Exploring the Relationship between Life Quality and Speaking Ability of Iranian Intermediate EFL Learners

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Abstract
Despite its direct relevance to second/foreign language learning, quality of life has been a neglected area within Second Language Acquisition (SLA) research. The present study sought to investigate the relationship between quality of life factors and speaking skill as one of the most challenging parts of L2 learning. To this end, an adapted version of life quality questionnaire originally devised by the World Health Organization (WHO) was administered to 100 female intermediate Iranian EFL learners. In addition, 30 of the participants were randomly selected to take part in follow-up semi-structured interviews which asked why the respondents felt the way they reported. The analysis of data obtained from questionnaire and interviews revealed that although all the four domains of life quality namely physical, psychological, social, and environmental domains had impact on the speaking ability of the participants, a number of facets in physical and psychological domains were more influential. Furthermore, the statistical Pearson correlation analysis demonstrated a positive correlation between life quality factors dominating learner’s success in speaking tasks. The findings of this study have implications for teacher educators and educational decision makers in bringing about higher levels of speaking ability and Quality Of Life (QOL) among English language learners.

Keywords: Quality of life, Speaking skill, Physical factors, Psychological factors, Social factors, Environmental factors.

Introduction
In today’s era, knowing a foreign language other than one’s native language has evolved to be extremely beneficial. Whether viewed from the financial, educational, or social aspect, being able to communicate in a foreign language helps to make real connection with people and provides a better understanding of today’s life. However, learning an additional language is not an easy task because there are myriad of factors that hugely influence the success of the learner. In the realm of Second Language Acquisition (SLA), these factors have always been under close attention.

For instance, in the field of psycholinguistics, vast amount of research on learner's motivation and their attitudes towards language learning has demonstrated that these factors are vital predictors of second language success (Csizer & Dornyei, 2005; Mantle-Bromley, 1995). Moreover, research has shown that not only peers but also parents, teachers, and instructors all play a crucial role in the extent to which motivation and attitude impact achievement in L2 learning (Samimy& Rardin, 1994; Takahashi, 1998).

In the field of sociolinguistic, the social economic status and parent's educational levels have been proved to be important in achieving L2 learning (Dale, Harloar, & Plomin, 2012; Reese, Garnier, Gallimore, &Goldenberg, 2000). Also, environmental issues have been
considered to have positive association with L2 outcomes (Dejong, 2002: Lopez & Tashakkori, 2006). Furthermore, there are other factors that have been found to be affective in additional language learning such as, extensive reading, and opportunities to use the second language outside of classroom (Carhill, Suarez-orozco & Paez, 2008).

Since factors influencing L2 acquisition have been investigated independently, it is worthwhile to synthesize all those factors from a holistic perspective. One crucial yet under-investigated factor that views L2 learner as a whole person is learner's quality of life (QOL). WHO defines QOL as "an individual's perceptions of their position in life, in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards, and concerns" (WHOQOL Group, 1998, p. 551).

**Literature Review**

Most of the previous studies investigating the effect of life quality on different aspects of L2 learning have adapted the framework of QOL developed by WHO (Skevington, Sartorius, Amir & the WHOQOL-Group, 2004) which is a questionnaire-based survey over a ten year period, beginning in 1991. Through the collaborative teamwork of 20 field centers in 18 countries, the WHOQOL development group collected 1,800 items relevant to an individual’s different aspects of life. The WHOQOL development team reduced the original 1,800 items down to 236, and then down further to 100 items. The items were then categorized into 29 facets in six domains for the questionnaire and tested in different cultural settings, collecting data from 11,053 participants around the world for the development of the measurement (WHOQOL Group, 1998). After the development of the questionnaire, WHOQOL-100, numerous studies were conducted adopting the questionnaire as an instrument (Hwang & Tang, 2012).

To name some of those studies, the European Foundation (EUROFOUND) investigated different variables such as, family life, social life, education, income, employment, health, housing, and environment around 30 countries in Europe for the improvement of working and living conditions (EUROFOUND, 2012). With the same objectives Jacksonville Community Council, Inc. conducted an experiment for evaluating Americans' well-being in seven states (JCCI, 2012).

In the last two decades, the improvement of medical efficacies on health-related QOL research was mainly attempted on general population or diseased people but not on students in different educational settings (Davis, Waters, Shelly, 2008; Feng, 2007; Ibrahim, Björnsdottir, Alwan & Honore, 2014). In spite of the fact that in recent studies the effect of life quality on education has been enormously highlighted, QOL in educational research in general and in SLA research in particular, has not received its deserving attention. An exception is the work of Hicks, Herndon, Hitton, Atton & Armstrong (2013) who used a quality of life questionnaire that measured the college student's health status, lifestyle, mental health, and living conditions. The analysis of results revealed a substantial snapshot of the current lifestyle, college life stressors and health behaviors among on- and-off campus students at an institution in North Carolina.

Another similar study was the work of Al-zboon, Fathi, and Theeb (2014) who investigated the life quality of students with disabilities attending Jordanian universities. Results indicated that students with disabilities had a medium level of life quality; the highest mean was for religious and spiritual domain and the lowest mean was for cognitive mental domain. Moreover, there were statistically significant differences in the total score due to gender in favor of females.
A recent research was conducted by Yang (2016) who examined Chinese college students' perceptions of influence of life quality on L2 achievement. The findings indicated that different facets such as psychological and environmental factors, were more influential in L2 achievement.

Another study was done by Kitratporn, and Puncreobutr (2016) concerning the relationship between quality of work life and organizational climate at schools located along the Thai-Cambodian borders. The result of correlation analysis demonstrated that there was a strong positive association between quality of work life and organizational climate. However, the association among the individual dimensions of quality of work life and organizational climate was found to be moderate/weak.

So far the QOL framework has only been applied to foreign educational settings but little is known about the effect of living conditions on Iranian language learners’ L2 achievement. To the best of the authors’ knowledge no studies have addressed this issue in the Iranian literature so far, except for the one carried out by Baleghizadeh and Gordani (2012) who examined the relationship between motivation and quality of work life among secondary school EFL teachers. They discovered that the EFL teachers enjoyed a medium level of quality of work life and experienced a medium-to-low level of motivation. The statistical analysis also revealed a significant correlation between motivation and quality of work life.

The present study

Given the paucity of research on the relationship between QOL and Iranian learners’ L2 achievement, further research in this area seems necessary. The present study was an attempt to fill in this gap in the literature. In so doing, the study focused on a crucial yet challenging aspect of language learning for Iranian learners, that is, speaking skill.

Previous studies have reported that speaking skill is the most important skill for ESL/EFL language learners (Arnold & Brown, 1999). An effective speaker can gain the attention of the audience and hold it till the completion of his message. Speaking skill is important for career success, but certainly not limited to one’s professional aspirations. Speaking skill can also enhance one’s personal life. Nevertheless, Brown and Yule (1983) have emphasized how speaking has been neglected in ESL and EFL settings. The complexity and heterogeneity of the speaking skill, however, make it one of the most controversial issues since the production of speech comprises a considerable number of cognitive, affective, and sociolinguistic competences to be mastered in any speaker/hearer interactional or transactional situation especially since there are as many speaking situations as there are social and cultural differences. Hinkel (2006) stressed that “The complexity of learning to speak in another language is… a cognitively demanding undertaking” (p. 114).

Based on the above grounds, the current study sought to investigate the relationship between QOL and the speaking ability of Iranian EFL learners. The following research questions guided the study:

Q1. What categories in QOL were considered more influential by Iranian intermediate EFL learners?
Q2. Is there a significant correlation between their quality of life and their speaking skill?

Methodology

Design

This research was a mixed-method study including questionnaire and semi-structured interview.
Participants
The participants in this study were 100 female language learners studying English in a private language institute located in Isfahan, Iran. Their age ranged between 20 and 30 and shared Persian as their mother tongue. The participants were selected on the basis of the results of the Oxford Quick Placement Test (OQPT) to make sure they were in the same level of proficiency. At the outset of the study, OQPT was administered to a pool of 250 language learners. Then, 100 learners whose level of English language proficiency was determined as intermediate were selected as the participants of the study.

Instruments
Oxford Quick Placement Test (OQPT)
In order to achieve the participants’ homogeneity in terms of language proficiency level, a version of Oxford Quick Placement Test (OQPT, 2016) was used in this study. OQPT consists of 60 multiple-choice items that tests the learners’ general knowledge of the English language and specifies the level of language proficiency as Below Elementary, Elementary, Pre-intermediate, Intermediate, Upper Intermediate, and Advanced. In this study, students who were identified to be at the intermediate level (i.e., scored 21-30) were selected as the participants of the study.

WHOQOL Questionnaire
A revised adapted version of WHOQOL questionnaire served as the first instrument for data collection (See the Appendix). WHOQOL questionnaire which is originally developed by the WHO (available at http://www.who.int/mental_health/publications/whoqol/en/) consists of 24 items on a 1 to 5 point Likert scale. The questionnaire includes 4 major sub-scales: physical health (7 items), psychological (6 items), social relationships (3 items), and environment (8 items). In order to match the questionnaire to the concerns of the present study, necessary modifications and revisions were applied to the WHOQOL questionnaire. Through frequent communications and exchanges of ideas between the two researchers different core questions were combined and amalgamated. For example, the original questionnaire included two facets under the title of spirituality and religion which were omitted in the revised questionnaire due to their irrelevance to the purpose of the current research. The final questionnaire addressed 22 items on 4 major sub-scales of physical health, psychological domain, social relationships, and environment. The overall reliability of the final questionnaire was found to be 0.82 which was determined by Cronbach’s alpha.

Semi-Structured Interviews
Semi-structured interviews were carried out by three interviewers (the researcher and two trained raters) with 30 of the participants. Questions were designed to determine why Iranian EFL learners felt the way they reported in the questionnaire in order to help identify aspects of speaking ability related to life conditions.

Procedure
The research design of the present study was a mixed-method approach. To collect data, two procedures were used: questionnaire and semi-structured interviews. To collect data via the questionnaire, the participants first were asked to answer the questions as accurately as possible. As for the interviews, the questions were majorly concentrated on two categories: the speaking skill in the English language and possible impacts of life quality on it. In order to encourage diverse answers, relatively open questions were raised. Generally speaking, the semi-structured
Interviews tended to be more flexible than the existing interview guides, and pre-planned questions were often used to adjust the conversation flow. Each interview, averaging 30 minutes in length, was conducted in the participants’ native language (Persian), enabling interviewees to express themselves openly.

The questionnaires were administered during one of the regular sessions attended by the participants in the language institute. Before the questionnaire was administered, the participants were provided with an explanation of the purpose of the study and assured that the given responses would be treated as confidential and would have no effect on their final exam score. The questionnaire was supposed to take 30 minutes to complete. The participants were also encouraged to ask questions and seek clarification, if needed. Follow-up interviews were undertaken later by one of the raters visiting the students after hours in the institute. The interviews were carried out using a voice recorder in a quiet room in order not to be disturbed. The researcher took care to reassure the students that their opinions were valued no matter how much negative or positive they may look on the surface.

After the participants’ responses to the questionnaires were codified, quantitative inferential analyses were carried out on the collected data. The data were fed into SPSS (version 20.0) to quantify the participants’ QOL. Finally, the interviews were transcribed and analyzed by the researchers to identify specific aspects of the QOL that had significant impact on the participants’ speaking ability.

**Results**

In order to provide answers to the research questions of the study, certain statistical procedures were used. A thorough explanation and elaboration of the statistical procedures follows.

**Research question 1: What categories in QOL were considered more influential by intermediate Iranian EFL learners?**

Figure 1 shows the 22 facets of life quality influencing EFL learner’s speaking skill. Responses were organized based on Likert scale (not important, a little important, moderately important, very important, and extremely important). As Figure 1 portrays, the top seven categories based on Likert scale and participant’s frequency of responses (very important and extremely important) were concentration, positive feelings, energy, sleep, negative feelings, opportunities in information availability, and self-esteem.

![Figure 1. Impact of QOL on speaking ability of the participants](image-url)
The results of the analysis of data from semi-structured interview cast light on the reasons why the participants perceived the abovementioned facets more effective than others on speaking skill. A summary of the participant’s views follows.

-Sleep: Eighty-four percent of the participants discussed the significant effects of tiredness and fatigue on their learning in general and speaking ability in particular. They talked about different experiences in the classroom which were related to tiredness and insufficient sleep. For example, most of them believed “lack of sleep have been decreasing their ability to pay attention and remember new information” or they shared the idea of losing motivation to go to class, shortage of energy to participate in speaking activities or mood to study, because of fatigue and feeling sleepy in the classroom.

-Concentration: Eighty-two percent of the participants chose concentration as the second highly influential factor in speaking ability. There were various reasons why participants chose this facet as extremely effective. In general, most of them stated, “if a person concentrates, learning will happen” Or, “if I have concentration, I can categorize the items better and it helps my speaking skill” And “concentration helps me accomplish my English lessons successfully; especially speaking in the classroom”. An interesting point that was stated by several participants was the relationship between hunger and concentration. For example, “When I’m hungry I feel tired and empty! That’s a distraction so I can’t focus on my speaking very well.” Another factor which was reported to have a distractive effect on concentration was the classroom environment. Several participants complained: “I’m easily losing my concentration if the classroom is too hot or too cold, too noisy and crowded or too quiet. Also, the uncomfortable chairs or desks can cause wrist and shoulder discomfort; and therefore, distract my attention when speaking English in the class.”

-Energy: Like concentration and sleep, a majority of students (70%) ranked energy as a highly affective factor in their speaking ability. In general, with a good deal of energy, learners can do better in classroom, be more attentive in classroom speaking tasks, and have an alert mind to study and learn well. Several participants stated that “if I have enough energy, I become motivated to participate in classroom speaking activities.” However, without adequate energy, learning will be impeded. For instance some participants said: “without having sufficient sleep, I don’t have energy in the class and I feel tired, that’s why my participation in speaking tasks will decrease.

-Negative feelings: Those participants that related negative feelings directly with their learning accomplishment and speaking ability were 65%. Feelings like frustration, despair, worry, sadness, or shame would have terribly negative influence on student’s memory, reasoning and capacity to make connections. Most of the participants believed that “if we have anxiety we can’t learn well let alone speak English in the classroom.” Or, “the times that I feel gloomy and out of sorts I can’t make right connections then I lose my motivation and as a result I can’t take part in speaking activities”.

-Positive feelings: The last influential factor in speaking fluency was positive feelings that was reported by 60% of the participants. The students stated that with positive feelings or a joyful heart, they could concentrate better and their overall achievement in learning and speaking would foster extremely. For example, some participants declared “positive emotions tend to help
me remember more complex things particularly through speaking”. Or, “happiness can influence my academic success concerning speaking ability.”

On the whole, the EFL participants’ responses showed that more or less, almost all the categories in QOL played a role in speaking ability with some of the categories having more impact compared to others.

**Research question 2: Is there a significant correlation between Iranian EFL learners’ quality of life and their speaking skill?**

To answer this research question, Pearson correlation was conducted to identify which of the 22 categories in the life quality questionnaire concerning learner’s speaking skill have the most significant correlation with the overall question of life quality asked at the beginning of the questionnaire. The results of this analysis are presented in Table 1.

<table>
<thead>
<tr>
<th>General Quality of Life</th>
<th>energy</th>
<th>sleep</th>
<th>Positive feeling</th>
<th>concentration</th>
<th>Negative feeling</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson Correlation</td>
<td>.973**</td>
<td>.993**</td>
<td>.969**</td>
<td>.977**</td>
<td>.970**</td>
</tr>
<tr>
<td>N= frequency of Likert ranges, according to the group study responses</td>
<td>5</td>
<td>5</td>
<td>5</td>
<td>5</td>
<td>5</td>
</tr>
</tbody>
</table>

As is depicted in Table 1, five categories among all of the mentioned categories were found to be statistically and significantly correlative ($p$-value < 0.05). Apparently, sleep is the first life quality factor highly correlated with speaking ability, the second one is concentration, the third one according to this table is energy, negative feeling is the fourth factor and the last one is positive feelings.

**Discussion**

Adapting the original WHO questionnaire as a framework for evaluating life quality containing different domains such as physical, psychological, social relationships, and environment, this study demonstrated that all categories in the four domains were considered essential for the participants according to their speaking ability, but the categories in the physical and psychological domains were ranked by them as the most determining factors in speaking ability.

An interesting finding of the study was the significant correlation between different domains of life quality as related to the speaking ability. From participants’ interview data it was
understood that there was an interrelation between physical, psychological, social, and environmental domains. For instance, lack of sleep resulted in lack of energy and loss of concentration in the class. On the other hand, negative feelings, which are among psychological facets, resulted in fatigue which is a physical characteristic. Furthermore, home environment that is related to the environmental domain affected concentration in psychological domain. This observation is consistent with the findings of the previous studies such as Yang’s (2016) work who reported that psychological and environmental domains were more influential in L2 achievement. In addition, this study was to some extent close to Baleghizadeh and Gordani’s (2012) work who examined a significant correlation between motivation and quality of work life.

**Conclusion**

The aim of the current study was to investigate the relationship between life quality and speaking skill of intermediate EFL learners in an Iranian context through a qualitative approach. The results indicated that although most categories in the adapted WHOQOL questionnaire were found to have impact on the learner’s speaking ability, a number of categories in physical and psychological domains were considered more influential. These categories included: sleep, concentration, energy, negative feelings, and positive feelings. In addition, the findings of the study indicated that there were significant correlation among the abovementioned categories.

Overall, the findings of this study could be an eye-opener for teachers and instructors to the realities of EFL classroom. Although some of the categories might seem irrelevant to the language educator’s field of study, utilizing comprehensive knowledge of all factors pertinent to L2 acquisition is believed to be beneficial to language professionals. For instance, when the student seems uninterested and bored in class, it could be due to non-academic reasons rather than improper instruction, comprehension problems, or other language-related issues. Therefore, it is imperative for language teachers to expand their understanding of students’ needs both inside and outside of the class. This holistic understanding would enhance the effectiveness of language teaching, class interaction, and class management. It would solve many learner problems in EFL classes as well.

One implication that emerges from the present study relates to the finding that all physical, psychological, social and environmental domains play essential roles in learner’s speaking ability. This highlights the responsibility of education professionals such as instructors, teachers, material designers, and curriculum developers to adopt a holistic view to meet the needs of students with the purpose of maximizing language achievement particularly speaking skill.

**References**


**Appendix 1**

**WHOQOL-BREF domains**

<table>
<thead>
<tr>
<th>Domain</th>
<th>Facets incorporated within domains</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Physical health</td>
<td>Activities of daily living&lt;br&gt;Dependence on medicinal substances and medical aids&lt;br&gt;Energy and fatigue&lt;br&gt;Mobility&lt;br&gt;Pain and discomfort&lt;br&gt;Sleep and rest&lt;br&gt;Work Capacity</td>
</tr>
<tr>
<td>2. Psychological</td>
<td>Bodily image and appearance&lt;br&gt;Negative feelings&lt;br&gt;Positive feelings&lt;br&gt;Self-esteem&lt;br&gt;Religiosity / Religion / Personal beliefs&lt;br&gt;Thinking, learning, memory and concentration</td>
</tr>
<tr>
<td>3. Social relationships</td>
<td>Personal relationships&lt;br&gt;Social support</td>
</tr>
<tr>
<td>4. Environment</td>
<td>Financial resources&lt;br&gt;Freedom, physical safety and security&lt;br&gt;Health and social care: accessibility and quality&lt;br&gt;Home environment&lt;br&gt;Opportunities for acquiring new information and skills&lt;br&gt;Participation in and opportunities for recreation / leisure activities&lt;br&gt;Physical environment (pollution / noise / traffic / climate)&lt;br&gt;Transport</td>
</tr>
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</table>
Appendix 2

The following questions will ask your opinion about different facets of life quality, based on World Health Organization (WHO) BREF questionnaire. Please choose the correct response according to your personal belief.

1. How important to you is your overall quality of life?
   a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important
2. How important is your health?
   a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important
3. How important is it to be free of any pain?
   a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important
4. How important to you is having energy?
   a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important
5. How important to you is restful sleep?
   a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important
6. How important to you is it to feel happiness and enjoyment of life?
   a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important
7. How important to you is it to feel content?
   a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important
8. How important to you is it to feel hopeful?
   a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important
9. How important to you is being able to learn and remember important information?
   a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important
10. How important to you is being able to think through every day problems and make decisions?
    a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important
11. How important to you is it to be able to concentrate?
    a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important
12. How important to you is feeling positive about yourself?
    a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important
13. How important to you is your body image and appearance?
    a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important
14. How important to you is it to be free of negative feelings? (e.g. sadness, depression, anxiety, worry...)
15. How important to you is it to be able to move around?

16. How important to you is being able to take care of your living activities? (e.g. washing, eating, dressing)?

17. How important to you is it to be free of dependence in medications and treatments?

18. How important is being able to work?

19. How important to you are relationships with other people?

20. How important to you is it to support others?

21. How important to you is feeling physically safe and secure?

22. How important to you is your home environment?

23. How important are your financial resources?

24. How important to you is it being able to get adequate health care?

25. How important to you is it to get adequate social help?

26. How important to you are chances for getting new information or knowledge?

27. How important to you are chances to learn new skills?

28. How important to you is relaxation/leisure?

29. How important to you is your environment? (e.g. pollution, climate, noise, attractiveness)
a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important

30. How important to you is adequate transport in your everyday life?

a) Not important   b) A little important   c) Moderately important   d) Very important   e) Extremely important

Among the 26 mentioned items in the questionnaire, which ones do you consider more affective on your English speaking fluency? (Please start from the most influential one).

▪ I think the facet in question ……. influences English speaking fluency, because……………………………………………………………………………….
  …………………………………………………………………………………………….

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