 2 reported in Chapter 4 as native-speakers treated French L1 and French L2 non-standard usage similarly. Moreover, the results of Segalowitz (1976) (discussed at the beginning of this chapter) also contradict this belief. French L2 speakers who used standard language in a casual conversation with native speakers of the same age were judged negatively on the basis of their language use. More studies need to be conducted in a variety of communication contexts to empirically validate the extent to which L2 learners' use of informal features is accepted by L1 speakers. In addition, further studies should investigate the notion of *language crossing* in advanced French L2 learners (i.e, the practice of using a language variety that belongs to another group) (Rampton, 2005). This concept regards the decision to borrow or not the sociolinguistic practices of another group as an expression of identity. Rampton (2005) found that crossing is not an 'all or nothing' phenomenon, one's sense of

self, constructed from life experiences and aspirations for the future, influences how and when the act of crossing takes place.

# 5.1.2.5 Stylistic variation is too complex a phenomenon to be addressed in the L2 classroom

Etienne and Sax (2009) report that L2 teachers avoid addressing stylistic variation in the classroom because they feel there is not enough time to address this complex aspect of communicative competence. Teachers also feel that the subtleties of stylistic variation may be too confusing and overwhelming to L2 learners. For these reasons, they rather focus their limited classroom time to the acquisition of denotative meaning of grammatical and lexical features.

However, Lyster & Rebuffot (2002, p.68) argue that the more a linguistic feature is variable in native speakers' speech, the more explicit instruction students need in order to understand not only its grammatical or lexical meaning, but also its sociolinguistic connotation and its impact on communication. Using Larsen-Freeman (1991) three-dimensional form-focused instruction framework (see Figure 7) could help L2 teachers guide their learners towards the acquisition of form, meaning and use of target features.

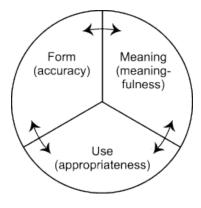


Figure 7. Larsen-Freeman (1991) three-dimensional grammar framework

This model highlights the fact that the three dimensions are interdependent; a change in one may result in change in another (e.g. negative statements uttered in formal witing in French (use) are formed with a preverbal negator *ne* and a postverbal one such as *pas* or *jamais* (form). When the context of use changes to a more informal one, *ne* is dropped). In addition to that model, adopting Valdman's pedagogical norm would allow L2 instructors to identify and sequence their learning objectives in terms of stylistic variation in an informed way.

Moreover, it appears that avoiding introducing stylistic variation fails to address a need expressed by learners. There is evidence that L2 students hope for instruction that would increase their knowledge of informal features and their overall sociolinguistic competence to facilitate real-life communication in their L2 (Durán & McCool, 2003; Hart et al., 1989; Tarone & Swain, 1995). Informal variants are part of a larger linguistic system and their acquisition is not cognitively more demanding than the acquisition of standard variants. In fact, spoken varieties may pose fewer challenges to learners: accurate use of standard features and structures often require knowledge of an extensive list of exceptions which spoken usage tend to eliminate or simplify (Leclerc, 1989). Further studies should be conducted to validate this hypothesis.

## 5.1.2.6 Form-focused instruction and stylistic variation

Auger (2002) argued that even L2 teachers who have positive attitudes towards the teaching of variation face challenges: there are few pedagogical tools in French L2 available for them.

In Chapter 2, I reviewed the studies that have questioned the sociolinguistic authenticity of French L2 textbooks. These studies revealed that linguistic features selected to portray spoken interactions rarely match the degree of informality of the situation and that informal features are underrepresented in spite of their widespread presence in native-speaker usage (Etienne & Sax, 2009; Mougeon et al., 2010). This practice contradicts the objectives stated in the preface of these books, namely the development of oral proficiency and L2 practice in context.

Mougeon et al. (2010) highlighted the role exposure plays in the acquisition of sociolinguistic variants. They demonstrated that FI students' use of formal and mildly marked informal variants matches almost exactly the frequency of use of these variants in their educational input. However, exposure alone may not suffice to promote acquisition of stylistic variation. Dewaele's (2007) review of L2 learners' sociolinguistic competence revealed that learners' use of mildly-marked informal variants greatly increases when such learners have significant contacts with French L1 speakers, through study abroad programs, for example. However, the acquisition of the informal variant is often at the expense of the formal variant which is no longer used even when the communicative would require its presence. This observation indicates that L2 users may not have understood the social value of the various stylistic variants present in French. These results suggest that frequent exposure may not suffice to promote the development of sociolinguistic competence. Moreover, research in pragmatics (for an overview, see Kasper & Rose, 2001 and Ishihara, 2010) also suggests that L2 learners may not notice

features in the input which would facilitate comprehension, production and learning of second language pragmatic information, which further indicates that explicit instruction is needed.

Evidence from classroom-based research has demonstrated that instructed L2 learners can improve their knowledge of stylistic variation when instruction targets the spoken norms of the target language. Lyster (1993) designed pedagogical materials for grade 8 immersion students consisting of activities demonstrating to students how language varies according to social context; these activities were then followed by production activities requiring students to make appropriate socio-stylistic choices. The results indicate that a functional-analytic pedagogical intervention can help increase students' ability to understand the distinction between tu and vous, and in turn use those pronouns more appropriately in their respective contexts of use. Lemmerich (2010) also targeted the acquisition of the second person address pronouns with American university students in a beginner level German course. Her pedagogical intervention, similar to that of Lyster (1993), consisted of tasks designed to raise participants' awareness of the use of the target features and role-playing activities with German native speakers. Her results also indicated that students increased their ability to understand and use German second person address pronouns.

To my knowledge, no empirical studies have tested the effectiveness of a pedagogical treatment focusing on other grammatical, phonological or lexical sociolinguistic variants. More research in this area is clearly needed, especially given the structural and phonological distance between written and spoken French

(Lodge, 1991). However, it is important to note that informal stylistic variants are usually embedded in rapid connected speech which includes different phonological phenomena such as liaison (i.e., pronunciation of a silent final of a word consonant when the following word starts with a vowel), elision (i.e., the elimination or dropping of phonemes) and intrusion (i.e., a phenomenon opposite of elision which involves the insertion of phonemes within or between words, e.g., *ch't'allée*) (Brown & Kondo-Brown, 2006). Language training on stylistic variants should therefore be incorporated within lessons focusing on the acquisition of connected speech and spoken CALP. Although research on connected speech is scarce, Brown and Hilferty (2007) implemented a 4-week treatment focussing on reduced forms that improved L2 learners' listening comprehensions skills.

Although French L2 teachers and textbook designers may have initial ideological and practical reservations towards promoting the acquisition of informal features, they should reflect on their language ideology, pedagogical practices and on the impact they might have on French L2 users. In light of the factors reviewed above, it appears that prescriptive textbooks might not provide all of the linguistic resources French L2 users need to move in and out of various codes and modes of meaning in today's global linguistic market as this academically successful French-major American student studying in France shares: "I found my language preparation highly inadequate in certain contexts. I had no difficulty understanding my instructors, but my comprehension of French radio, television, films, popular songs, and people on the street often fell woefully

short" (Dúran & McCool, 2003, p. 288). It thus appears important to offer French L2 students a better access to a wider range of styles. This could be done by introducing the most frequent mildly marked non-standard features found in real-world contexts where students will they put their knowledge of French into receptive and productive use. Understanding of these features could be promoted with the help of explicit, guided attention.

Now that the arguments against the teaching of stylistic variation have been addressed, let us consider what a French L2 classroom for FI graduates specialising in nursing studies would look like if a sociolinguistically informed pedagogy, based on Valdman's notion of pedagogical norm, were implemented.

## 5.2 The implementation of a sociolinguistically informed French L2 pedagogy

The two studies reported in Chapters 3 and 4 were conducted to meet the first two criteria proposed by Valdman, namely the sociolinguistic and epilinguistic criteria, for the elaboration of a pedagogical norm intended for post-immersion nursing students registered in a bilingual degree in Alberta. Let us elaborate on how the results of these findings can be used in the classroom within the overall discussion of Valdman's third criterion: the acquisition criterion.

The acquisition criterion was not addressed in this research given that this criterion is primarily concerned with the sequencing of target variables to facilitate learning in the early stages of acquisition. This criterion, as introduced by Valdman, appeared ill-fitted for advanced learners such as FI graduates.

Nonetheless, these students face important learning challenges, as they heavily rely on automatized non-native like structures for communication in their L2

(Ranta & Lyster, 2007). The acquisitional criterion is thus important, not in the sense initially proposed by Valdman but rather with a focus on the type of instruction that will allow these learners to restructure their interlanguage and develop automatic processing of colloquial speech. In other words, rather than focusing on 'when' to introduce the target features as Valdman proposes, I will shift the focus of this criterion to address 'how' to teach FI graduates.

Language learners' interlanguage is characterized by its permeability and transitional nature (Ellis & Barkhuizen, 2005). It is a system that is incomplete and unstable which learners restructure as they move along language learning stages. It has been argued that after initial gains made in French, immersion students' interlanguage stops developing and stabilizes into a speech governed by negative transfer strategies (e.g.: \*Je suis vingt ans), overgeneralization (or simplification) of rules (e.g. le poulet rote\* dans le four- instead of rôtit), and overgeneralization of target language materials (e.g. Je \*ne sais pas) (Lyster, 1987; Nadasdi et al., 2005). Indeed, immersion students' interlanguage seems to lose its transitional nature as non-native like structures make their way into and remain in their speech. Selinker and Lamendella (1979) suggest that fossilization is likely to occur when students feel that their grammar is adequate to serve their needs and it therefore ceases to evolve towards target language norms. Since FI students are enrolled in content-based instruction, the focus of classroom interactions is primarily about meaning and students can successfully participate in discussion with incomplete and inaccurate language forms (Lyster, 2007). Moreover, it has been suggested that extended negotiation between L2 learners

who share the same L1 is not likely to happen. As Han (2002) states "they have highly homogeneous ways of conceptualizing and verbalizing their life experiences" (p.3) which in turn allows them to easily derive meaning from grammatically, lexically and stylistically inacurrate messages. A number of studies investigating the use of corrective feedback in content-based and immersion classrooms reveal that teachers prefer to use implicit types of reformulative feedback which are not only seldomly noticed by students, but they also leave little opportunity for uptake or self-repair (Lyster, 2007). In other words, instruction time in the immersion classroom is not designed to encourage these learners to move beyond their current level of competence (Swain, 1985). Moreover, it is unlikely FI students experience the need to restructure their interlanguage as classroom communication takes places with little negative feedback from peers and their teachers. Under these conditions, FI students become effective at getting their meaning across using communication strategies rather than grammatically accurate forms (Lyster, 2007), what Skehan (1996) refers to as undesirable fluency.

To my knowledge, only Ranta and Lyster (2007) have recognised that given the nature of French immersion students' interlanguage system, there is a need to revisit traditional pedagogical practices designed to promote either accuracy or fluency of new target features. To promote accurate fluency of pre-existing nonnative like structures, they rather propose a three-phase approach called the *Awareness-Practice-Feedback* sequence. In the initial awareness phase, learners engage in activities that help them notice the formal properties of the target

feature. They are not required to use the form productively; their attentional resources are rather directed towards the development of explicit knowledge and the creation of form-meaning associations. Consciousness-raising tasks (i.e., Fotos & Ellis, 1991) and structured input activities (VanPatten, 1996) are examples of activities that can be used during the awareness phase. Their design should be informed by the results of the study reported in Chapter 3 which determined the nature of nurse-patient interactions and the stylistic features used to perform them. Learners engaged in the awareness phase would gain insights into what stylistic variation is. In the second phase, the practice phase, students are asked to creatively apply the knowledge acquired in the previous phase in communicative contexts. This intense and highly targeted type of meaningful communicative practice aims at 'fluent accuracy', where the interlanguage feature is replaced with the target native-like one. Communicative drills and Dictogloss are types of activities that promote the type of intense and systematic practice needed for FI students to restructure their interlanguage and automatize nativelike structures. The results of the verbal guise experiment discussed in Chapter 4 should guide the selection of target features (e.g., the use of *vous*, the productive use of *ne* deletion). The last phase involves the provision of corrective feedback to reinforce the form-meaning associations created in the awareness phase and push learners to notice and repair non target like productions. It would appear that corrective feedback in forms of 'prompts' push learners to produce language that is more precise. Recasts can be effective provided that students are able to tell them apart from non-corrective repetitions. Allowing students a turn in which

they can attempt to self-repair appears, however, crucial for interlanguage restructuring to take place. In light of the results of Study 1 and Study 2, adaptation of the Awareness-Practice-Feedback sequence should focus on the promotion of receptive knowledge of stylistic variation, but also on awareness of the social consequences of stylistic choices students make in their own production.

An action research study Beaulieu and Gosselin (2011) undertook using the Awareness-Practice-Feedback sequence in a writing class with FI graduates (n=9) clearly indicates the potential of this type of instruction for this group of learners. The students received five hours of instruction following Ranta and Lyster's (2007) Awareness-Practice-Feedback approach targeting the acquisition of the passive voice, a form that is often used in nursing communication (Polit & Tatano Beck, 2004). Students were also given a pretest, a post-test when the treatment ended, and a delayed post-test followed 8 weeks later. There were two tasks used as pretest and post-tests: a translation task and a semi-directed production. The results on the tests were compared and revealed that substantial gains were made by all students on the acquisition of passive voice. The class average on the translation task went from 30% to 41% after the treatment ended, to 81% eight weeks after students had practiced the form. Accuracy level also improved on the semi-directed production task, with an average 67.4% before treatment, 69.5% after treatment and 100% on the delayed post-test. It is hypothesised that the Awareness-Practice-Feedback approach could also be effective for the teaching of stylistic variation. This sequence underlies the pedagogical treatments that have

proven successful for Lyster (1993) and Lemmerich (2010) in the acquisition of second person address pronouns.

Since exposure does not suffice to promote native-like usage of target stylistic variants (Dewaele, 2007), explicit instruction is needed to help learners make appropriate choices regarding the use of these features. FI students' interlanguage seems, however, resistant to traditional form-focused pedagogical intervention that focuses on written fill-in-the-blanks exercices (Beaulieu & Gosselin, 2011). Ranta and Lyster (2007) offer a pedagogical approach that has the potential to overcome these challenges and thus allow the successful implementation of a sociolinguistically informed pedagogy, based on Valdman's notion of pedagogical norm.

In light of the issues discussed in this chapter, it appears crucial that L2 instruction targeting FI graduates be, on the one hand sociolinguistically grounded so as to carefully select the target features, and on the other hand, psycholinguistically informed so as to choose the right teaching practices that will allow learning to take place and transfer of this knowledge to target situations to take place.

# **Chapter 6: Conclusion**

The two studies reported in Chapters 3 and 4 were designed to identify which features should be selected for the elaboration of a pedagogical norm that would meet the needs of post-immersion nursing students in Western Canada. These studies were undertaken because nurse-patient interaction research has shown that patients' health is improved when they are treated in their L1 (Bowen, 2001). In Canada, many minority language groups, such as francophones outside Québec, have limited access to health care services in their L1. In an effort to address this issue, a bilingual Bachelor of Science in nursing was created at the University of Alberta. Since its implementation in 2004, this program has recruited a majority of FI graduates. In spite of their linguistic weaknesses in terms of productive skills and sociolinguistic competence, these students generally meet the criteria for admission in the bilingual nursing program. Research investigating the experience of L2 nursing students has demonstrated, however, that meeting the language requirement for entry in a university does not guarantee success in clinical settings (Choi, 2005). In fact, these studies have shown that L2 nursing students face many communication challenges in the workplace ranging from difficulty in understanding patients' colloquial speech to problems explaining procedures and offering reassurance to patients (i.e., problems related to their limited sociolinguistic competence). These results are not surprising given that L2 instruction traditionally targets the acquisition of the standard norm of the target language (Kramsch, 2002, Rehner & Mougeon, 2003). To integrate a larger range of stylistic features in L2 teaching materials, Valdman

(1976, 2000) proposes the concept of *pedagogical norm* which is created from the target community members' observable linguistic behaviour and their linguistic expectations towards L2 users.

Through a sociolinguistic variationist analysis of a corpus consisting of French-speaking nurses and patients clinical interactions in Alberta, I aimed to determine the stylistic norm used by the target population and thus identified the speech style(s) that post-immersion nursing students would be exposed to hear in their clinical placements and future job appointments. The results of my research revealed that neither French-speaking nurses nor French-speaking patients make much use of formal language features in their interactions. Then, a verbal guise experiment was carried out to identify target community members' attitudes towards French L1 and L2 linguistic usage. Accordingly, I asked 53 Frenchspeaking community members to listen to a series of interactions in which nurses addressed a French-speaking patient a) with formal or informal forms of address and b) using either formal (representative of prescriptive usage and the norm promoted in French L2 textbooks) or mildly-marked informal phonological, grammatical and lexical variants (which represents the local norm). Participants rated on a 5-point Likert scale the effectiveness and acceptability of the interactions. Interviews, conducted on a voluntary basis, followed to shed light on the participants' reactions. The results indicated that post-immersion nurses who used formal variants forms in their interactions were judged as cold and distant and received generally less favourable judgments from the majority of participants than post-immersion nurses who used the local norm. In addition,

post-immersion nurses addressing their patient using formal phonological, grammatical and lexical variants were also perceived as less proficient speakers of French by participants. The results of both these studies point to the importance for nurses practicing in their L2 to be stylistically flexible in terms of receptive and productive skills if they wish to offer linguistically appropriate nursing care to the French-speaking minority population in Western Canada.

### **6.1 Contributions**

This dissertation brings together qualitative and quantitative data that produce outcomes benefitting many academic fields such as sociolinguistics, LSP and L2 pedagogy.

## **6.1.1 Sociolinguistics**

The corpus of Albertan French-speaking nurse-patient clinical interactions contributes to the field of sociolinguistic variationist studies by documenting a French as a minority language variety that has not been widely researched. Indeed, many researchers have focused on describing Ontario French (i.e., Chambers & Lapierre, 2011; Mougeon & Beniak, 1991; Tennant, 2011), but other French varieties spoken West of Ontario have only recently received substantial attention (Hallion, 2011; Papen, 2004; Papen & Bigot, 2010; Rodriguez, 2000; Walker, 2011)<sup>40</sup>. This type of data is important to understand and document usage of French outside monolingual speaker territories and to identify the points of convergence and divergence in the evolution of the French spoken in these

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<sup>&</sup>lt;sup>40</sup> Before the turn of the 21<sup>st</sup> century, sociolinguistic studies about French in Western Canada were scarce. Beniak et al. (1984) discussed the influence of English on Alberta French, Jackson (1974) offered an overview of the phonological traits found French spoken in Saskatchewan and Gaborieau (1985) focused his description on Manitoba French.

communities. Through their investigation of Ontario French speakers, Mougeon and Nadasdi (1998) have already demonstrated that the notion of *speech community* is hardly suitable and applicable to contact varieties. They rather suggest looking at community members' linguistic restriction to predict their linguistic behaviour and use of stylistic variants. The findings reported in Chapter 3 not only support Mougeon and Nadasdi's (1998) conclusion, also suggest that the notion of linguistic restriction (introduced in section 1.3.4) should be extended to smaller communities of practice in minority settings. Recall that the English dominant nurse's linguistic practices differ from those of the balanced bilingual nurses in terms of address practices (*vous* vs. *tu*) and use of periphrastic future with the first person singular (*je vais* vs. *je vas*), revealing that more than one norm, most likely governed by linguistic restriction, co-exists within that community of practice.

Moreover, variationist studies generally focus on corpora that have been collected through the use of semi-directed interviews (Tagliamonte, 2006). These interviews usually consist of a series of hierarchically structured sets of questions which typically progress from general topics to more specific, personal ones which are thought to elicit different speech styles (Tagliamonte, 2006). Labov (1984) argued that when people 'get preachy' about a topic or when they talk about 'language' itself, they use more careful and formal styles. When they are engaged in personal narratives, they pay less attention to their speech, and thus use informal, casual speech styles. The sociolinguistic interview as a means of collecting various speech styles has, however, been criticized. Romaine (1984)

raised the problems associated with the construct of 'attention to speech' arguing that before 'attention to speech' and 'amount of attention to speech' have been measured independently to identify if and when people style shift according to topic, the sociolinguistic interview cannot be regarded as a valid instrument to collect different instances of speech styles. In addition, the very format of the interview brings the problems of observer's paradox. The researcher being part of the data collection procedure has inevitably an effect on speakers' linguistic behaviour. Tagliamonte (2006) suggests that "(s)ociolinguistic interviews are highly variable and depend on the personality of the interlocutors and the rapport they build together during the course of their time together" (p.48). Thus, the sociolinguistic interview data is also a reflection of how speakers attuned their speech to the interviewer. The design of the study reported in Chapter 3 addressed these methodological issues as the corpus was created from recordings of real-life clinical interactions to capture language use operating within its real communicative demands and constraints. However, the observer's paradox remained an issue that was addressed in two ways. First, I went to the data collection sites with the coordinator of the bilingual nursing program before data collection started. She introduced me to potential participants and I shadowed the interventions that involved them. The participants and I were all acquainted before recordings of speech samples took place. I was there as a participant observer and avoided as much as possible interacting with participants while the nurse performed her nursing tasks. Instances of speech directed at me were not considered in the analysis. Second, for nursing interventions that were more

private in nature (e.g.: washing and dressing the patient), only the digital voice recorder was present in the room (with both nurse's and patient's prior agreement). Whereas sociolinguistic interviews provide crucial information towards the linguistic and extra-linguistic constraints operating on the use of stylistic variants, the study design used in the study reported in Chapter 3 documents the general use and role of stylistic variants in their naturally occurring contexts. The findings highlighted the fact that informal features are default forms in nursepatient interactions, and formal variants (i.e., /l/ deletion, schwa deletion and *ne* deletion) are linguistic resources used to initiate repair moves.

The issues dealt within this dissertation also contribute to the field of language attitude studies. With the exception of Anderson and Toribo (2007) and Lepicq (1980), matched guise and verbal guise experiments have typically investigated monolingual populations' attitudes. The results of the study reported in Chapter 4 indicate that degree of bilingualism and type of schooling experience are important factors that shape one's attitudes and perceptions towards formal and informal language practices. Indeed, most participants who reported balanced bilingual skills are French minority speakers who received little formal instruction in French. The majority of these speakers favoured the use of informal variants in L1 and L2 nurses; in contrast, French dominant and monolingual speakers who attended majority schools before they moved to Alberta as young adults preferred the use of formal variants. These factors did not affect participants' attitudes if they were currently dependent on the medical care system. These findings highlight the importance of not only investigating bilingual populations, but also

of situating a attitudinal studies in a realistic context to get a better understanding of how background variables affect perceptions. In addition, the results of the verbal guise experiment also highlight the importance of gathering qualitative data to help interpret the quantitative trends revealed by statistical analyses. For example, the quantitive results indicated that the French L1 and French L2 nurses were judged equally negatively on the use of formal stylistic variants. The analysis of the interview data, however, suggested that participants based their assessment on different sets of criteria. While the French L1 nurse was judged negatively because she appeared pretentious and cold, the French L2 nurse was judged severely because she did not appear to enjoy speaking French or working as a nurse.

### **6.1.2** Languages for specific purposes

This dissertation also contributes to the field of LSP by not only focusing on the design of a course offered in a language other than English, but also by questioning how LSP courses have traditionally been developed. As we saw in Chapter 2, LSP course design follows a 4-step procedure that starts with analysis of stakeholders' needs, followed by a language description of the target situations of use, which then informs the course and materials design. LSP thus assumes that L2 learners must emulate target community members' speech to successfully function in the target situation. However, the results of the two studies reported in this dissertation indicate there are discrepancies between the observed linguistic practices of the target population and the expected linguistic behaviour of new community members. While the second person singular pronoun tu is used more

frequently in nurse-patient interactions in Alberta, target community members prefer nursing students to use *vous* with their patients. Hence, these findings indicate that stakeholders' attitudes should be taken into account to identify which linguistic practice should be selected as the ideal norm for new members to emulate. In light of these findings, the 4-step LSP course design procedure traditionally adopted by LSP practitionners should be revisited to investigate target community members' preferences over local norm practices that vary among target community members (see Figure 8).

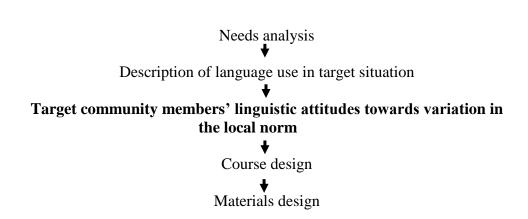


Figure 8. Revised model for LSP course design

In other words, the combined results of the studies reported in this dissertation indicate that the field of LSP would benefit from adopting Valdman's pedagogical norm where target community members' attitudes and expectations towards L2 speakers are taken into account to inform the design of LSP courses and materials.

### **6.1.3** Second language pedagogy

The findings reported in this dissertation also contribute to the current debate over which norm to adopt as a model in the French L2 classroom. First, the

data gathered point to the importance of both receptive and productive knowledge of stylistic variation. Adopting the traditional standard written norm, which presents the language as a decontextualized and 'depragmatized' system (Milroy & Milroy, 1991), would not enable students to develop the range of stylistic features they need in order to successfully function outside the classroom. Second, the findings discussed in Chapters 3 and 4 support *multicompetence* as the target for acquisition in the L2 classroom, although with a broadening of Cook's (1999, 2002, 2007) recommendations. The variationist sociolinguistic analysis of the clinical interactions corpus reveals that more than one French L1 norm may coexist within one speech community. The results of the verbal guise experiment indicated that one of the local norms for form of address appears more marked than the other if adopted by a new community member, whether French is her L1 or L2. Indeed, nurses addressing their patients with tu appeared unprofessional and disrespectful to a majority of participants in the verbal guise experiment. In other words, target community members favoured the linguistic practices of the English-dominant nurse whose stylistic behaviour was documented in Chapter 3. In light of these findings, in addition to successful L2 usage as linguistic yardstick, Cook's multicompetence model could also be based on restricted L1 speakers' usage.

Similarly, since standard French has traditionally been adopted as the target in French L2 classrooms (Train, 2003), issues discussed in this dissertation highlight the importance for French L2 instructors and teacher-trainers to confront their ideologies, biases, and assumptions surrounding French as object of

acquisition, in order to begin creating a more sociolinguistically authentic classroom. Courses or workshops for future and current French L2 teachers should be developed to offer instructors tools to reflect on their pedagogical practices, ranging from materials selection to error correction, rather than uncritically accepting the authority of the standard written norm in their classroom. If teachers are unaware of the limitations of their biases, they cannot change their pedagogical decisions, nor can they effectively prepare students for real world communicative demands.

In addition, the results of the verbal guise experiment have triggered direct implications for the teaching of stylistic variation. On the one hand, the relative salience of lexical variables to target participants indicate that lexical variants may be more important than phonological or grammatical variants for the creation of socially meaningful and appropriate messages. On the other hand, since the French L2 guise who used formal variants was perceived by many participants as the nurse with the strongest accent and as the least proficient speaker they had to evaluate, it highlights the role phonological variation plays on perceived proficiency level. These results contribute to our understanding of the roles played by lexical and phonological variation and their impact on social perceptions. Moreover, the results of this experiment revealed that the target population did not have homogeneous reactions towards the formal and informal guises which clearly indicate the necessity for L2 users to navigate the speech style continuum and negotiate what the appropriate language use may be depending on the situation and who the addressee is to create the intended social

meaning. Since various styles can be preferred within one community of practice, it is obvious that stylistic variation must be presented to L2 learners not as a new set of rules to follow, but as options that can be selected to make appropriate choices regarding the desired social effect. The pedagogical approach adopted by Lyster (1993) to target the acquisition of *tu* and *vous* offers a sound pedagogical approach to replicate with other features.

#### **6.2 Limitations**

In spite of its contributions, this research has some limitations that should be addressed in further studies. First, this research is limited in scope. The focus on a small speech community prevents the generalisation of the findings to other age groups and other French communities. Lynch (1996) argues, however, that if the research design is discussed in sufficient detail, other researchers and practioners should be able to determine the degree to which the data collection procedures can be replicated or relevantly applied to other settings. Second, this dissertation has attempted to describe the stylistic norm used in French-speaking nurse-patient interactions, but Douglas (2000) states that a discourse domain is dynamic and continually evolving as it is constructed by the participants involved in the communicative situation. The inclusion of new community members might therefore change the language behaviour of that target community. Further observations and recordings of the target community should be made to ensure that the description of language use remains accurate. Third, this dissertation investigated the language attitudes of the target community empirically in order to identify the linguistic practices needed to gain better access to a bilingual nursing

community. To validate these findings, further studies should investigate through longitudinal case studies if and how French L2 nurses actually gain acceptance in the target population. Last, findings of this dissertation indicate that Valdman's pedagogical norm provides a useful framework to deal with stylistic variation in the French L2 classroom; however, it is not a practical model to implement or develop. The number of investigations and amount of data needed to meet Valdman's criteria might deter L2 practitioners from adopting this model. Koch & Oesterreicher's (2001) model which plainly delimits domains of use for formal and informal features according to communicative constraints might serve as a valid alternative to guide the selection of target variants.

#### **6.3 Further studies**

The findings discussed in this dissertation highlighted important trends that should be further investigated and addressed by researchers in fields of sociolinguistics and L2 pedagogy.

### **6.3.1 Sociolinguistics**

The pedagogical norm developed in this dissertation was created on the basis of clinical interactions between French-speaking nurses and senior patients in Alberta. However, the bilingual nurses for whom this pedagogical norm was created will deal with other French-speaking patients whose age, level of education and socio-economic background will differ from that of the population investigated in this research. Since the francophone community in Alberta is fast evolving and is now made up of 46% of French-speaking immigrants coming from Europe and Africa (Mulatris, 2008), further studies should document the

linguistic practices and attitudes of the other generations of French-speaking patients in Alberta.

Moreover, the design of the verbal guise experiment implied that the FI nurse was compared to the Franco-Albertan nurse on the basis of accurately formed statements manipulated in terms of familiarity. However, research in SLA, discussed in Chapter 2, has shown that FI students' oral production is rarely fully accurate (e.g. Genesee, 2004). The speech prompts that were evaluated thus represent linguistic idealizations that may not be realistically attainable for these learners. Further studies should thus investigate monolingual and bilingual's attitudes towards natural FI speech samples.

In addition, the results of the verbal guise experiment indicate the importance of investigating the linguistic attitudes of bilinguals. Since one's degree of bilingualism appears to be an important factor influencing linguistic judgments, further studies conducted with other bilingual and multilingual populations, measuring participants' level of bilinguality, should be conducted to validate the findings reported in this dissertation and understand more how bilingualism shapes attitudes towards languages, varieties and speech styles.

### 6.3.2 L2 pedagogy

The results discussed in this dissertation indicate that receptive and productive knowledge of stylistic variants are crucial elements to master for the nursing profession. Further studies should focus on the role of socio-stylistic variation and sociolinguistic competence in other professions.

Moreover, the findings reported in this dissertation call for a pedagogical paradigm shift to expand the range of stylistic resources targeted for acquisition in the French L2 classroom. Further classroom-based studies should test the effectiveness of a pedagogical treatment focusing on the acquisition of grammatical, lexical and phonological socio-stylistic features. Lemmerich (2010) pointed out there is now a growing consensus that L2 teaching should better equip language learners with the ability to use the target language in a variety of social settings. There is however no general agreement as to what type of instruction is most beneficial to teach sociolinguistic variation.

In sum, this dissertation is situated at the intersection of sociolinguistics research and L2 pedagogy. It offers insights to researchers interested in stylistic norms of language use and attitudes towards them and to L2 practioners, including material developers, teachers and teacher-trainers, who can also ultimately benefit from the research findings to develop and implement a sociolinguistically informed language pedagogy.

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# **Appendix 1 : consent form – Study 1**

## Formulaire de consentement

Vous êtes invité(e) à participer à une étude qui s'intéresse aux interactions entre infirmières bilingues et patients francophones dans un contexte minoritaire. Si vous décidez de participer à cette étude, vos interactions professionnelles seront enregistrées.

Veuillez noter que toute information recueillie en lien avec cette étude et qui pourrait être mise en relation avec vous restera confidentielle et ne sera divulguée qu'avec votre consentement. Plus précisément, tous les enregistrements seront codés par numéro afin qu'aucune information qui pourrait identifier les personnes ne soient retraçables. Les enregistrements et les données seront gardés dans un endroit sécurisé et seront utilisés à seule fin de recherche et d'analyse par la chercheure. Plus tard, il se peut que les données transcrites soient utilisées pour des présentations et des publications scientifiques, mais toutes les données seront codées afin d'assurer votre protection.

Votre participation à ce projet serait grandement appréciée. Toutefois, vous n'êtes sous aucune obligation de participer. Votre décision de participer ou non à cette étude ou d'abandonner en cours de route n'affectera en aucun vos relations futures avec la chercheure ou l'University de l'Alberta. Vous pouvez a) abandonner votre participation en tout temps b) demander que les enregistrements soient interrompus ou c) détruits et donc exclus de l'étude. Si vous le désirez, vous pourrez en savoir plus sur cette étude à la fin de la collecte de données. Un résumé des résultats pourra vous être envoyé sur demande.

Ci-jointe, vous trouverez une la copie de ce formulaire, que vous pouvez garder. Si vous désirez de plus amples informations, vous pouvez contacter la chercheure pour cette étude: Suzie Beaulieu, Campus Saint-Jean, bureau 1-67 MacMahon, téléphone 780-465-8621, courriel beaulieu@ualberta.ca.

J'accepte de participer à cette étude. oui ☐ non ☐			
Je donne la permission à la cherencontres professionnelles et pour changés.  oui   non	•		
Nom de famille	Prénom	Initiale	
Signature du participant		Date	
Signature du CP		 Date	

# Appendix 2 : Background Questionnaire

Partie Nom:	1 : Caractéristiques pers	onnelles	
Sexe	M F		
Date c	le naissance (jour /mois /	année)	
	le naissance:	Pays /Province:	Ville,
village Lieu d village	le résidence actuel:	Province:	Ville,
Avez- actuel		s villes ou villages avant votre	lieu de résidence
	séjour. Ville  Durée Ville  Durée Ville  Durée  angue (s) parlée (s) :		
2. La	ingue (s) maternelle (s):		
3. La	angue (s) dominante (s):		
4.	Identité linguistique		
Préfér	ez-vous vous présenter c a) Francophone b) Anglophone c) Francophone minor d) Francophile e) Bilingue		

	f) Autre	<del></del>	
5.	Profession / occupation :		
	<u> =</u>	aité » à cette question, spécifiez quelle	
	profession vous avez exercé	ée avant votre retraite :	
6.	1		
	Niveau de scolarisation	Langue de scolarisation	
	a) Études élémentaires complé	, ,	
	b) Études secondaires complét		
	c) Diplôme d'études collégiale		
	d) Baccalauréat complété	français / anglais / bilingue	
	e) Maîtrise complétée	français / anglais / bilingue	
	f) Doctorat complété	français / anglais / bilingue	
Pa	rtie 2 : Questionnaire épilingu	istique	
	_	_	
	Combien de personnes qui or	nt appris le français dans un programme	
	Combien de personnes qui or d'immersion française conna	nt appris le français dans un programme	
	Combien de personnes qui or	nt appris le français dans un programme	
	Combien de personnes qui or d'immersion française conna	nt appris le français dans un programme issez-vous?	
	Combien de personnes qui or d'immersion française connai 0 11 à 20	nt appris le français dans un programme issez-vous?	
1.	Combien de personnes qui or d'immersion française connai 0	nt appris le français dans un programme issez-vous?  O  O  O  utilisé par les gens qui ont suivi un	
1.	Combien de personnes qui or d'immersion française connai 0 □ 11 à 20 1 à 10 □ Plus de 2	nt appris le français dans un programme issez-vous?  O  O  O  utilisé par les gens qui ont suivi un	
1.	Combien de personnes qui or d'immersion française connai 0	nt appris le français dans un programme issez-vous?  00 □  utilisé par les gens qui ont suivi un nçaise?	
1.	Combien de personnes qui or d'immersion française connai 0	nt appris le français dans un programme issez-vous?  0	
1.	Combien de personnes qui or d'immersion française connais 0	nt appris le français dans un programme issez-vous?  0	
1.	Combien de personnes qui or d'immersion française connai 0	nt appris le français dans un programme issez-vous?  100	
1.	Combien de personnes qui or d'immersion française connaid 0	nt appris le français dans un programme issez-vous?	
1.	Combien de personnes qui or d'immersion française connais 0	nt appris le français dans un programme issez-vous?  utilisé par les gens qui ont suivi un nçaise?  fait d'accord             en désaccord total is fait d'accord         en désaccord total is fait d'accord         en désaccord total is fait d'accord         en désaccord total is fait d'accord         en désaccord total is fait d'accord         en désaccord total is fait d'accord         en désaccord total is fait d'accord           en désaccord total is fait d'accord             en désaccord total is fait d'accord	
1.	Combien de personnes qui or d'immersion française connais 0	nt appris le français dans un programme issez-vous?  utilisé par les gens qui ont suivi un nçaise?  a fait d'accord             en désaccord total a fait d'accord       en désaccord total a fait d'accord       en désaccord total a fait d'accord       en désaccord total a fait d'accord       en désaccord total a fait d'accord       en désaccord total a fait d'accord       en désaccord total a fait d'accord       en désaccord total a fait d'accord       en désaccord total a fait d'accord       en désaccord total a fait d'accord         en désaccord total a fait d'accord         en désaccord total a fait d'accord           en désaccord total a fait d'accord             en désaccord total a fait d'accord	
1.	Combien de personnes qui or d'immersion française connaid 11 à 20 1 à 10  Plus de 2  Que pensez-vous du française programme d'immersion francis d'immersion francis d'immersion francis programme d'immersion francis d'immersion francis programme d'immersion d'immers	nt appris le français dans un programme issez-vous?  utilisé par les gens qui ont suivi un nçaise?  fait d'accord             en désaccord total fait d'accord       en désaccord total fait d'accord       en désaccord total fait d'accord       en désaccord total fait d'accord       en désaccord total fait d'accord       en désaccord total fait d'accord       en désaccord total fait d'accord       en désaccord total fait d'accord       en désaccord total fait d'accord       en désaccord total fait d'accord       en désaccord total fait d'accord         en désaccord total fait d'accord         en désaccord total fait d'accord         en désaccord total fait d'accord         en désaccord total fait d'accord         en désaccord total fait d'accord           en désaccord total fait d'accord	

3.	3. Quelle (s) variété (s) de français faudrait-il enseigner dans les cours d français langue seconde en Alberta?		•	
	Français e	européen	П	
	Français c			
	Français d			
		s d'un anglophone compétent en français		
	Autre:			
Ex	pliquez :			
Pa	rtie 3 : les	soins de santé		
<b>a</b> ) :	Lorsque v	ous avez besoin de soins de santé, préférez	z-vous vous faire	
tra	-	n professionnel de la santé qui parle		
	a. Fr	3		
	b. Ar	<u> </u>		
	c. Ar	nglais ou français, cela ne fait aucune différe	ence	
<b>b</b> )	Si on vous	offre le choix de voir un professionnel de	la santé qui parle	
		me langue seconde ou langue additionnell		el
de	la santé qu	ui parle anglais uniquement. Lequel chois	siriez-vous?	
		Celui qui parle français comme langue add	litionnelle.	
		Celui qui parle anglais.		
		L'un ou l'autre, cela ne fait aucune différen		
	d.	Ni l'un, ni l'autre; je voudrais voir un franc	cophone.	

# **Appendix 3a: Verbal guise script 1 (versions 1 and 2)**

# SITUATION 1 A: LE LEVER DU PATIENT

Infirmière : Bonjour (6.0) ((met doucement la main sur son bras et se penche vers

lui))

Patient : ((il dort, ronfle /respire fort))

Infirmière : Monsieur Sirois: ((parle un peu plus fort, toujours penchée près de

lui))

Patient : ((ouvre les yeux et se tourne sur le dos sans parler, il fait des petits

bruits))

Infirmière: Bonjour! Vous êtes réveillé!

Patient : ((se frotte les yeux avec la main droite, il marmonne quelques sons))

Infirmière : Vous deviez faire des beaux rêves! (rire)

Patient : ...((toujours dans les limbes, il marmonne quelques sons))

Infirmière : Est-ce que vous faisiez des beaux rêves? C'est pour ça que c'était

difficile de vous réveiller? Patient : (3.0) un ti peu

Infirmière : ((rire)) Avez-vous faim? Patient : (3 sec) oui (voix faible)

Infirmière : Oui! O:kay! (L'infirmière ouvre les rideaux)

......

# SITUATION 1 B : LE LEVER DU PATIENT

Infirmière : Salut (6.0) ((met doucement la main sur son bras et se penche vers

elle))

Patient : (elle dort dur)

Infirmière : Jean-Paul ((parle un peu plus fort, toujours penchée près d'elle)) Patient : ((ouvre les yeux et se tourne sur le dos sans parler, il fait des petits

bruits))

Infirmière: Salut! T'es réveillé!

Patient : ((se frotte les yeux avec la main droite, il marmonne quelques sons))

Infirmière: Tu devais faire des beaux rêves! ((rire))

Patient : ...((toujours dans les limbes, il marmonne quelques sons))

Infirmière : Est-ce que tu faisais des beaux rêves? C'est pour ça que c'était

difficile de t'réveiller? Patient : (3.0) un ti peu

Infirmière : ((rire)) As-tu faim? Patient : ((3 sec)) oui ((voix faible))

Infirmière : Oui! O:kay! ((L'infirmière ouvre les rideaux))

# **Appendix 3b: Verbal guise script 2 (versions 1 and 2)**

## SITUATION 2 A: LA TOILETTE DU PATIENT

Infirmière : ((elle vient d'ouvrir les rideaux et regarde dehors)) Le soleil est levé ce matin.

Nous ne le voyons pas par contre. Il est caché derrière les nuages.

Patient : Ha oui? I' va p't'être mouillé encore aujourd'hui. Tu viens-tu m'aider à me

l'ver?

Infirmière : Oui, mais avant je vais faire votre toilette. Ok Monsieur Caron je vais vous laver le visage.

Patient : ((baye)) Oh, ça fait du bien ça

Infirmière: Je vais lever vos bras pour vous laver les aisselles.

Patient: C'est bien! Envoye fort!

Infirmière: Nous allons mettre la chemise rouge aujourd'hui parce que vous allez avoir

de la visite, Ok?

Patient : Oh oui, e' m'fait ben celle-là

Infirmière : Ok, Monsieur Caron pouvez-vous m'aider avec vos vêtements? Pouvez-vous

vous tourner vers moi?

Patient : Ah, j'peux ben faire ça pour toé

Infirmière : ((Elle passe le chandail par-dessus la tête et dans chacun des bras. Le

chandail reste pris au dessus du ventre)). Oups ! Je vais baisser votre chandail pour cacher votre ventre!

Patient: Oui, faut surtout pas qu'les aut' voient ça ((rire))

Infirmière : ((rire)) Ok, je vais aller chercher quelqu'un pour m'aider à vous lever.

# SITUATION 2 B: LA TOILETTE DU PATIENT

Infirmière : ((elle vient d'ouvrir les rideaux et regarde dehors)) Le soleil est l'vé c' matin. On l'voit pas, par exemple. I'est caché derrière les nuages.

Patient : Ha oui? I' va p't'être mouillé encore aujourd'hui. Tu viens-tu m'aider à me l'ver?

Infirmière : Oui, mais avant j'vas faire vot' toilette. Ok Monsieur Caron j'vas vous laver la face

Patient : ((baye)) Oh, ça fait du bien ça

Infirmière : J' vas l'ver vos bras pour vous laver les d'ssous d'bras

Patient: C'est bien! Envoye fort!

Infirmière : On va mettre la ch'mise rouge aujourd'hui parce que vous allez avoir

d' la visite. Ok?

Patient : Oh oui, e' m'fait ben celle-là

Infirmière: Ok, Monsieur Caron pouvez-vous m'aider avec vos vêtements?

Pouvez-vous vous tourner vers moi?

Patient : Ah, j'peux ben faire ça pour toé

Infirmière ((Elle passe le chandail par-dessus la tête et dans chacun des bras. Le chandail reste pris au dessus du ventre)). Oups ! J'vas baisser votre ch'mise pour vous cacher la bedaine!

Patient : Oui, faut surtout pas qu'les aut' voient ça ((rire))

Infirmière : ((rire)) Ok, j'vas aller chercher quelqu'un pour m'aider à vous lever.

# **Appendix 4: verbal guise distracters scripts**

# Distracter 1

Physio: Comment ça va?

Infirmière: Ça bien, j'arrive de la chambre de Madame Charest Physio : Oh..Comment elle va? Comment va son g'nou?

Infirmière: Mieux j'pense. E'est allée à la messe aujourd'hui. E' était pas allée d'puis

trois jours.

Physio: Super! C'est une bonne nouvelle, ça!

Infirmière: Oui. Son g'nou était pas mal moins enflé pis e' m'a dit qu'i' lui faisait moins

mal qu'hier Physio : parfait!

### Distracter 2

Physio: T'es où aujourd'hui? Infirmière: J'suis sur l'aile 4.

Physio : C'est l'aile de Monsieur Richard, ça?

Infirmière: Oui, pis y parait qu'i' était pas mal agité ce matin au déjeuner

Physio: Toi, tu as le tour avec! Tu réussis tout l'temps à l'calmer

Infirmière: Il m'a déjà dit que je ressemblais à sa fille Physio: ha, bon, c'est pour ça! S'cuse faut que j'y aille!

Infirmière : Ok, à plus tard!

### Distracter 3

Physio: Tu m'amènes pas Madame Gingras c' matin?

Infirmière: Non, elle avait de la visite de son fils et voulait pas venir

Physio: Oh bon, ça va lui faire du bien de parler avec quelqu'un de sa famille

Infirmière: Oui, mais aurais-tu un trou pour elle cet après-midi?

Physio: Mmm, oui tu peux me l'amener à 2h30.

Infirmière: Super! Merci beaucoup!

# Distracter 4

Physio: Comment ça va?

Infirmière: Ca va, j'ai bien fini ma journée avec Madame Parent.

Physio: Oh!Comment elle va? Comment va son g'nou?

Infirmière: Mieux, ça fait deux jours qu'elle ne prend plus d'analgésiques.

Physio: Super! C'est une bonne nouvelle, ca!

Infirmière: Bon! J'y vais mon chum vient me chercher.

Physio: parfait!

### Distracter 5

Physio: Tu m'amènes pas Madame Gingras c' matin? Infirmière: Non, sa fille est venue la chercher ce matin

Physio : Oh bon, ça va lui faire du bien de parler avec quelqu'un de sa famille Infirmière: Oui, c'est vrai. Mais, pourrais-tu la voir quand elle sera de retour?

Physio: Mmm, oui tu peux me l'amener à 2h30.

Infirmière: Excellent. Merci Louis! À cet après-midi!

# Appendix 5: Verbal guise questionnaire

Situation 1	
C'est le matin, la jeune infirmière	doit réveiller son patient pour l'amener déjeuner.
Selon vous	
1) L'infirmière est professionnelle	tout à fait d'accord $\square$ $\square$ $\square$ en désaccord total
2) L'infirmière est dévouée	tout à fait d'accord $\square$ $\square$ $\square$ $\square$ en désaccord total
3) L'infirmière est gentille	tout à fait d'accord $\square$ $\square$ $\square$ $\square$ en désaccord total
	tout à fait d'accord $\square$ $\square$ $\square$ en désaccord total
5) L'infirmière est respectueuse	tout à fait d'accord $\square$ $\square$ $\square$ en désaccord total
6) L'infirmière est chaleureuse	tout à fait d'accord $\square$ $\square$ $\square$ $\square$ en désaccord total
7) L'infirmière est compétente	tout à fait d'accord $\square$ $\square$ $\square$ $\square$ en désaccord total
	e tout à fait d'accord               en désaccord total
8) L'infirmere est digne de confiance	e tout a fait d'accord         en desaccord total
Commentaires généraux sur la	performance de l'infirmière:
<u> </u>	re va faire la toilette de son patient qui vient aux avant de lui adresser la parole.
Selon vous	
1) L'infirmière est professionnelle	tout à fait d'accord $\square$ $\square$ $\square$ en désaccord total
2) L'infirmière est dévouée	tout à fait d'accord $\square$ $\square$ $\square$ $\square$ en désaccord total
3) L'infirmière est gentille	tout à fait d'accord $\square$ $\square$ $\square$ $\square$ en désaccord total
4) L'infirmière est consciencieuse	
5) L'infirmière est respectueuse	tout à fait d'accord $\square$ $\square$ $\square$ $\square$ en désaccord total
6) L'infirmière est chaleureuse	tout à fait d'accord $\square$ $\square$ $\square$ $\square$ en désaccord total
7) L'infirmière est compétente	tout à fait d'accord $\square$ $\square$ $\square$ en désaccord total
	e tout à fait d'accord             en désaccord total
o) L'illiminere est digne de confiance	e tout a fait d'accord           en desaccord total
Commentaires généraux sur la	performance de l'infirmière:

# **Appendix 6: Consent form – Study 2**

## Formulaire de consentement

Vous êtes invité(e) à participer à une étude qui s'intéresse aux interactions entre infirmières bilingues et patients francophones dans un contexte minoritaire. Si vous décidez de participer à cette étude, vous offrirez votre opinion sur la qualité du service offert par des nouvelles infirmières.

Veuillez noter que toute information recueillie en lien avec cette étude et qui pourrait être mise en relation avec vous restera confidentielle et ne sera divulguée qu'avec votre consentement. Plus précisément, tous les enregistrements seront codés par numéro afin qu'aucune information qui pourrait identifier les personnes ne soient retraçables. Les enregistrements et les données seront gardés dans un endroit sécurisé et seront utilisés à seule fin de recherche et d'analyse par la chercheure. Plus tard, il se peut que les données transcrites soient utilisées pour des présentations et des publications scientifiques, mais toutes les données seront codées afin d'assurer votre protection.

Votre participation à ce projet serait grandement appréciée. Toutefois, vous n'êtes sous aucune obligation de participer. Votre décision de participer ou non à cette étude ou d'abandonner en cours de route n'affectera en aucun vos relations futures avec la chercheure ou l'University de l'Alberta. Vous pouvez a) abandonner votre participation en tout temps b) demander que les enregistrements soient interrompus ou c) détruits et donc exclus de l'étude. Si vous le désirez, vous pourrez en savoir plus sur cette étude à la fin de la collecte de données. Un résumé des résultats pourra vous être envoyé sur demande.

Ci-jointe, vous trouverez une la copie de ce formulaire, que vous pouvez garder. Si vous désirez de plus amples informations, vous pouvez contacter la chercheure pour cette étude: Suzie Beaulieu, Campus Saint-Jean, bureau 1-67 MacMahon, téléphone 780-465-8621, courriel beaulieu@ualberta.ca.

J'accepte de participer à cette étude oui  non □	2.	
Je donne la permission à la cherencontres professionnelles et pour changés. oui ☐ non ☐	_	
Nom de famille	Prénom	Initiale
Signature du participant		Date
Signature du CP		 Date