

Assessing English Language Learning Anxiety Among Nursing Students

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Abstract

Foreign language anxiety represents a significant affective barrier to successful language learning, particularly among nursing students who need English competence for professional communication within an increasingly international healthcare environment. This study investigated the level of English language learning anxiety among nursing students and examined classroom situations that generated the highest and lowest levels of anxiety. A quantitative descriptive approach was applied to 30 nursing students. Data were obtained through a 33-item questionnaire adapted from the Foreign Language Classroom Anxiety Scale (FLCAS) developed by Horwitz, Horwitz, and Cope (1986). The questionnaire employed a five-point Likert scale ranging from strongly disagree to strongly agree. The data were analyzed descriptively by calculating item-level mean scores and grouping the results into low, moderate, and high anxiety categories. The findings revealed a moderate overall level of English language learning anxiety, reflected by an average score of 3.21 out of 5.00, corresponding to approximately 106 of 165 points. The highest anxiety occurred during unprepared speaking, fear of course failure, and comparison with more proficient peers. Lower anxiety was associated with interaction with native speakers and limited test-preparation pressure. The findings indicate that anxiety is primarily performance- and evaluation-oriented, highlighting the need for supportive, scaffolded speaking activities and low-stakes assessment practices in English for Nursing instruction.

Keywords

Foreign Language Anxiety; English Language Learning; Nursing Students; FLCAS; English For Specific Purposes



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INTRODUCTION

English proficiency has become an increasingly important component of professional competence in nursing education and practice. The development of health services, international mobility, access to global medical information, and cross-cultural interaction has created a growing need for nurses to communicate effectively in English. Nurses may encounter English-language medical literature, communicate with patients from different linguistic backgrounds, collaborate with international health professionals, and participate in professional development programs that require English proficiency. In addition, the ability to use English can support nurses who intend to pursue professional certification, further education, or employment opportunities in international healthcare settings. For these

reasons, English courses, including English for Specific Purposes (ESP) and English for Nursing Purposes (ENP), have increasingly been incorporated into nursing education curricula. The teaching of English to nursing students, therefore, is not merely intended to develop general language competence but also to prepare students to use English in academic, clinical, and professional contexts.

Despite its importance, learning English as a foreign language involves more than the acquisition of linguistic knowledge and cognitive skills. Students' success in learning a foreign language can also be influenced by affective factors such as motivation, confidence, attitudes, self-perception, and anxiety. Among these factors, anxiety has received considerable attention because of its potential to interfere with students' ability to participate actively in language-learning activities. Horwitz, Horwitz, and Cope (1986) introduced the concept of foreign language anxiety (FLA) to describe a situation-specific form of anxiety associated with foreign language learning. FLA is understood as a complex combination of learners' perceptions, beliefs, feelings, and behaviors that emerge from the particular characteristics of the foreign language-learning process. Thus, foreign language anxiety differs from general anxiety because it is closely associated with particular situations in which learners are required to understand, speak, read, write, or perform in a language that is not their first language. A student, for example, may demonstrate confidence and competence in other academic subjects but experience nervousness, embarrassment, or fear when asked to speak English in front of classmates.

The problem becomes particularly relevant in nursing education because English learning is often accompanied by demands that require students to demonstrate both language competence and professional understanding. Nursing students may be expected to understand medical terminology, participate in discussions, perform oral presentations, respond to questions, and communicate clinical information in English. Such activities can create psychological pressure when students perceive their English ability as inadequate. Limited opportunities to practice English, differences in students' prior English-learning experiences, fear of making grammatical or pronunciation errors, and concerns about classmates' or lecturers' judgments may further intensify anxiety. In addition, nursing curricula generally place substantial emphasis on clinical and professional subjects, which may result in relatively limited instructional time being allocated to English. Consequently, students may have insufficient opportunities to develop confidence through repeated and meaningful language practice. Anxiety may therefore become an important barrier to effective participation in English learning, particularly when students are required to communicate orally.

Foreign language anxiety is commonly conceptualized through three closely related dimensions: communication apprehension, test anxiety, and fear of negative evaluation (Horwitz et al., 1986). Communication apprehension refers to anxiety associated with communicating or interacting using a foreign language, particularly when students are required to speak spontaneously. Test anxiety concerns the tension and worry experienced when students are evaluated through language tests or other forms of formal assessment. Meanwhile, fear of negative evaluation is related to students' concern that their language performance will be judged negatively by teachers or peers. These dimensions provide an important framework for understanding why students may experience anxiety even when they possess sufficient basic knowledge of English. Research has demonstrated that foreign language anxiety can influence students' willingness to communicate, participation in

classroom activities, confidence, and language-learning achievement (Aida, 1994; MacIntyre & Gardner, 1989). Therefore, identifying the level and sources of anxiety is important for developing language instruction that responds to students' psychological as well as linguistic needs.

Several previous studies have demonstrated the existence of foreign language anxiety among students learning English in different contexts. Wahyudi (2017), for example, investigated English-speaking anxiety among nursing science students in Palembang, Indonesia. The findings indicated that nursing students experienced considerable anxiety when using English for speaking activities. This finding is important because speaking requires students to produce language directly and often spontaneously, making it particularly vulnerable to feelings of nervousness and fear of making mistakes. The study suggests that nursing students' English-learning challenges cannot be understood solely in terms of linguistic competence but should also consider affective factors that influence their willingness and confidence to communicate.

A similar concern was identified by Pramusita, Situmorang, and Nugroho (2022), who examined foreign language anxiety among nursing students participating in online English learning. Their study reported that nearly 70% of the participants experienced a moderate level of anxiety, with test anxiety emerging as the most dominant category. The finding demonstrates that anxiety among nursing students is not limited to face-to-face communication but may also occur in technology-mediated learning environments. The prominence of test anxiety further indicates that assessment situations can become a significant source of psychological pressure for students. In this context, the way English learning is assessed may influence students' emotional responses and consequently their classroom engagement. Research involving EFL learners outside nursing education has also provided evidence that moderate levels of foreign language anxiety are relatively common. Hidayati (2018), for instance, reported the presence of moderate foreign language anxiety among Indonesian EFL learners. This finding indicates that anxiety is not necessarily restricted to students with very low English proficiency. Students with different levels of competence may experience anxiety when they encounter situations that require them to demonstrate their English ability. Similarly, Yayli (2012) identified moderate levels of foreign language anxiety among EFL learners, reinforcing the argument that anxiety is a recurring affective issue in foreign language classrooms. These findings are relevant to nursing education because nursing students are also EFL learners who encounter many of the same classroom pressures, while simultaneously facing additional demands related to their professional field.

The theoretical foundation for examining foreign language anxiety has also been strengthened by research conducted by Aida (1994). Her investigation of foreign language anxiety among university students demonstrated the relevance of the FLCAS framework for identifying anxiety associated with foreign language learning. The findings supported the multidimensional nature of anxiety and highlighted the importance of examining learners' experiences within particular classroom situations. Rather than viewing anxiety as a single general psychological condition, this perspective allows researchers to identify the specific circumstances that generate students' discomfort. Such an approach is particularly useful for nursing students because their English-learning experiences may involve specialized classroom activities such as medical vocabulary exercises, clinical communication, presentations, role plays, and examinations.

MacIntyre and Gardner (1989) further contributed to the understanding of language anxiety by demonstrating its relationship with foreign language learning and performance. Their work emphasized that anxiety can interfere with cognitive processing during language learning. When students become overly concerned about their performance, their attention may be divided between the language task and their worries about making mistakes or being evaluated. This condition can make language processing more difficult and potentially reduce students' ability to demonstrate their actual competence. In the nursing context, this issue deserves particular consideration because effective communication is an essential component of professional preparation. Students who possess adequate knowledge but experience high anxiety may nevertheless hesitate to communicate or participate actively in English-language activities.

Tóth (2008) also provided support for the continued use of the Foreign Language Classroom Anxiety Scale (FLCAS) as an instrument for examining anxiety in foreign language classrooms. The widespread application of the FLCAS across different learner populations demonstrates its relevance for measuring students' perceptions and emotional responses during language learning. Horwitz et al. (1986) originally reported high internal reliability for the instrument, with a Cronbach's alpha of .93, while subsequent studies have employed and examined the instrument in different educational and cultural contexts. These studies collectively indicate that FLA is a meaningful construct that can be examined systematically rather than treated simply as a subjective impression of students' nervousness. Although the findings of previous studies consistently indicate that foreign language anxiety exists among EFL learners, several limitations remain. First, a substantial proportion of previous research has examined foreign language anxiety among general university EFL learners rather than focusing specifically on nursing students. Second, studies involving nursing students have often emphasized the overall level of anxiety or particular aspects such as speaking anxiety or anxiety during online learning. Although these findings provide valuable evidence, they do not necessarily reveal the complete pattern of classroom situations that make nursing students anxious. Third, knowing that students experience a moderate or high level of anxiety is not sufficient for developing effective pedagogical interventions. Lecturers also need to know which particular classroom experiences generate the greatest anxiety and which situations are relatively less problematic for students. Without such information, efforts to reduce anxiety may remain too general and may not directly address students' actual classroom experiences.

The gap becomes more significant when nursing students are considered as a distinctive population. Nursing students learn English within a professional context in which communication is closely associated with healthcare practices. Their anxiety may therefore be influenced not only by conventional foreign-language learning factors but also by concerns related to accuracy, professional terminology, performance expectations, and future clinical communication. The specific combination of language learning and nursing education creates a context that warrants further investigation. Accordingly, examining nursing students' anxiety at the item or classroom-situation level can provide a more detailed understanding than simply reporting an overall anxiety score. The novelty of the present study lies in its focus on identifying the specific classroom situations that contribute most and least to English language learning anxiety among nursing students, in addition to describing their overall anxiety level. Rather than treating foreign language anxiety as a single undifferentiated phenomenon, this study examines students' responses to individual

FLCAS-related statements to determine the situations associated with greater or lower anxiety. This approach can provide more practical information for English and English for Nursing Purposes instructors. For example, if communication activities produce higher anxiety than other learning activities, instructors may need to introduce gradual speaking practice, supportive peer interaction, structured preparation, or low-stakes communication tasks. Conversely, if particular activities generate relatively low anxiety, those activities may provide a useful foundation for developing students' confidence before they engage in more demanding communication tasks.

Based on this background, the present study aims to investigate English language learning anxiety among nursing students. Specifically, the study has two objectives: first, to describe the overall level of English language learning anxiety experienced by nursing students; and second, to identify the classroom situations that contribute most and least to their anxiety. By addressing these objectives, the study is expected to provide empirical information that can assist English and ESP/ENP instructors in understanding nursing students' affective experiences during language learning. The findings may also support the development of more responsive teaching strategies that create a supportive classroom environment, encourage students' willingness to communicate, and reduce unnecessary anxiety while maintaining appropriate academic and professional learning expectations.

METHOD

This study adopted a quantitative descriptive approach to examine the level of English language learning anxiety among nursing students. The descriptive design was selected because it enables the researcher to portray a phenomenon systematically as it occurs naturally, without introducing experimental manipulation or altering the variables under investigation (Sugiyono, 2017). The participants comprised 30 undergraduate nursing students at [Institution Name] who were taking an English or English for Nursing Purposes course during the [semester/academic year]. Participation was voluntary, and all students within the accessible population were included in the study through a total sampling technique. This sampling approach was considered appropriate because of the relatively limited number of students available as the research population. For studies involving larger populations or participants drawn from several institutions, probability-based sampling may be considered to improve the representativeness and generalizability of the findings.

The data were obtained through a 33-item questionnaire adapted from the Foreign Language Classroom Anxiety Scale (FLCAS) developed by Horwitz, Horwitz, and Cope (1986). The wording of several items was adjusted based on versions employed in previous studies by Palaleo and Srikajang to make the instrument more relevant to the context of English learning among nursing students. Each statement was measured using a five-point Likert scale, ranging from Strongly Disagree (1) to Strongly Agree (5). Because some statements were positively formulated, nine items—namely items 2, 5, 8, 11, 14, 18, 22, 28, and 32—were reverse-coded during data processing. This procedure ensured that the direction of the scores was consistent, with higher recoded values uniformly representing a higher degree of foreign language anxiety. The use of the FLCAS is supported by its established psychometric record; the original instrument demonstrated high internal consistency, with a Cronbach's alpha coefficient of .93 (Horwitz et al., 1986), and its application has subsequently been reported across various learner populations and educational contexts (Aida, 1994; Tóth, 2008).

Data collection was conducted by administering the questionnaire to the participants

in [printed/online, e.g., Google Form] format during [describe data collection procedure/timing]. The responses were organized according to the frequency of participants selecting each response category for every questionnaire item. Descriptive analysis was subsequently performed by calculating the mean for each item using the formula $\text{mean} = \Sigma(\text{frequency} \times \text{weight}) / N$, where N represents the total number of respondents ($N = 30$). For interpretive purposes, the mean scores were divided into three levels of anxiety based on the interval calculation of $(\text{highest score} - \text{lowest score}) / \text{number of categories}$. Accordingly, scores from 1.00 to 2.33 were interpreted as low anxiety, scores from 2.34 to 3.66 as moderate anxiety, and scores from 3.67 to 5.00 as high anxiety. The overall level of English language learning anxiety was determined by calculating the average of the anxiety-equivalent mean scores across all 33 items. It should be noted that the available dataset was organized in aggregated frequency form rather than individual respondent-level data. Consequently, the dataset was sufficient for calculating item-level means, standard deviations, and anxiety classifications, but it did not permit the examination of internal consistency reliability, such as Cronbach's alpha, or the application of correlational and inferential statistical procedures. Future research should preserve individual-level response data to facilitate more comprehensive reliability testing and inferential analysis.

FINDINGS AND DISCUSSION

Overall Level of Anxiety

The descriptive findings obtained from the 33-item questionnaire indicate that the nursing students experienced a moderate level of anxiety in learning English as a foreign language. The overall anxiety-equivalent mean was 3.21 on a five-point scale, placing the participants within the moderate anxiety category. The standard deviation values calculated across the individual items ranged from 0.67 to 1.35, indicating some variation in the intensity of anxiety experienced by the students across different classroom situations. When converted into an aggregate score, the mean corresponds to approximately 106.03 out of the maximum possible score of 165. This finding indicates that although the students did not demonstrate an exceptionally high level of English language learning anxiety, anxiety remained sufficiently evident to warrant attention in the instructional process. In other words, the students' emotional responses to English learning were neither minimal nor severe, but occupied an intermediate position that may still influence their engagement and confidence during classroom activities.

The present finding is broadly comparable with evidence reported in earlier studies conducted among EFL learners in Indonesia. Hidayati (2018), for example, identified a similar pattern of foreign language classroom anxiety among students who were not majoring in English, with a reported FLCAS total mean score of 102.17. The relatively close scores suggest that moderate anxiety can occur among university students regardless of their academic specialization. More specifically, the result also corresponds with the findings of Pramusita et al. (2022), who reported that most nursing students experienced a moderate degree of anxiety while participating in English learning activities. The consistency between the present findings and those of previous research strengthens the indication that foreign language anxiety represents a recurring affective feature of EFL learning rather than an isolated condition experienced by a particular group of students.

Furthermore, the finding can be considered consistent with Wahyudi (2017), who identified notable English-speaking anxiety among nursing students. Taken together, these studies suggest that moderate foreign language anxiety may be relatively common among

Indonesian EFL learners, including students enrolled in nursing programs. Nevertheless, its classification as moderate should not lead educators to regard the issue as insignificant. Even a moderate degree of anxiety may reduce students' willingness to communicate, limit active classroom participation, and weaken confidence when they are required to use English. Therefore, the finding highlights the importance of creating supportive English-learning environments in nursing education that provide students with sufficient opportunities to practice communication without excessive fear of making mistakes or receiving negative judgments. Table 1 presents the descriptive statistics for each of the 33 items.

Table 1. Descriptive Statistics of FLCAS Items (N = 30)

No	Statement	Mean	Anxiety-Eq. Mean	Category
1	I never feel quite sure of myself when I am speaking in my foreign language class	3.23	3.23	Moderate
2	I don't worry about making mistakes in language class	2.77	3.23	Moderate
3	I tremble when I know that I'm going to be called on in language class	3.40	3.40	Moderate
4	It frightens me when I don't understand what the instructor is saying in the foreign language	3.47	3.47	Moderate
5	It wouldn't bother me at all to take more foreign language classes	3.47	2.53	Moderate
6	During language class, I find myself thinking about things that have nothing to do with the course	3.00	3.00	Moderate
7	I keep thinking that the other students are better at languages than I am	3.80	3.80	High
8	I am usually at ease during tests in my language class	3.43	2.57	Moderate
9	I start to panic when I have to speak without preparation in language class	3.97	3.97	High
10	I worry about the consequences of failing my foreign language class	3.90	3.90	High
11	I don't understand why some people get so upset over foreign language classes	3.40	2.60	Moderate
12	In language class, I can get so nervous I forget things I know	3.70	3.70	High
13	It embarrasses me to volunteer answers in my language class	3.57	3.57	Moderate
14	I would not be nervous about speaking the foreign language with native speakers	3.07	2.93	Moderate
15	I get upset when I don't understand what the instructor is correcting	3.13	3.13	Moderate
16	Even if I am well prepared for language class, I feel anxious about it	3.67	3.67	High
17	I often feel like not going to my language class	3.40	3.40	Moderate

No	Statement	Mean	Anxiety-Eq. Mean	Category
18	I feel confident when I speak in foreign language class	3.13	2.87	Moderate
19	I am afraid that my language instructor is ready to correct every mistake I make	3.10	3.10	Moderate
20	I can feel my heart pounding when I am going to be called on in language class	3.50	3.50	Moderate
21	The more I study for a language test, the more confused I get	2.73	2.73	Moderate
22	I don't feel pressure to prepare very well for language class	3.37	2.63	Moderate
23	I always feel that the other students speak the foreign language better than I do	3.80	3.80	High
24	I feel very self-conscious about speaking the foreign language in front of other students	3.37	3.37	Moderate
25	Language class moves so quickly I worry about getting left behind	3.10	3.10	Moderate
26	I feel more tense and nervous in my language class than in my other classes	3.00	3.00	Moderate
27	I get nervous and confused when I am speaking in my language class	3.40	3.40	Moderate
28	When I am on my way to language class, I feel very sure and relaxed	3.40	2.60	Moderate
29	I get nervous when I don't understand every word the language instructor says	3.37	3.37	Moderate
30	I feel overwhelmed by the number of rules you have to learn to speak a foreign language	2.80	2.80	Moderate
31	I am afraid that the other students will laugh at me when I speak the foreign language	3.47	3.47	Moderate
32	I would probably feel comfortable around native speakers of the foreign language	3.53	2.47	Moderate
33	I get nervous when the language instructor asks questions that I haven't prepared for in advance	3.73	3.73	High

Note. Mean = raw item mean (1–5 scale). Anxiety-Equivalent Mean = mean after reverse-scoring of positively worded items (items 2, 5, 8, 11, 14, 18, 22, 28, 32), such that a higher value consistently reflects greater anxiety. Category: Low = 1.00–2.33; Moderate = 2.34–3.66; High = 3.67–5.00.

Sources of the Highest Anxiety

The analysis identified seven questionnaire items that fell within the high-anxiety range, indicating that several specific classroom experiences generated substantially greater psychological pressure among the nursing students than others. The highest level of anxiety was associated with item 9, which concerns situations in which students are required to speak spontaneously without sufficient preparation. This item recorded the highest mean score ($M = 3.97$), suggesting that unplanned oral communication represents the most prominent anxiety trigger for the participants. The finding indicates that students may feel

particularly vulnerable when they have limited time to organize their ideas, select appropriate vocabulary, or formulate grammatically accurate responses before speaking. Such situations can increase nervousness because students must simultaneously process language and respond to an immediate communicative demand.

The second-highest mean was obtained for item 10, which reflects students' concern about the consequences of failing a foreign language course ($M = 3.90$). This result suggests that anxiety is also connected to students' perceptions of academic consequences. The possibility of receiving a poor grade or failing the course may create pressure that extends beyond individual classroom activities. In addition, two items related to social comparison recorded identical mean scores of 3.80. Item 7 reflects the tendency to perceive classmates as more capable language learners, whereas item 23 concerns the perception that other students speak the foreign language better. The similarity between these scores suggests that students' evaluations of their own English ability may be strongly influenced by comparisons with peers. Feelings of inadequacy may become more pronounced when students perceive themselves as less proficient than their classmates.

Three other items also reached relatively high levels of anxiety. Item 33, concerning the fear of being asked questions without prior preparation, produced a mean of 3.73. Item 12, which reflects concern about forgetting previously learned material when experiencing pressure, recorded a mean of 3.70. Meanwhile, item 16, addressing anxiety that persists even when students have prepared adequately, obtained a mean of 3.67. Collectively, these findings demonstrate that anxiety among the participants is particularly associated with spontaneous performance, academic failure, peer comparison, and perceived inability to retrieve knowledge under pressure. These patterns suggest that instructors may need to provide gradual opportunities for spontaneous communication, supportive feedback, and low-risk speaking practice to help students develop greater confidence in using English.

These findings indicate that the students' anxiety is concentrated around unplanned oral performance, evaluative consequences, and unfavorable social comparison with peers—patterns that closely correspond to the fear of negative evaluation and test anxiety components of Horwitz et al.'s (1986) theoretical model, and which have also been confirmed in subsequent validation studies (Aida, 1994; MacIntyre & Gardner, 1989). This pattern is particularly consistent with Pramusita et al. (2022), who identified test anxiety—manifested through fear of failing, being overwhelmed by course material, and panicking when unable to comprehend feedback—as the most dominant anxiety category among nursing students. For nursing students specifically, this concentration of anxiety around spontaneous, unprepared performance is noteworthy because clinical communication in real healthcare settings is often unplanned and time-pressured; students who are highly anxious about unrehearsed speech in the classroom may carry that same apprehension into future clinical English interactions if it is not addressed during their academic training.

Sources of the Lowest Anxiety

In comparison with the items associated with higher anxiety, several statements produced the lowest anxiety-equivalent mean scores, indicating classroom situations that were relatively less distressing for the nursing students. The lowest score was recorded for item 32, which addresses students' comfort when interacting with native speakers of the target language. After reverse scoring, this item obtained a mean of 2.47. The result suggests that, despite experiencing anxiety in particular English-learning situations, the participants did not generally perceive interaction with native English speakers as an extremely

threatening experience. This may indicate that their anxiety is more closely related to specific classroom demands than to the presence of English speakers themselves.

The second-lowest anxiety-equivalent score was found for item 5, concerning students' willingness to attend additional foreign language classes. With a reverse-scored mean of 2.53, the finding indicates that participating in further English instruction was not perceived as a major source of discomfort. This result is followed by item 8, which examines students' feelings during language-class tests. Its reverse-scored mean of 2.57 suggests that formal assessment situations, although potentially anxiety-provoking, were relatively less problematic than spontaneous speaking or unexpected classroom questioning. Similarly, item 28, which relates to students' emotional state before entering the language classroom, obtained a reverse-scored mean of 2.60. This indicates that students generally did not experience an extremely strong sense of nervousness or insecurity before attending English classes. Finally, item 22, concerning pressure to prepare thoroughly for language lessons, recorded a mean of 2.63 after reverse scoring. Taken together, these findings demonstrate that the lowest levels of anxiety were associated with attending additional English classes, interacting with native speakers, taking language tests, entering the classroom, and preparing for lessons. The pattern suggests that the participants' anxiety was relatively situation-specific rather than a constant negative response toward English learning as a whole.

The relatively low anxiety associated with imagined interaction with native speakers and general willingness to continue studying English suggests that the students' anxiety is not a global aversion to the English language itself, but rather a situation-specific reaction tied to the performance and evaluative demands of the classroom—reinforcing Horwitz et al.'s (1986) original conceptualization of foreign language anxiety as a distinct, classroom-situated construct rather than a stable personality trait. This distinction carries an encouraging pedagogical implication: because the anxiety is concentrated in specific, identifiable classroom situations (unprepared speaking, testing, and social comparison) rather than in a fundamental dislike of English, it is likely to be responsive to targeted instructional interventions rather than requiring a wholesale change in students' attitudes toward the language.

Pedagogical Implications

Taken together, these findings suggest several practical strategies for English/ESP instructors in nursing programs. First, since unprepared speaking was the single greatest source of anxiety, instructors could gradually scaffold spontaneous speaking tasks—for example, by first providing partial preparation time or sentence starters before progressively reducing this support—so that students build tolerance for unplanned communication in a low-stakes manner. Second, given the prominence of fear of failing and test-related anxiety, formative, low-stakes assessment formats (e.g., ungraded practice quizzes, peer feedback, or portfolio-based assessment) may help reduce the perceived threat associated with evaluation. Third, because unfavorable comparison with peers emerged as a notable stressor, classroom activities that emphasize individual progress and collaborative rather than competitive peer interaction (e.g., small-group or pair practice instead of whole-class cold-calling) may help alleviate socially driven anxiety. These recommendations align with prior calls in the literature for anxiety-aware ESP instruction in health-science education (Pramusita et al., 2022; Wahyudi, 2017).

CONCLUSION

The present investigation examined English language learning anxiety among 30 nursing students by employing an adapted form of the Foreign Language Classroom Anxiety Scale (FLCAS). The results indicate that the participants demonstrated a moderate degree of anxiety, as reflected by an overall mean of 3.21 on a five-point scale and an estimated total score of approximately 106 out of 165. This finding is in line with previous research involving nursing students as well as learners of English as a foreign language in comparable educational settings. A closer examination of the individual items reveals that students' anxiety was particularly pronounced when they were expected to speak English without adequate preparation, when they were concerned about the possibility of failing the course, and when they perceived their classmates as more proficient in English. In contrast, relatively lower anxiety was associated with situations involving interaction with native English speakers and limited pressure to prepare for language-class assessments. These patterns indicate that the participants' anxiety was primarily associated with performance demands and concerns about evaluation rather than with a broad negative attitude toward English itself. Accordingly, classroom-based interventions may be more effective when they directly address these specific sources of anxiety. Strategies such as gradually structured spontaneous-speaking activities, formative assessments with limited consequences, supportive feedback, and classroom practices that minimize excessive peer comparison may help students develop confidence while using English.

Several methodological limitations should nevertheless be considered when interpreting these findings. The study involved only 30 participants from a single institution, which limits the extent to which the results can be generalized to nursing students in other educational settings. Furthermore, the cross-sectional design provides a description of anxiety at a particular point in time and does not capture possible changes in students' anxiety throughout their English-learning experience. The reliance on self-reported questionnaire responses may also be influenced by participants' subjective perceptions. In addition, because the available dataset was provided in aggregated rather than individual-level form, reliability testing and inferential statistical procedures could not be conducted. Future investigations should therefore recruit larger samples from multiple nursing institutions and preserve individual respondent-level data so that the reliability of the instrument and relationships between anxiety and other variables can be statistically examined. Potential variables include English proficiency and performance in clinical communication. Further studies could also adopt a mixed-methods approach by combining FLCAS results with interviews or other qualitative techniques, allowing researchers to investigate more deeply the contextual and experiential factors underlying nursing students' English language learning anxiety.

References

- Aida, Y. (1994). Examination of Horwitz, Horwitz, and Cope's construct of foreign language anxiety: The case of students of Japanese. *The Modern Language Journal*, 78(2), 155–168.
- Hidayati, T. (2018). Student language anxiety in learning English (A survey to non-English major students in rural area). *Indonesian Journal of English Language Teaching and Applied Linguistics*, 2(2), 1–14.
- Horwitz, E. K., Horwitz, M. B., & Cope, J. (1986). Foreign language classroom anxiety. *The Modern Language Journal*, 70(2), 125–132.

- MacIntyre, P. D., & Gardner, R. C. (1989). Anxiety and second-language learning: Toward a theoretical clarification. *Language Learning*, 39(2), 251–275.
- Pramusita, S. M., Situmorang, K., & Nugroho, D. Y. (2022). Sudden shift to English online learning: Nursing students' anxiety levels. *Linguistic, English Education and Art (LEEA) Journal*, 6(1), 162–176. <https://doi.org/10.31539/leea.v6i1.4981>
- Sugiyono. (2017). *Metode penelitian kuantitatif, kualitatif, dan R&D*. Alfabeta.
- Tóth, Z. (2008). A foreign language anxiety scale for Hungarian learners of English. *Working Papers in Language Pedagogy*, 2, 55–78.
- Wahyudi, A. (2017). The English speaking anxiety of nursing science students of STIK Bina Husada Palembang. In *Proceedings of the Sixth International Conference on Languages and Arts (ICLA 2017)* (pp. 65–69). Atlantis Press. <https://doi.org/10.2991/icla-17.2018.13>
- Yayli, D. (2012). Foreign language anxiety level of a group of university summer school students. *Procedia - Social and Behavioral Sciences*, 46, 1401–1405. <https://doi.org/10.1016/j.sbspro.2012.05.310>