

Problem and Need Analysis for English–Chinese Manual Development for Service Providers in Healthcare Establishments in Khanom District, Nakhon Si Thammarat Province

การวิเคราะห์ปัญหาและความจำเป็นเพื่อพัฒนาคู่มือภาษาอังกฤษ-จีน
สำหรับผู้ให้บริการในสถานประกอบการเพื่อสุขภาพ
ในอำเภอขนอม จังหวัดนครศรีธรรมราช

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Abstract

Creating value in healthcare requires developing English and Chinese language skills among service providers. This research aimed to 1) investigate English and Chinese language problems and needs among service providers in Khanom District healthcare establishments; 2) develop an English-Chinese manual; and 3) assess the service providers' satisfaction with the manual. The study involved a purposive sampling of 60 service providers from healthcare establishments in Khanom District, Nakhon Si Thammarat. The research employed a questionnaire addressing problems and needs, a satisfaction assessment form, interview forms, and an English-Chinese communicative manual. Data analysis methods included percentages, means, standard deviations, and content analysis from interviews. The findings revealed that problems related to the English language among healthcare providers in Khanom District were notably high ($\bar{x} = 4.01$), encompassing all language skills. Similarly, problems in using the Chinese language were at the highest level ($\bar{x} = 4.96$). The sample group exhibited a significant need for English skill development, with speaking skills being the most problematic ($\bar{x} = 4.73$). On the other hand, the overall demand for Chinese language proficiency was at a moderate level ($\bar{x} = 2.86$), with the greatest need being for speaking skills ($\bar{x} = 3.60$). The overall satisfaction assessment of the English-Chinese communicative manual was highly favorable

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($\bar{x} = 4.05$). The results of this research could be used as a guideline to develop English and Chinese language training programs for healthcare professionals in their workplace.

Keywords: Language Problem, Healthcare Establishments, Manual, Need Analysis, Service Provider

บทคัดย่อ

การสร้างเสริมคุณค่างานบริการในสถานประกอบการเพื่อสุขภาพจำเป็นต้องพัฒนาความสามารถด้านทักษะภาษาอังกฤษและภาษาจีนของผู้ให้บริการในสถานประกอบการเพื่อสุขภาพควบคู่กันไปงานวิจัยนี้จึงมีจุดมุ่งหมายเพื่อ 1) ศึกษาปัญหาและความต้องการในการพัฒนาทักษะภาษาอังกฤษและภาษาจีนของผู้ให้บริการในสถานประกอบการเพื่อสุขภาพ ในอำเภอชนอม จังหวัดนครศรีธรรมราช 2) พัฒนาคู่มือสองภาษา (ภาษาอังกฤษ – จีน) เพื่อการสื่อสารสำหรับผู้ให้บริการในสถานประกอบการเพื่อสุขภาพและ 3) ประเมินความพึงพอใจต่อคู่มือสองภาษาสำหรับผู้ให้บริการในสถานประกอบการเพื่อสุขภาพ กลุ่มตัวอย่างในงานวิจัยคือ ผู้ให้บริการในสถานประกอบการเพื่อสุขภาพจำนวน 60 คน ใช้การสุ่มแบบเจาะจง เครื่องมือที่ใช้คือแบบสอบถามปัญหาและความต้องการ คู่มือสองภาษาภาษาอังกฤษและภาษาจีน แบบประเมินคู่มือสองภาษาแบบประเมินความพึงพอใจ และ แบบสัมภาษณ์ สถิติที่ใช้ในการวิจัย ได้แก่ ค่าร้อยละ ค่าเฉลี่ยและส่วนเบี่ยงเบนมาตรฐาน และการวิเคราะห์เนื้อหาที่ได้จากการสัมภาษณ์ ผลการวิจัยพบว่าปัญหาการใช้ภาษาอังกฤษของผู้ให้บริการในสถานประกอบการเพื่อสุขภาพ ในอำเภอชนอม จังหวัดนครศรีธรรมราชในทุกทักษะอยู่ในระดับมาก ($\bar{X} = 4.01$) ปัญหาการใช้ภาษาจีนในการทำงานโดยภาพรวมอยู่ในระดับมากที่สุด ($\bar{X} = 4.96$) กลุ่มตัวอย่างมีความต้องการในการพัฒนาทักษะภาษาอังกฤษอยู่ในระดับมากที่สุด ($\bar{X} = 4.15$) โดยทักษะการพูดเป็นความต้องการสูงสุด ($\bar{X} = 4.73$) ความต้องการในการพัฒนาทักษะภาษาจีนโดยภาพรวมอยู่ในระดับปานกลาง ($\bar{X} = 2.86$) โดยมีความต้องการในพัฒนาการพูดภาษาจีนมากที่สุด ($\bar{X} = 3.60$) ผลประเมินความพึงพอใจคู่มือสองภาษาในภาพรวมอยู่ในระดับมาก ($\bar{X} = 4.05$) ผลที่ได้จากการวิจัยนี้ยังสามารถนำไปประยุกต์ใช้สำหรับการจัดอบรมภาษาอังกฤษและภาษาจีนเพื่อใช้ในการทำงานในสถานประกอบการเพื่อสุขภาพได้

คำสำคัญ: ปัญหาการใช้ภาษา สถานประกอบการเพื่อสุขภาพ คู่มือ การวิเคราะห์ความจำเป็น ผู้ให้บริการ

Introduction

The tourism industry is pivotal to Thailand's economy, as it contributes significantly to national income and trade (Ministry of Tourism and Sports, 2021b; Tourism Authority of Thailand, 2021). Despite challenges like the COVID-19 pandemic's impact in 2020, fostering Thai tourism remains vital for economic development (Tourism Authority of Thailand, 2021). Thailand aims to bolster its workforce to boost competitiveness in tourism, which aligns with national priorities outlined in the 20-year national strategy (2023-2037) (Office of the National Economic and Social Development Council, 2024). Complementing this strategy is the

National Tourism Development Plan No. 2 (2017-2021). It aims to position Thailand as a leading quality tourist destination by 2036 and foster sustainable economic growth, societal well-being, and income distribution (Ministry of Tourism and Sports, 2021b). The key to these strategies is empowering tourism entrepreneurs to compete effectively in order to promote sustainable economic development and income distribution.

Thailand is also experiencing significant growth in health tourism. According to the Siam Commercial Bank Economic Intelligence Center (2021), there is a global rise in health tourism due to factors such as chronic diseases and work stress. In fact, Thailand is experiencing significant growth in health tourism, ranking 18th globally and 13th for healthcare quality in 2017 (Ministry of Tourism and Sports, 2021b). The National Statistical Office (2021) identified China as the top contributor to Asian health tourists in Thailand, with significant spending averaging 6,334.22 baht per day, while Russian tourists formed the largest European group, followed by those from the United Kingdom, France, and Germany.

Nakhon Si Thammarat Province is renowned for its diverse tourism potential. This is evident by its 19 Kinnari Awards (Tourism Awards) (Tourism Authority of Thailand, 2021). Tourism is recognized as crucial for the province's development, as it encompasses business, community, and people. Factors contributing to its success include its rich geography, historical sites, arts, culture, and unique agricultural products. When comparing the provinces in the southern group with Thai amulets, it is observed that Nakhon Si Thammarat Province has the third-highest number of tourists, followed by Songkhla Province and Surat Thani Province. Hence, there is a need to diversify tourism offerings to include sports, recreation, and health tourism (Nakhon Si Thammarat Provincial Tourism and Sports Office, 2021).

Based on the data from the Nakhon Si Thammarat Provincial Statistical Office (2022), it was observed that the number of foreign tourists increased steadily from 2016 to 2019. Specifically, in 2019, the number of foreign tourists amounted to 88,716 people. This indicates an increase from the previous year's figure of 81,526 people in 2018. Akrawong et al. (2018) have highlighted the suitability of Nakhon Si Thammarat Province for health tourism, emphasizing the physical characteristics, management, and services. Foreign tourists show a keen interest in health establishments, which signals high spending potential. Improving services and developing health tourism personnel, particularly in English and Chinese communication, is imperative. Community and entrepreneurial efforts focusing on skill development, marketing, and support in English and Chinese communication can effectively elevate tourism in Nakhon Si Thammarat Province to an international level. The trend of health

tourism is rising, with hotels and resorts adapting services and facilities to capitalize on the higher profitability of health establishments compared to accommodation and food services (Chaisuvan & Chantachon, 2018).

Khanom District in Nakhon Si Thammarat Province emerges as a significant center for health tourism in Nakhon Si Thammarat, particularly in hotels and resorts offering health-related services. Consequently, numerous organizations in Nakhon Si Thammarat collaborated to elevate wellness standards and enhance competitiveness on a global scale (Walailak University, 2019). In 2019, researchers at Walailak University focused on creating an identity and elevating the standard of Sriwichai spa services to increase competitiveness and gain international acceptance. Additionally, the Nakhon Si Thammarat Provincial Public Health Department made an effort to develop and upgrade the standard of spa services in the Khanom district of Nakhon Si Thammarat Province. This includes advocating for the registration of service establishments with the Ministry of Public Health, providing additional training to enhance knowledge about services and registration for freelance masseuses, promoting the use of quality products, and prioritizing the safety of service recipients.

Furthermore, the Department of Health Service Support (2021) reported a consistent increase in the number of health establishments seeking registration, with 18 currently applying, 13 already licensed, and 5 in the process. In 2021, 540 individuals applied as service providers. Out of the 540 individuals, a total of 427 were certified, with Khanom District leading in registered health service providers. Interviews with operators and providers in Khanom District revealed a growing demand from foreign tourists, especially English and Chinese speakers. This is reflected in the increased foreign tourist numbers from 2016 to 2019 (Nakhon Si Thammarat Provincial Statistical Office, 2022). Effective communication, particularly in foreign languages, is crucial. To bridge the gap, this study emphasizes the need for health service providers to enhance language skills to meet the needs of foreign tourists in order to align with national tourism development objectives. The researchers developed an English-Chinese communicative manual based on insights gathered by utilizing English for Specific Purposes (ESP) and needs analysis to address language challenges effectively, with the aim of supporting Thai health tourism and ongoing professional development for healthcare providers.

Objectives

1. To identify the problems and needs of English and Chinese communication among service providers in health establishments in Khanom District, Nakhon Si Thammarat.
2. To develop an English-Chinese communicative manual for service providers in health establishments in Khanom District, Nakhon Si Thammarat.
3. To evaluate the satisfaction of service providers in health establishments in Khanom district towards the English-Chinese communicative manual.

Literature Review

1. Health Tourism

The Global Wellness Institute (GWI, 2017) defined health tourism as travel that aims to nourish and promote better health for tourist groups. It categorized health tourism into three types: medical services, health services, and health products and herbs. Additionally, the Tourism Authority of Thailand (2020) classified health tourism into two main types, namely, health healing tourism and health promotion tourism.

Health healing tourism integrates the treatment of diseases or restoration of health with travel, such as individuals traveling for tourism purposes to receive dental services, cosmetic surgery, or gender reassignment surgery in hospitals or nursing homes. On the other hand, health promotion tourism involves visiting various tourist attractions, staying in resort hotels, or visiting health centers to engage in activities like traditional Thai massage, aromatherapy, and mineral baths with the aim of promoting well-being. This form of tourism emphasizes the conscious promotion of health and environmental preservation. It often incorporates organized travel programs for relaxation in nature.

In conclusion, health tourism encompasses travel to tourist destinations with a combination of medical and health services, sports fitness centers, or other activities that contribute to overall well-being. It is categorized into health-healing tourism for treatment or rehabilitation and health-promotion tourism for disease prevention through destination activities.

2. The Growth of Health Tourism in Thailand

Data from the Ministry of Tourism and Sports (2021b) highlighted the robust growth of health tourism in Thailand from 2014 to 2018, with a notable 11.45 percent average annual increase in foreign tourists by 2018, totaling 38,277,300 individuals. The health tourism sector has emerged as a significant revenue generator. In fact, it ranks among Thailand's top five

businesses in the tourist industry, following personal healthcare, beauty and anti-aging science, and healthy eating, nutrition, and weight loss (Global Wellness Institute, 2018).

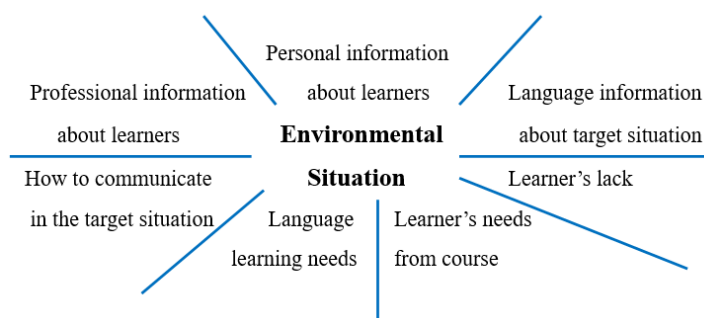
In 2017, Thailand held the 18th position globally for health tourism, with key factors including environmental appeal, the strength of its health tourism industry, and service quality. Predictions from the World Health Research Center (IHRC) predicted a 14 percent annual growth rate for Thailand's health tourism market, which was consistent with observed trends. In 2018, 2.5 million foreign tourists visited Thailand specifically for health tourism, constituting 6-8% of total tourists (Ministry of Tourism and Sports, 2021a). The majority of health tourists originated from Asian countries, primarily China.

Despite positive growth, the COVID-19 pandemic in 2020 significantly impacted Thailand's tourism industry. Nevertheless, to maintain its status as a health tourism hub the language skills among health tourism personnel and aligning services with health tourists' needs were enhanced (Chusri & Lalitsasiwimon, 2020). Despite challenges, the outlook suggested continued growth in Thailand's health tourism sector.

3. Need Analysis

“Studying student needs involves systematically collecting and interpreting information to inform curriculum development and meet learners' requirements” (Graves, 2000, p. 98). This approach is widely applied in teaching English as a Foreign Language (EFL), particularly in English for Specific Purposes (ESP), where understanding learners' context-specific challenges and objectives guides curriculum design (Benesch, 1996). Rajan (2001) outlines four key steps for needs analysis: establishing overall objectives, assessing learner needs through interviews or questionnaires covering language, personal, and workplace requirements, utilizing findings to set curriculum objectives, and developing content accordingly. Various analytical models, such as Target Situation Analysis and Present Situation Analysis, aid in this process. Hutchinson and Waters' (1987) model centers on identifying necessities, shortages, and wants, reflecting learners' target situation requirements, skill gaps, and personal desires. Dudley-Evans and St. John's (1998) model further delineates learning needs by analyzing multiple elements.

Figure 1 *Dudley-Evans and St John's Needs Analysis Model.*



The Dudley-Evans and St. John's model guides the study of specialized English language learning needs by assessing environmental factors. This involves analyzing work-related tasks requiring English, learners' cultural background, attitudes, and language proficiency. The aim is to bridge learning gaps by identifying areas for improvement and tailoring learning approaches accordingly (Dudley & Evans & St John, 1998).

In assessing the needs for an English-Chinese communicative manual for healthcare providers in Khanom District, Nakhon Si Thammarat Province, both organizational and individual needs must be evaluated. Organizational assessments focus on policy and skill development needs. They identify departments that require language training and define proficiency levels. Individual assessments determine language requirements and proficiency levels, while also exploring suitable learning methods tailored to the work environment. This ensures the manual's content meets specific job requirements and organizational needs.

4. English for Specific Purposes

Hutchinson and Waters (1987) differentiated between general English instruction and teaching English for Specific Purposes (ESP). While both share theoretical foundations, ESP focuses on tailoring language instruction to specific contexts encountered by learners in their fields or professions, emphasizing vocabulary, sentence structures, and relevant lessons. In contrast, general language instruction covers broader linguistic elements with less emphasis on specific contexts.

Day and Krzanowski (2010) stressed the importance of conducting needs analysis surveys before teaching, especially in language instruction for specific purposes. These surveys help tailor teaching and learning arrangements effectively to meet students' needs. Teachers address essential questions regarding students' preferences, demographic and professional backgrounds, funding sources, level of involvement in course planning, language proficiency levels, preferred teaching styles, resource availability, class venue, and relevant workplace topics. Conducting such surveys ensures that teaching approaches are customized to suit the diverse requirements of students and their respective learning contexts.

Robinson (1991) emphasized the significance of English for Specific Purposes (ESP) in today's global context, highlighting its clear objective of facilitating success in various professional and educational roles by addressing learners' specific needs. ESP courses were tailored to develop language proficiency within relevant subject areas and situations. They encompass language functions crucial to learners' fields of interest. This perspective aligns with

the idea of Sukserm et al. (2017), who defined ESP as English customized to meet learners' career requirements and individual skills, which acknowledges its narrower focus compared to general English.

5. Chinese for Specific Purposes

Chinese Language for Specific Purposes (CLSP), also referred to as Chinese for Specific Purposes (CSP), originated as an adaptation of English for Specific Purposes (ESP), as Wang and Jiang (2019) pointed out that CSP has progressed from isolated instruction of Chinese for business to a wider range of various specific purposes and interdisciplinary content areas. Like teaching English for specific purposes, CSP focused on instructing Chinese tailored to specific disciplines or contexts, such as Chinese for medicine, engineering, business, tourism, or hospitality.

Since China's reform and opening in 1978, the demand for specialized Chinese language courses has risen, leading to the development of textbooks and proficiency exams. However, despite its inception in the 20th century, CSP still lacks comprehensive theories and teaching models, resulting in limited research and textbook production. However, it remains crucial to address the diverse needs of learners in various fields. Integrating linguistic and language teaching theories, such as sociolinguistics and applied linguistics, CSP aims to prepare learners with skills relevant to their specific career objectives. For instance, Zhai Naigang's study on teaching Chinese vocabulary for Traditional Chinese Medicine exemplifies the application of CLSP principles, emphasizing the importance of tailored vocabulary instruction and situational learning to meet learners' needs effectively.

In summary, ESP and CSP are crucial for tailoring language instruction to specific contexts and professions. ESP focuses on tailoring learning to career objectives, while CSP adapts Chinese instruction to fields like medicine and engineering. Day and Krzanowski (2010) emphasized the importance of needs analysis surveys to tailor teaching effectively, while Robinson (1991) highlighted ESP's role in addressing learners' specific needs. Despite needing further theoretical development, CSP is essential for meeting diverse linguistic requirements. Integrating linguistic theories ensures practical relevance and effectiveness in both ESP and CSP instruction.

6. Previous Research

Several relevant studies have examined needs analysis, ESP, and CSP in various job sectors, including hospitality, transportation, and healthcare. However, there is limited research specifically addressing the language needs of Thai healthcare providers in Nakhon Si Thammarat, a prominent tourist destination in Thailand. Chiablaem (2020) focused on Thai massage workers in Pattaya City District, Chonburi Province, identifying speaking and listening skills as crucial areas for improvement, particularly in vocabulary related to massage. Khakhai (2014) examined similar problems among Thai massage therapists on Khaosarn Road, Bangkok. The results showed that participants required improvement in all language skills, with listening and speaking being the most necessary.

Patanasorn et al. (2018) investigated English language needs in spa and massage establishments. They emphasized the essential communication functions such as inquiring

about customers' pain and greeting customers. Additionally, Sriyawong et al. (2016) explored the enhancement of English-speaking skills among Thai massage staff in Ubon Ratchathani Province, noting no significant difference in speaking abilities before and after training. Waowaew (2021), on the other hand, investigated the use of the Chinese language among Thai massage staff in Lampang Province. He developed a Chinese manual and found high satisfaction and improved scores after training. Furthermore, Sukpatcharaporn (2018) developed English-speaking skill lessons for Thai massage staff in Chiang Mai Province. He reported a notable increase in speaking ability post-study and high satisfaction with the lessons.

These studies collectively highlight the diverse language needs and problems faced by Thai massage workers across different regions of Thailand. They emphasize the importance of tailored language training programs to enhance their communication skills and overall service quality.

Research Methodology

1. Participants

The participants were selected based on purposive sampling method. The study included 60 service providers employed in healthcare establishments in Khanom District, Nakhon Si Thammarat Province. The inclusion criteria include being managers of health establishments or service providers in health establishments in Khanom District, Nakhon Si Thammarat Province, holding a certificate as a healthcare provider, being proficient in speaking, reading, listening, and writing Thai, and consenting to participate in the research throughout the entire process. Additionally, 20 participants were selected for interviews using selective sampling method.

2. Research Instruments

In this study, the researchers employed a mixed-method approach by integrating both quantitative and qualitative methodologies with five instruments. Quantitative data collection involved creating questionnaires to address English and Chinese language issues and needs among service providers in Khanom district, along with suggestions for inclusion in communicative manuals. The obtained results were analyzed using percentage, mean, and standard deviation calculations to tailor the manual. A manual evaluation form and satisfaction questionnaire were then administered to participants for further evaluation. Qualitative data was gathered through semi-structured interviews. The five research instruments that were utilized for data collection are as follows:

2.1 The questionnaire utilized in this study encompassed five distinct sections. Firstly, it gathered personal information from participating service providers with eight questions. Subsequently, it employed a five-point scale to delve into English and Chinese language problems and needs by asking 16 questions. Participants were also invited to rate their needs on 10 topics provided for inclusion in English-Chinese communicative manuals. Additionally, they were asked to provide input on the given format of such manuals. Lastly, participants had the opportunity to offer general comments and suggestions regarding the questionnaire and the study.

2.2. Semi-structured interviews were conducted with healthcare service providers in Khanom District, Nakhon Si Thammarat Province, to explore their problems and needs in English and Chinese. The six interview questions delved into specific inquiries, including problems encountered in workplace communication, interest in language practice tailored to their job, preferred topics for interacting with foreign customers, desire for an English-Chinese communicative manual, specific features or content they would prefer in such a manual, and interest in participating in training courses aimed at enhancing their language skills.

2.3. An English–Chinese communicative manual was developed for service providers in healthcare establishments in Khanom District, Nakhon Si Thammarat Province. Before implementation, the manual underwent three expert evaluations.

2.4. A manual evaluation form was conducted to assess the manual before its implementation. Three experts, including an English lecturer, a Chinese lecturer, and a healthcare officer, were asked to evaluate the manual with 12 questions. After receiving feedback from the experts, the researchers employed the manual with the participants.

2.5. A satisfaction questionnaire was administered to evaluate the English–Chinese communicative manuals used by service providers in healthcare establishments in Khanom District, Nakhon Si Thammarat Province. The questionnaire included 10 questions in three sections: Part 1: General information about the participants; Part 2: Questions employing a five-point scale to assess satisfaction in two areas: the manual's format and content, and Part 3: Open-ended questions for additional opinions or suggestions.

3. Data Collection

The research began with obtaining official permission to investigate the problems and needs of the English and Chinese languages among healthcare service providers in Khanom District, Nakhon Si Thammarat Province. Questionnaires were administered to 60 service providers in healthcare establishments, and semi-structured interviews were conducted with a purposive sample of 20 participants. The purpose and significance of the research were clearly communicated to ensure informed participation. Upon completion, data analysis was performed to develop a tailored English-Chinese manual. Following the expert feedback and revisions, the manual was distributed to the sample group for utilization, and their satisfaction feedback was collected. Subsequently, the gathered data underwent analysis, leading to the reporting and discussion of research findings.

To verify the reliability and validity of the research instruments, including questionnaires, evaluation forms, and interview questions, they were assessed by three experts: an English lecturer, a Chinese lecturer, and a healthcare manager in a spa business. The experts evaluated the questions using the Index of Item-Objective Congruence (IOC), which ranges from 0.50 to 1.00, indicating alignment with research objectives and suitability for use. None of the questions had IOC values below 0.5, resulting in an overall IOC validity value of 0.94, indicating their acceptability. Following validation, a pilot study was conducted with 20 service providers not included in the main study, using a questionnaire. The analysis of pilot study data, using Cronbach's coefficient, yielded a coefficient of 0.97, confirming the reliability and validity of the research instruments.

4. Data Analysis

Data from the participants were analyzed quantitatively and qualitatively as follows:

The first research objective aimed to identify problems and needs in English and Chinese among healthcare service providers in Khanom District, Nakhon Si Thammarat. Descriptive statistics, including percentages, means, and standard deviations, were utilized to analyze sections 1-4 of the questionnaire. Scores were interpreted based on predefined categories: highest level (4.51-5.00), high level (3.51-4.50), moderate level (2.51-3.50), low level (1.51-2.50), and lowest level (1.00-1.50) of needs and problems (Likert, 1967). Additionally, part 5 of the analysis categorized opinions into various aspects by arranging them according to frequency and presenting them in a table format.

To address the second research objective, which involves developing an English-Chinese communicative manual for service providers in healthcare establishments in Khanom District, Nakhon Si Thammarat, the researchers utilized the analyzed data from the questionnaire regarding the needs of service providers in healthcare establishments in the district. Related research and additional data collected were used to inform manual development. Subsequently, the researchers sought evaluation from three experts in English, Chinese, and healthcare services. Incorporating feedback from these experts, the researchers edited and revised the manual before distributing it to the participants.

The third research objective aimed to assess service providers' satisfaction with the English-Chinese communicative manual in Khanom district. A satisfaction questionnaire was utilized to gather data, which was then analyzed using descriptive statistics. Part 1 of the analysis focused on percentages, while part 2 employed means and standard deviations. Scores were interpreted based on criteria, ranging from the highest level of satisfaction (4.51-5.00) to the lowest level (1.00-1.50). Additionally, part 3 involved analyzing the content and categorizing opinions by frequency, presented descriptively. Data from interviews was also analyzed using open and axial coding, as described in essay format.

Findings

Research Objective 1: To identify the problems and needs of English and Chinese communication among service providers in health establishments in Khanom District, Nakhon Si Thammarat.

The study aimed to address the first research objective by investigating the problems and needs of healthcare service providers in Khanom District, Nakhon Si Thammarat Province, concerning English and Chinese languages. Sixty questionnaires were distributed across healthcare facilities in the district, achieving a 100 percent response rate and ensuring comprehensive data collection. The collected data were organized into four sections: Personal information of participants, Problems Encountered in English and Chinese Communication Among Service Providers in Health Facilities, Needs for Improving English and Chinese Language Proficiency Among Healthcare Providers, and Preferences for Topics and Format in English-Chinese Communicative Manuals.

1. Personal information of the participants

In part one of the questionnaires, eight questions were used to collect data about participants' personal information, with 60 respondents answering the questionnaires. The findings are represented in the given figure in terms of percentage.

Figure 2 *Personal information of the participants*

Gender	Age	Education level	Working Experience	Opportunity to communicate in English Per week	Opportunity to communicate in Chinese Per week	Level of English Ability	Level of Chinese Ability
Females: 88.33%	20-30 years old: 1.67%	Under Bachelor's degree: 60%	Less than 1 year: 16.66%	Everyday: 1.67%	1-2 days per week: 11.67%	Excellent: 1.67%	Fair: 1.67%
Males: 11.67%	31-40 years old: 28.33%	Bachelor's degree: 15%	1-2 year: 33.33%	3-4 days per week: 15%	Never: 88.33%	Good: 21.67%	Communicable: 98.33%
	41-50 years old: 56.67%	Above Bachelor's degree: 1.67%	3-5 year: 41.66%	1-2 days per week: 75%		Fair: 50%	
	50 years above: 13.33%	Unspecified: 23.33%	More than 5 year: 8.33%	Never: 8.33%		Communicable: 26.66%	

2. Problems Encountered in Using English and Chinese Language and Needs for Development English and Chinese Language Skill Among Providers in Health Establishments in Khanom District, Nakhon Si Thammarat Province

In the second part, the participants were asked to rate their problems and needs for using English and Chinese for communication with closed-ended questions ranked on a five-point Likert-scale (1 = Very Low, 2 = Low, 3 = Moderate, 4 = High, and 5 = Very High). The participants' problems in each statement were analyzed by mean, S.D., and ranked as follows:

Table 1 *English Problem Communication Among Service Providers in Health Establishments in Khanom District, Nakhon Si Thammarat Province*

English Communication Problems	\bar{X}	S.D.	Rank
Listening Skills	3.70	1.09	High
Speaking Skills	3.58	1.10	High
Reading Skills	4.17	1.02	High
Writing Skills	4.58	0.82	Very High
Total	4.01	1.01	High

The results presented in Table 1 indicate that among service providers in health establishments in Khanom District, Nakhon Si Thammarat Province, the problem of using English is observed. Writing skills were found to pose the greatest problem ($\bar{x} = 4.58$), followed

by reading skills ($\bar{x} = 4.17$), and listening skills ($\bar{x} = 3.70$). Conversely, speaking skills exhibited the least problem compared to other skills ($\bar{x} = 3.58$).

Table 2 *Chinese Language Problem Among Service Providers in Health Establishments in Khanom District, Nakhon Si Thammarat Province*

Chinese Language Problem	\bar{X}	S.D.	Rank
Listening Skills	4.91	0.13	Very high
Speaking Skills	4.97	0.26	Very high
Reading Skills	4.97	0.26	Very high
Writing Skills	4.98	0.13	Very high
Total	4.96	0.20	Very high

The findings outlined in Table 2 demonstrate that there were problems with the Chinese language among service providers in health establishments in Khanom District, Nakhon Si Thammarat Province. On average, these problems were at very high ($\bar{x} = 4.96$). Particularly, writing skills proved to be the most problematic ($\bar{x} = 4.98$, closely followed by reading and speaking skills ($\bar{x} = 4.97$). Listening skills in Chinese showed fewer problems compared to other areas of language skill ($\bar{x} = 4.91$).

3. Needs for English and Chinese Language Development Among Service Providers in Health Establishments in Khanom District, Nakhon Si Thammarat Province

In the third part, the participants were asked to rate their needs for English and Chinese language development using closed-ended questions ranked on a five-point Likert scale (1 = Very Low, 2 = Low, 3 = Moderate, 4 = High, and 5 = Very High). The participants' needs in each statement were analyzed by mean, S.D., and ranked as follows:

Table 3 *Need for English Language Development Among Service Providers in Health Establishments in Khanom District, Nakhon Si Thammarat Province*

Need for English Language Development	\bar{X}	S.D.	Rank
Listening Skills	4.55	0.75	Very high
Speaking Skills	4.73	0.61	Very high
Reading Skills	4.00	1.07	Very high
Writing Skills	3.32	1.47	Moderate
Total	4.15	0.98	Very high

The findings revealed in Table 3 highlight the participants' needs for enhancing the English language in the roles of service providers within health establishments in Khanom District, Nakhon Si Thammarat Province. Across all skills considered, the overall average score was the highest ($\bar{x} = 4.15$). Among these skills, participants expressed the strongest need to

improve speaking skills ($\bar{x} = 4.73$), followed by listening skills ($\bar{x} = 4.55$), and reading skills ($\bar{x} = 4.00$), respectively. Conversely, writing skills ranked lowest among the needed skills for development among service providers in health establishments in Khanom District, Nakhon Si Thammarat Province ($\bar{x} = 3.32$).

Table 4 *Need for Chinese Language Development Among Service Providers in Health Establishments in Khanom District, Nakhon Si Thammarat Province*

Need for Chinese Language Development	\bar{X}	S.D.	Rank
Listening Skills	3.42	1.49	Moderate
Speaking Skills	3.60	1.48	High
Reading Skills	2.50	1.44	Low
Writing Skills	1.93	1.34	Low
Total	2.86	1.44	Moderate

Based on Table 4, the needs for enhancing Chinese language among service providers in health establishments in Khanom District, Nakhon Si Thammarat Province were generally at a moderate level ($\bar{x} = 2.86$) across all skills. In descending order of priority, the participants expressed the strongest need to develop speaking skills ($\bar{x} = 3.60$), followed by listening skills ($\bar{x} = 3.42$), and reading skills ($\bar{x} = 2.50$). Writing skills were identified as the least need ($\bar{x} = 1.93$) for language improvement among service providers in health establishments in Khanom District, Nakhon Si Thammarat Province.

4. Need for an English and Chinese Manual for Communication Among Providers in Health Establishments in Khanom District, Nakhon Si Thammarat Province

In the fourth part, the participants were asked to rate their needs on the topics and format of the English and Chinese Manual for Communication using closed-ended questions ranked on a five-point Likert scale, and ranked as follow:

Table 5 *Needs for Topics in English and Chinese Manual for Communication Among Service Providers in Health Establishments in Khanom District, Nakhon Si Thammarat Province*

Contents / Topics in the Manual	\bar{X}	S.D.	Rank
Greeting and Welcoming	4.88	0.42	Very high
Giving Suggestions and Service Information	4.88	0.32	Very high
Telling Benefits of Each Healthcare Service	4.65	0.71	Very high
Inquiring about Health Information	4.85	0.40	Very high
Encouraging Customer Engagement	4.77	0.56	Very high
Negotiating Service Prices	4.83	0.46	Very high
Making Appointments	4.65	0.66	Very high

Expressing Apologies	4.83	0.49	Very high
Expressing Gratitude and Farewells	4.92	0.33	Very high
Well-Wishes and Building Relationships	4.93	0.31	Very high
Total	4.81	0.57	Very high

From Table 5, needs in overall topics in English and Chinese Manual for Communication Among Service Providers in Health Establishments in Khanom District, Nakhon Si Thammarat Province were very high ($\bar{x} = 4.81$). In descending order of priority, the participants prioritized topics such as Well-Wishes and Building Relationships ($\bar{x} = 4.93$), Expressing Gratitude and Farewells ($\bar{x} = 4.92$), Greeting and Welcoming, and Giving Suggestions and Service Information ($\bar{x} = 4.88$). Similarly, topics like Inquiring about Health Information ($\bar{x} = 4.85$), Negotiating Service Prices, and Expressing Apologies ($\bar{x} = 4.83$) were also highly valued. Topics regarding Encouraging Customer Engagement and Inquiring about Health Information ($\bar{x} = 4.77$), Telling Benefits of Each Healthcare Service, and Making Appointments ($\bar{x} = 4.65$) were also significant.

Table 6 Needs for English and Chinese Manual Format for Service Providers in Health Establishments in Khanom District, Nakhon Si Thammarat Province

English-Chinese Manual Format	\bar{X}	S.D.	Rank
Pronunciations and Thai Translations	4.88	0.32	Very high
Pictures	4.88	0.32	Very high
Compact size and Portability	4.85	0.36	Very high
Online Access	4.47	1.02	Very high
Total	4.77	0.50	Very high

From Table 6, the overall format requirements for the English-Chinese communicative manual among service providers in health establishments in Khanom District, Nakhon Si Thammarat Province, were very high ($\bar{x} = 4.77$). Specifically, participants prioritized a manual with pronunciation and Thai translation, along with pictures, were the most prominent ($\bar{x} = 4.88$). Additionally, they expressed a need for a compact-size manual that is easy to use and carry ($\bar{x} = 4.85$), and the ability to download online documents ($\bar{x} = 4.47$).

Research objective 2: To develop an English-Chinese communicative manual for service providers in health establishments in Khanom District, Nakhon Si Thammarat.

Through an investigation into the needs for an English-Chinese communicative manual among health service providers in Khanom District, Nakhon Si Thammarat, coupled with semi-structured interviews, it became evident that proficiency in speaking skills in both languages is crucial, closely followed by listening skills. Participants highlighted the importance of all topics provided in the manual, particularly emphasizing the significance of accurate pronunciation and Thai translation. To effectively develop the manual, a thorough

need analysis was imperative to determine participant needs. Consequently, the researchers employed need analysis theory, participants' language concerns, as well as ESP and CSP theories to develop the final draft, encompassing essential topics as follows:

1. Vocabulary Pertaining to Services Offered in Health Establishments
2. Greetings and Welcoming
3. Providing Advice and Information on Various Service Offerings
4. Describing the Benefits of Different Services
5. Handling Health Inquiries and Providing Information
6. Directing Commands for Service Provision and Soliciting Customer Feedback
7. Negotiating Prices and Handling Appointment Charges, Both In-Person and Over the Phone
8. Offering Apologies and Expressing Regret
9. Extending Gratitude and Farewells
10. Wishing Well and Fostering Positive Relationships

The researchers developed an English-Chinese communicative manual for healthcare service providers in Khanom District, Nakhon Si Thammarat Province. This manual included pronunciation guides and Thai translations to enhance understanding. Responding to participant suggestions from interviews, the manual also integrates illustrations and a QR code for convenient access to downloadable documents, as shown in figure 3.

Figure 3 *English and Chinese Communicative Manual*



Before contributing the English-Chinese communicative manual for service providers in health establishments, the researchers asked three experts who were specialized in the fields of English, Chinese, and healthcare services to evaluate the manual. The three experts were an English lecturer, a Chinese lecturer, and a healthcare manager in a massage and spa business. The evaluation results are shown in Table 7.

Table 7 *Evaluation of English-Chinese Communicative Manual*

Evaluation List	\bar{X}	Rank
1. Format	4.42	High
The manual's compact size, interesting cover design, appropriate font size, and style enhance its portability and readability.		
2. Content	4.40	High
The manual uses suitable language and healthcare-related vocabulary, making it easy to understand. It is well-organized and meets the needs of healthcare service providers.		
3. Usage	4.44	High
The manual's vocabulary and expressions are suitable for use in healthcare settings, aiding service providers. It facilitates better communication in English and Chinese with foreign individuals.		
Total	4.42	High

Table 7 presents the evaluation results of the manual by the three experts. Overall, the manual received high ratings across all aspects ($\bar{x} = 4.42$). Usability scored the highest among the three aspects ($\bar{x} = 4.44$), followed closely by manual format ($\bar{x} = 4.42$), and content ($\bar{x} = 4.40$).

Additional feedback indicated areas for improvement, particularly in addressing spelling errors in Chinese words and incorporating vocabulary and images related to health establishments equipment. Experts were also advised to enhance the manual's appeal and effectiveness by including more sample conversations with accompanying illustrations.

Research Objective 3: To evaluate the satisfaction of service providers in health establishments in Khanom district towards the English-Chinese communicative manual.

To address the third objective of evaluating the satisfaction of service providers in health establishments in Khanom district regarding the English-Chinese communicative manual, the researchers distributed 60 questionnaires to healthcare establishments in Khanom district. All questionnaires were returned, resulting in a 100 percent response rate. Additionally, 20 service providers were purposively selected to participate in interviews. The collected data were organized into two parts: satisfaction with the manual format and satisfaction with the usefulness and implications of the manual. The findings are as follows:

Table 8 *Satisfaction toward the manual's format*

Evaluation List	\bar{X}	S.D.	Rank
The manual's size is suitable and compact, enhancing portability.	3.52	0.65	High
The color and design of the cover of the interesting guide.	3.90	0.62	High
The contents of the manual meet users' needs.	4.38	0.50	High
The contents are groups systematically and easy to understand.	4.42	0.50	High
The contents are organized, relevant and linked to each other.	4.08	0.53	High
The illustrations provided are suitable.	3.97	0.45	High
Total	4.05	0.54	High

Table 8 shows that overall satisfaction with the English-Chinese bilingual manual for communication in health establishments was high ($\bar{x} = 4.05$). Specifically, respondents were most satisfied with the organization of content into categories and its clarity ($\bar{x} = 4.42$). Satisfaction was also high with the manual meeting content needs ($\bar{x} = 4.38$), choice of illustrations ($\bar{x} = 3.97$), attractiveness of color and cover design ($\bar{x} = 3.90$), and compactness and portability ($\bar{x} = 3.52$).

Table 9 *Satisfaction toward the usability of the manual*

Evaluation List	\bar{X}	S.D.	Rank
The manual facilitates communication with foreign customers.	4.63	0.49	Very high
The manual is applicable for serving foreign customers.	4.12	0.58	High
The manual is suitable for practicing communication skills after work.	3.90	0.54	High
The manual is indispensable in your line of work.	4.67	0.51	Very high
Total	4.33	0.53	High

Table 9 shows that the manual's facilitation of communication with foreign customers contributed to the high overall satisfaction with its usability among service providers in health establishments in Khanom District, Nakhon Si Thammarat Province ($\bar{x} = 4.33$). Satisfaction levels varied across different aspects, with the highest being the manual's utility for work ($\bar{x} = 4.67$), followed by its effectiveness in communicating with foreign customers ($\bar{x} = 4.38$), its

applicability for serving foreigners ($\bar{x} = 3.97$), and its support for practicing communication skills after work ($\bar{x} = 3.52$).

Discussion

The study's findings reveal three primary topics that align with the research objectives. These topics can be further explored as follows:

1. English and Chinese language problems among healthcare providers in Khanom District, Nakhon Si Thammarat Province

The research findings suggested that healthcare service providers in Khanom district, Nakhon Si Thammarat Province, encountered significant problems in English across various skills. This aligns with Sriyawong et al.'s (2016) study, which found that Thai massage practitioners lacked proficiency in English communication. However, this study also uncovered that speaking and listening skills among service providers in Khanom district are relatively problematic, echoing Sriyawong et al.'s (2016) study regarding the primary language problems faced by massage staff in Thailand. For instance, difficulties arose when staff could not understand or respond to questions posed by foreign customers. These problems may be attributed to factors such as educational background, work experience, and the frequency of English usage. The interviews conducted in this study supported this notion, revealing that many service providers in Khanom District had educational backgrounds unrelated to healthcare and below bachelor's degrees. This suggested a lack of prior interest in healthcare, resulting in limited exposure to English in their daily lives and a failure to recognize its importance. Additionally, they had few opportunities to engage in English communication with foreign customers at their workplaces. This aligns with Robinson's (1991) argument that learners are most motivated to learn when they have specific goals, particularly those related to their profession. Many participants in this study lacked such objectives and consequently struggled with English and Chinese communication. Surprisingly, when faced with the need to communicate with foreign customers, they expressed a strong desire to improve their language skills. While English communication was deemed more crucial due to greater exposure, participants also expressed a keen interest in learning Chinese if given the opportunity.

2. Needs for English and Chinese Communication Development

The results indicated a high need for English communication development among healthcare service providers in Khanom district, Nakhon Si Thammarat Province, particularly in speaking and listening skills, aligning with Brown's theory (2001), emphasizing the importance of these skills as foundational for communication. However, the need for Chinese communication development was moderate, reflecting the lower frequency of Chinese usage compared to English. This corresponded with Dudley-Evans and St. John's (1998) model, which suggested that learners' objectives were influenced by various factors, including language use patterns and real-life situations. Despite limited opportunities to speak Chinese, participants expressed a strong desire to improve their Chinese speaking and listening skills, recognizing the potential benefits for serving Chinese tourists and enhancing Nakhon Si Thammarat's tourism industry, consistent with Akkrawong et al.'s (2018) findings on the importance of language proficiency in tourism-related services.

3. Examining Content, Themes, and Manual Design

To develop an English-Chinese manual for healthcare service providers in Khanom district, Nakhon Si Thammarat, it was found that participants prioritized learning topics on Well-Wishes and Building Relationships, followed by Expressing Apologies, Greetings, and Expressing Gratitude and Farewells. This aligns with Chiablaem's (2020) study, which identified similar needs among massage staff in Pattaya, Chonburi. These topics are crucial for customer satisfaction as they are frequently used in services. Additionally, there was high demand for topics such as Giving Suggestions, Asking for Health Problems, Negotiating Prices, and Encouraging Customer Engagement, consistent with Wawwaew's (2021) findings on commonly used conversation sentences in the massage service industry. Similarly, in line with Akrawong et al.'s (2018) study, foreign tourists expected healthcare personnel to handle basic English inquiries and service-related matters rather than engage in extensive conversations. Regarding format preferences for English-Chinese manuals, the sample expressed a desire for manuals with pronunciation guides, Thai translations, and visual aids. This preference for simplicity and visual aids aligns with Chiablaem's (2020) recommendation to use simple language and images to aid communication with foreign customers. Furthermore, healthcare service providers in Khanom district expressed a need for downloadable bilingual manuals for convenient self-study outside of work hours, consistent with Chiablaem's (2020) findings highlighting a preference for online manuals for easier access to information, flexible timing, and free of charge.

Conclusion

The research findings highlight significant problems in English and Chinese communication faced by service providers in health establishments in Khanom District, Nakhon Si Thammarat Province. Both English and Chinese present notable problems, particularly in writing skills, while speaking skills pose comparatively fewer problems. Service providers express a strong need to improve their English proficiency, that is by prioritizing speaking and listening skills over reading and writing. Conversely, the need for Chinese language development is moderate, with a focus on enhancing speaking and listening skills. Furthermore, the study revealed a substantial demand for a bilingual manual tailored to the communication needs of service providers, emphasizing the importance of comprehensive content covering various communication aspects in both languages. Service providers emphasized the necessity of pronunciation guides, Thai translations, and user-friendly designs in the manual, indicating high levels of satisfaction with its organization and usability. Overall, the findings underscored the importance of addressing language problems in healthcare settings and the effectiveness of tailored communication resources in meeting the needs of service providers.

Implications

This study provides insights into the problems and needs faced by healthcare service providers in Khanom District, Nakhon Si Thammarat. The findings serve as valuable resources for relevant organizations, educators, and curriculum developers, facilitating the design of courses, innovative lessons, and other educational materials tailored to meet the specific needs of learners. Additionally, the results of this study are beneficial for healthcare organizations in Nakhon Si Thammarat, aiding in the preparation of personnel to cater to the growing number of foreign tourists who communicate in English and Chinese. This enhances the province's healthcare industry and its appeal to international visitors.

Limitations and Recommendations for Future Research:

The study's limitations include the impact of the COVID-19 pandemic, which significantly reduced the number of foreign tourists during the initial data collection phase. This decline affected healthcare service providers in Khanom District, Nakhon Si Thammarat Province, leading to career transitions and relocations for many individuals, thereby impacting service delivery in healthcare establishments. While there was some improvement towards the end of the previous year due to the gradual reopening of the country and an uptick in foreign tourists, particularly from China, insufficient promotion hindered the development of health tourism in Nakhon Si Thammarat Province. Future research could involve a larger participant size and broader settings. Additionally, alternative data collection methods, such as observation, could be explored to gain deeper insights into the gathered information.

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