Volume 4, Issue 3, March – 2026 **ISSN (E):** 2938-379X

EVALUATING THE ROLE OF MEDICAL ENGLISH IN MEDICAL EDUCATION: A MIXED-METHODS STUDY OF STUDENT ATTITUDES AND CURRICULUM EFFECTIVENESS

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Abstract
In recent decades, English has become the dominant international language of science and medicine (Crystal, 2003; Montgomery, 2013). Medical professionals rely heavily on English to access scientific literature, publish research findings, participate in international conferences, and collaborate globally to remain updated with advances in healthcare. Consequently, Medical English has become an essential component of medical education, particularly in non-English-speaking countries where students must bridge the gap between local instruction and global scientific communication (Ferguson, 2007; Flowerdew & Peacock, 2001).

Introduction

In recent decades, English has become the dominant international language of science and medicine (Crystal, 2003; Montgomery, 2013). Medical professionals rely heavily on English to access scientific literature, publish research findings, participate in international conferences, and collaborate globally to remain updated with advances in healthcare. Consequently, Medical English has become an essential component of medical education, particularly in non-English-speaking countries where students must bridge the gap between local instruction and global scientific communication (Ferguson, 2007; Flowerdew & Peacock, 2001). However, in many medical universities, Medical English courses are limited to a single semester, which may not provide sufficient time for sustained language development. Research suggests that language acquisition requires continuous exposure and practice, particularly in specialized domains such as medicine (Nation, 2001; Schmitt, 2008). When Medical English is offered only as a short-term course, students' progress may remain incomplete unless further supported by extended learning opportunities. At the same time, medical curricula are already intensive and cognitively demanding. Some scholars argue that medical education should prioritize clinical competence and patient care skills over language learning, particularly in contexts where doctors primarily communicate with patients in their native language (Dudley-Evans & St John,

1998). In such settings, English may not directly influence daily clinical practice. Nevertheless, the increasing globalization of healthcare and rapid technological advancements, including artificial intelligence (AI), have reinforced the importance of English as a tool for accessing updated medical knowledge (Topol, 2019). AI-powered tools and digital learning platforms have also made language learning more accessible and personalized, supporting adaptive and self-directed learning (Godwin-Jones, 2018). Therefore, this study aims to explore medical students' attitudes toward Medical English courses and examine their perceptions regarding its present and future importance, as well as the effectiveness of current course structures.

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Methodology

A cross-sectional survey design combined with semi-structured face-to-face interviews was employed to collect data from medical students at Tashkent State Medical University. A total of 60 respondents participated in the study, representing different years of study, with first-year students forming the majority. Data were collected through an online questionnaire consisting of multiple-choice questions addressing English proficiency, perceived importance of Medical English, encountered difficulties, course adequacy, and future expectations. The use of mixed methods enabled both quantitative description and qualitative insight, which is recommended in educational research to enhance validity (Creswell & Plano Clark, 2018). Additionally, interviews were conducted with six students: two from the International Faculty, two first-year students who had completed the Medical English course, and two second-year students studying in Uzbek and English curricula, respectively. Ethical considerations were strictly observed. Participation was voluntary, informed consent was obtained, and confidentiality of respondents' identities was ensured throughout the study.

Results

A total of 60 respondents completed the survey. The majority were first-year students (70.0%), followed by second-year students (13.3%), students from other universities (11.7%), and third-year students (3.3%). Female students constituted 71.7% of participants. Most respondents (75.0%) reported having studied Medical English. Regarding English proficiency, a significant proportion identified themselves as upper-intermediate (35.0%) or advanced (31.7%), while 16.7% reported intermediate and 16.7% beginner levels. The importance of Medical English was widely acknowledged. Over 75% of respondents rated it as important, very important, or extremely important. Moreover, 80% believed its importance would increase in the future, reflecting global trends in medical communication (Montgomery, 2013). Although 71.7% reported confidence in reading medical articles, speaking fluently was identified as the most common difficulty (35.0%), followed by mastering medical terminology (18.3%) and writing scientific texts (13.3%). This aligns with research suggesting that productive skills, particularly speaking and academic writing, are often more challenging than receptive skills in ESP contexts (Hyland, 2006). Regarding course adequacy, responses were divided: 36.7% considered it partly sufficient, while equal proportions (31.7%) viewed it as sufficient or insufficient. Notably, 81.7% expressed a desire for more practical training, emphasizing the importance of applied language use in medical contexts (Dudley-Evans & St John, 1998). Qualitative findings

revealed diverse perspectives. International students noted that Medical English may be less necessary in programs already delivered fully in English. A second-year student emphasized that short-term foundational courses are insufficient for achieving meaningful proficiency, supporting the argument that sustained exposure is essential (Nation, 2001). Another student highlighted the continued importance of Russian in local clinical practice, suggesting that language priorities may vary according to sociolinguistic context.

Discussion

The findings indicate that medical students generally hold positive attitudes toward Medical English and recognize its value for research and international collaboration. However, perspectives differ depending on linguistic background and career aspirations. Students aiming for international mobility tend to value Medical English more highly, which reflects broader globalization trends in medical education (Ferguson, 2007).

The discrepancy between general English proficiency and academic confidence suggests that general competence does not automatically translate into academic or professional literacy. Academic medical discourse requires specialized vocabulary, genre awareness, and discourse competence (Hyland, 2006). Interview data also suggest that short-term courses may not provide sufficient depth. Research consistently emphasizes that language learning, particularly in specialized domains, requires sustained and contextualized practice (Schmitt, 2008). Therefore, curriculum design plays a critical role in ensuring effectiveness. Considering these findings, making Medical English an elective course differentiated by proficiency levels may enhance student motivation and learning outcomes. Level-based instruction aligns with principles of differentiated learning and learner-centered education (Nation, 2001).

Limitations

This study has several limitations. The sample size was relatively small and consisted primarily of first-year students, limiting generalizability. Data were based on self-reported responses, which may introduce response bias. Additionally, the use of descriptive statistics prevents establishing causal relationships. Future studies with larger and more diverse samples are recommended.

Conclusion

The study suggests that Medical English is particularly important for students planning international careers or research engagement. However, it is perceived as less essential by those intending to practice locally. Importantly, English proficiency alone does not determine medical competence. Professional performance depends primarily on clinical skills, communication abilities, and medical knowledge. Nevertheless, given the increasing globalization of healthcare and technological advancement, Medical English remains a strategic academic asset rather than merely an auxiliary subject.

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