


Original article

Language Barriers in Studying Medicine in English: Concerns and Attitudes of Clinical Phase Medical Students at the University of Tripoli

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ABSTRACT

Despite being a foreign language, English is the medium of instruction in many Arab medical schools, creating language barriers and difficulties for students. The aim of this study was to assess the concerns and attitudes of students towards English as a medium of instruction (EMI) and to explore the barriers as well as opinions of students. This was a cross-sectional descriptive study that targeted students enrolled at the clinical phase at the faculty of medicine in the University of Tripoli using a self-administered questionnaire during the period from the 10th of March 2024 to the 24th of March, 2024. About 61 (36.1%) medical students were moderately comfortable with the English language, followed by 45 (26.6%) who were comfortable as opposed to 10 (5.9%) who were very uncomfortable. The majority 102 (60.4%) recommended changes to address the language concerns in the curriculum. Among the 66 participants who responded to this section, 33.3% recommended that the university should provide free English language courses and 161 (95.3%) stated they would choose to study medicine in English again. The study revealed that the majority of the participants did not feel that English is a significant barrier in their studies with 62.7% disagreeing with the existence of language barriers.

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INTRODUCTION

In the era of globalization, English has emerged as a predominant medium for international communication, with over 1.45 billion speakers worldwide [1]. This extensive use of the language has significantly impacted the medical community, as its widespread adoption as the standard for medical journals and international conferences has led to the predominance of English in medical education. The adoption of English as a medium of instruction (EMI) can be defined as the use of the English language to teach academic subjects in countries where the first language of most of the population is not English [2]. Naturally, this has raised concern in countries where English is a foreign language such as the Arab world, sparking a debate over the pros and cons of teaching in a foreign language. This approach aims to facilitate international collaboration and standardisation, where students may benefit by the ability to use resources and attend international conferences and courses. However, students who have spent their whole life studying in Arabic, will ultimately face difficulties upon studying in English, perhaps not reaching their full academic potential or even dropping out. The transition from learning in their native Arabic language to studying complex scientific concepts and terminologies in English can pose challenges and evoke apprehension. Previous research showed that teaching and

learning using the student's mother tongue proves to be the most efficient method for acquiring and retaining knowledge across diverse scientific fields [3]. In Libya, admission to medical faculties requires high grades in secondary school as a prerequisite. However, despite these high academic standards, previous research found that students' achievement is not predicted by high grades in high school alone [4]. Notably, English language proficiency is not required for admission to the faculty of medicine, which further underscores the importance of using the mother tongue in education for better comprehension and retention. The aspiration to be educated in one's mother tongue has long been a goal of the United Nations and a core component of the Sustainable Development Goals [5]. However, in the Arab world, we are witnessing a shift away from this ideal rather than towards it. Thus, we see a language barrier being drawn which is especially true in Libya, due to the fact that colonialism has not left a language behind, and Arabic is the main language, making the sudden introduction of a second language hard to process.

The aim of this study is to assess the concerns and attitudes of students towards English language as a medium for medical education and to explore the barriers and challenges faced by the students and their views toward the impact of EMI on their academic performance.

METHODS

This was a cross-sectional descriptive study that targeted all students enrolled at the clinical phase at the faculty of medicine, University of Tripoli in the Spring 2024 academic semester. A self-administered questionnaire survey was conducted during the period from the 7th of March 2024 to the 21st of March 2024. The questionnaire was validated by piloting it on a subset of 20 participants and included open-ended, categorical, and ordinal questions. The questionnaire was distributed online using google forms via the social media platforms telegram and WhatsApp and through student study groups to ensure the questionnaire was answered only by the specific target group. It was distributed to all participants studying in the clinical stage, regardless of their age, grade or sex. To ensure that the questionnaire was accessible to all clinical stage students, including those uncomfortable using English, it was distributed in both Arabic and English.

The study plan at the Faculty of Medicine is structured into three phases. The first phase, the general or preclinical phase, covers foundational health sciences relevant to human medicine, including anatomy, biochemistry, and microbiology. The second phase is the clinical stage, where students engage with clinical materials both within the university and at affiliated teaching hospitals in Tripoli. The final phase consists of an internship. Participants selected for this study were those in the clinical phase, chosen for two primary reasons: they have completed nearly four years of medical education and have adapted to the academic and linguistic demands of their curriculum. Furthermore, they have commenced hospital training, during which they utilise Arabic to conduct patient histories and communicate with patients.

The questionnaire consisted of three sections: the first section contained questions regarding age, sex, native language, and high school study language. The second section comprised 11 questions addressing the concerns, barriers, and challenges encountered by students, as well as their perceptions of EMI. The final section contained an open-ended question inviting participants to provide suggestions on specific measures that the institution could implement to better assist students facing language barriers. Participants were instructed to rate their responses on a five-point Likert scale, ranging from "strongly agree" to "agree," "neutral," "disagree," and "strongly disagree." Descriptive statistics were used to determine demographic characteristics and opinions. Formal approval was obtained from the Research and Medical Ethics Committee at the faculty of medicine, University of Tripoli. No individual subject identifiers were collected; the questionnaire was anonymous and the participation of students was voluntary. All participants received a brief explanation of the study objective.

RESULTS

A total of 169 participants responded to the survey, including 137 (81.1%) females and 32 (18.9%) males. 167 (98.8%) of the total participants had Arabic as their first language and 91 (53.8%) were bilingual, while 78 (46.2%) were monolingual. Additionally, 166 (98.2%) participants received their primary education in Arabic and 3 (1.8%) participants received an English education. The participants' ages range from 23 to 25 years. The results indicated that most participants, more specifically 61 (36.1%) medical students were neither comfortable nor uncomfortable with the English language, followed by 45 (26.6%) who were comfortable as opposed to 10 (5.9%) who were very uncomfortable [Figure 1].

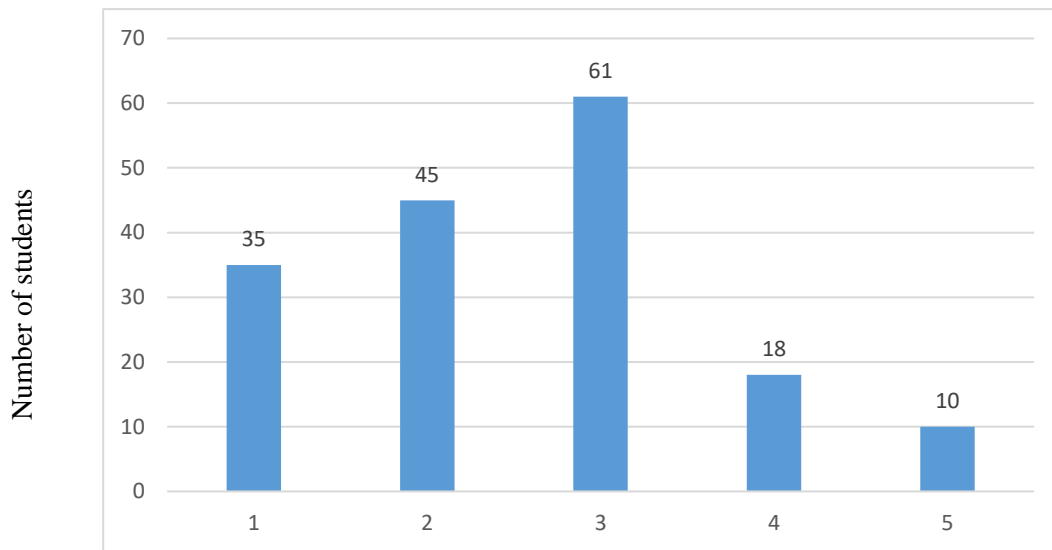


Figure 1. Comfort with English (1=very comfortable; 2=comfortable; 3=neutral; 4=not comfortable 5=not comfortable at all)

The majority 136 (80.5%) of the participants stated that they frequently used dictionaries for their studies and 33 (19.5%) did not use dictionaries. Moreover, it was found that only 13 (7.7%) of participants faced considerable difficulty due to language barriers in their studies while 56 (33.1%) participants experienced minimal difficulty [Figure 2].

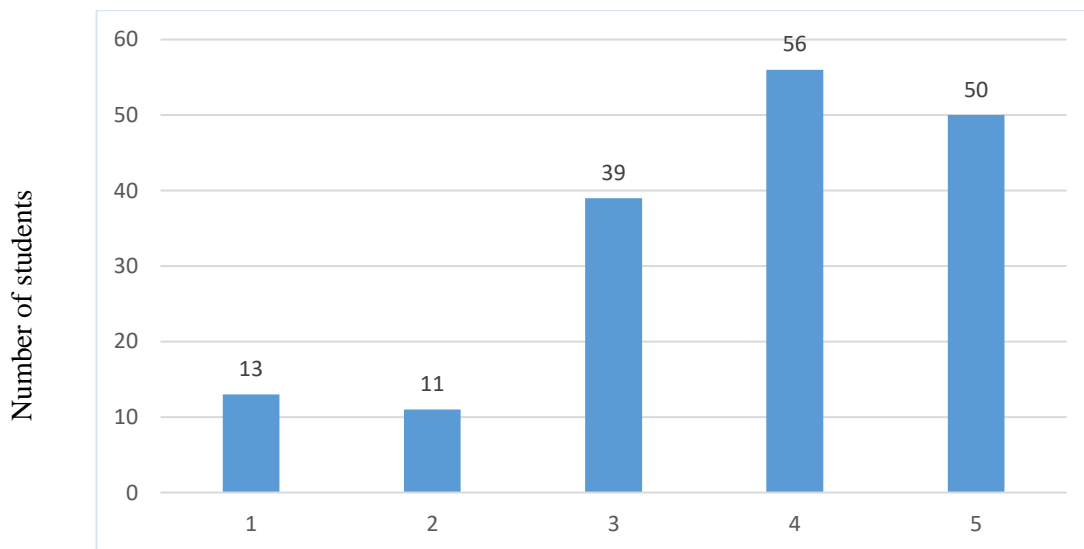


Figure 2: Language barriers perceived in studies (1=strongly agree; 2=agree, 3=neither agree nor disagree; 4=disagree; 5=strongly disagree)

When asked whether the use of EMI impacts students' performance in exams, tests, and assignments, the results showed consistency across responses. Specifically, 78 participants (46.2%) did not believe that EMI interfered with their performance on exams and coursework, while 58 participants (34.3%) felt that EMI affected their performance in assessments [Figure 3].

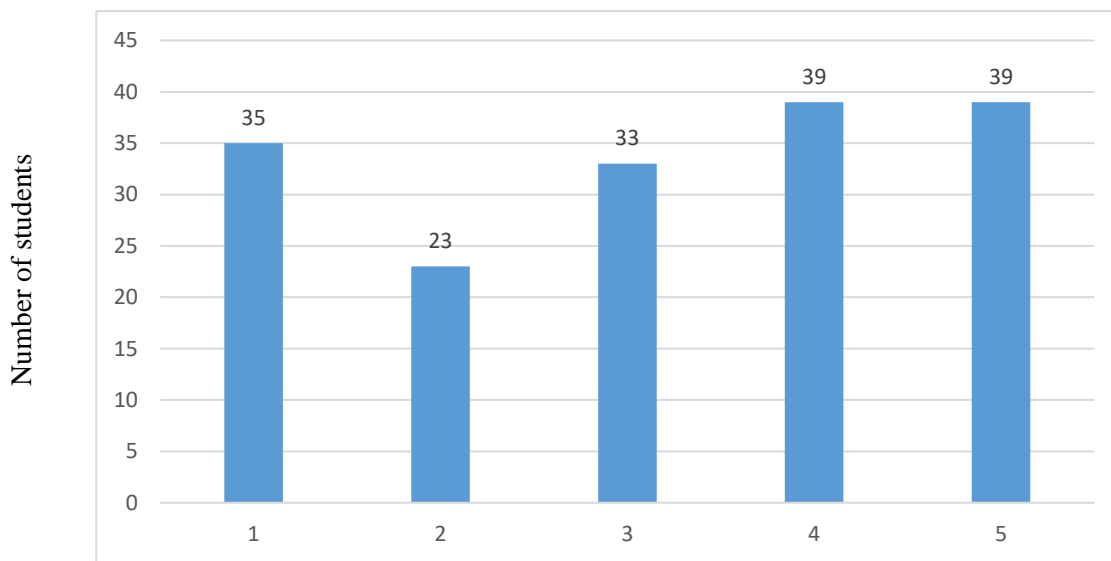


Figure 3: Impact of English as a medium of instruction on evaluation (1=strongly agree; 2=agree, 3= neither agree nor disagree; 4=disagree; 5=strongly disagree)

More than half of the participants (73.3%) did not think the primary challenge in understanding scientific content was due to study materials—such as lecture notes, presentations, and books—being presented in English. However, 136 participants (80.5%) of the 169 surveyed used dictionaries during their studies, and 58 participants (34.3%) expressed significant dissatisfaction with the availability of language resources at the university [Figures 4-5].

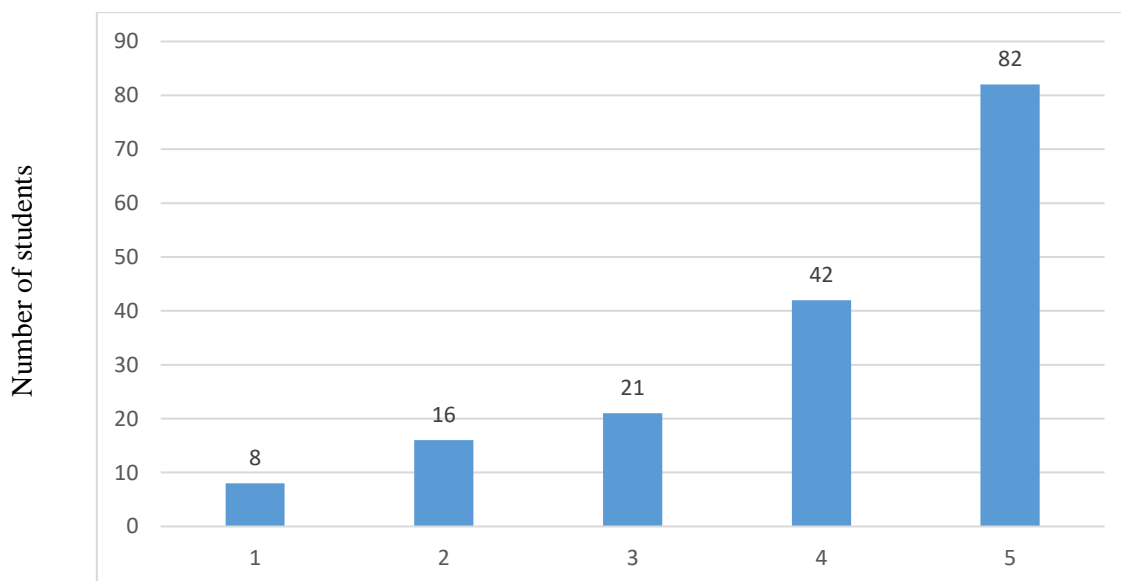


Figure 4: perceived difficulty in English study material (1=strongly agree; 2=agree, 3= neither agree nor disagree; 4=disagree; 5=strongly disagree)

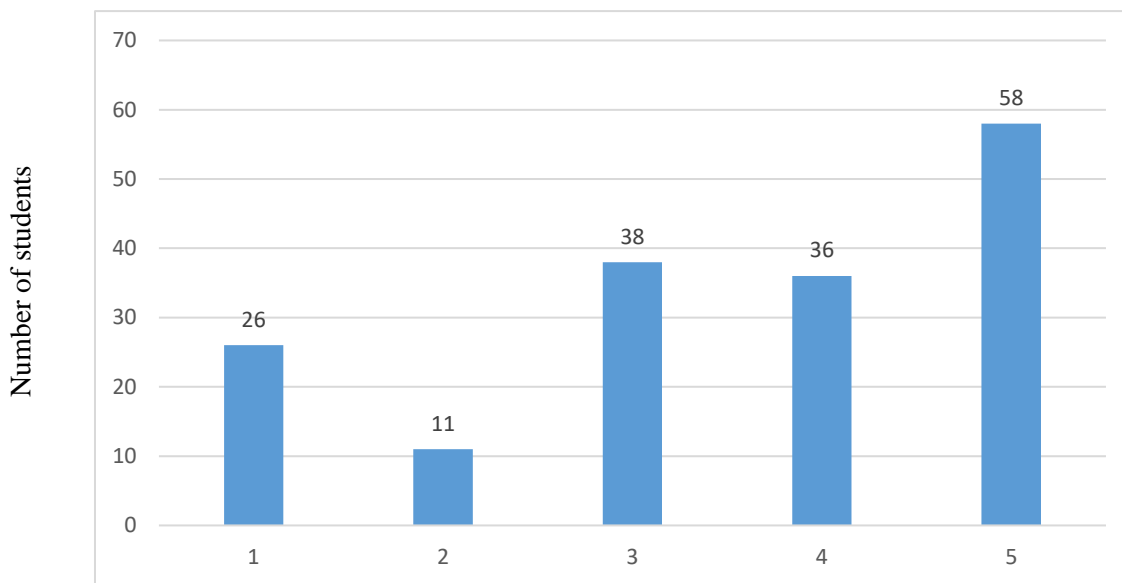


Figure 5: Availability of language resources (very satisfied to very unsatisfied)

The data show that, despite 141 participants (83.4%) preferring English as the medium of instruction and 161 participants (95.3%) stating they would choose to study medicine in English again, the majority (102 (60.4%)) recommended changes to address language concerns in the curriculum.

Participants were subsequently invited to articulate their perspectives on specific changes the institution could implement to better support students encountering language barriers through an open-ended question, resulting in a range of diverse and insightful responses. Among the 66 participants who responded to this section, a significant proportion (33.3%) expressed support for the provision of free English language courses by the university. Additionally, 10.6% indicated that professors should demonstrate high proficiency in English. In contrast, some participants proposed recommendations, including the use of simplified English (7.6%), reforms in curriculum, teaching methodologies, and assessment practices (7.6%), the inclusion of English as a core subject (6.1%), the provision of translation services (6.1%), the integration of Arabic elements into lectures (6.1%), the establishment of dedicated spaces for English language practice (6.1%), the adoption of IELTS or TOEFL as admission requirements (4.5%), the organisation of workshops conducted in English (4.5%), and the incorporation of additional Arabic terminology (4.5%). Appendix 2 lists the suggestions proposed by students to address the challenges faced by those encountering language barriers.

DISCUSSION

The results of the questionnaire survey aimed at evaluating the attitudes of medical students towards English as a medium of instruction in a non-English speaking country. This study, being the first of its kind in Libya, shed light on various perspectives students had, providing valuable insights into student life and ways education in Libya can be improved. Whereas most countries worldwide utilise their native languages as the primary medium of instruction, the implementation of EMI in medical education has notably increased in recent years, particularly in the Middle East and Africa [7] [Figure 6]. This trend may be linked to the significant role that English plays in economic globalisation; however, it is essential to recognise that adopting a foreign language and relegating the mother tongue to a secondary status represent remnants of colonial influence [6]. despite this historical context, attitudes toward the Anglicisation of education exhibit substantial variability.

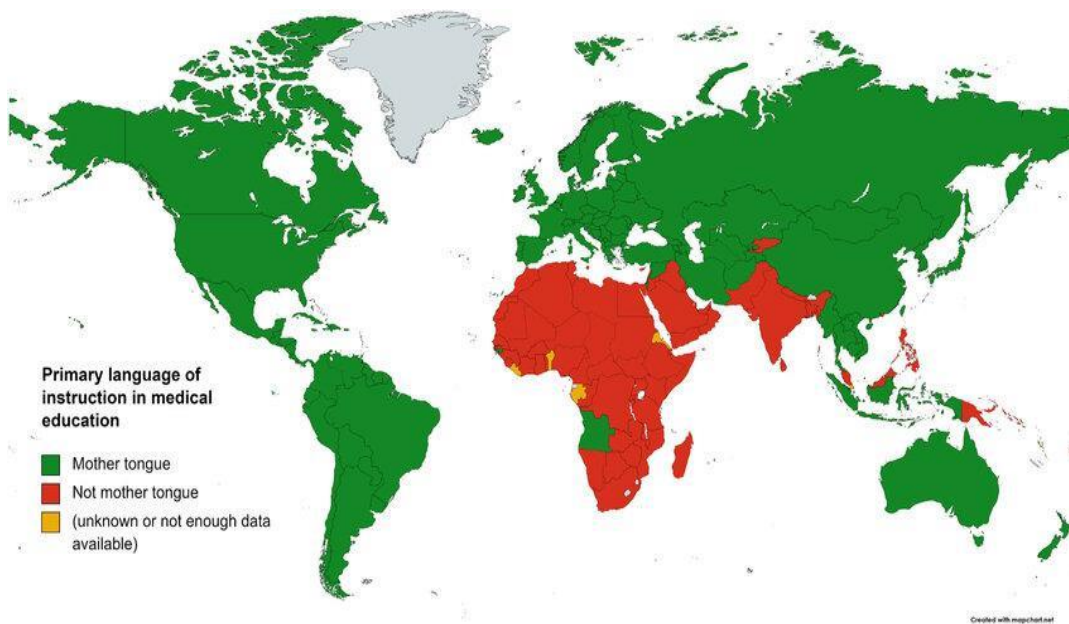


Figure 6: Primary language of instruction in medical education [7]

On one hand, numerous scholars assert that EMI facilitates access to a broader range of scientific resources, including textbooks, educational websites, and research articles, as English is the predominant language in which most research is published. It also opens doors to international opportunities for medical students, including research collaborations, exchange programmes, conferences, and employment prospects in English-speaking countries, thereby broadening their career options. Additionally, universities that implement EMI may achieve higher rankings, enhanced accreditation, and greater international recognition, as proficiency in English is frequently correlated with elevated academic standards and increased competitiveness in the global marketplace.

On the other hand, one could argue that utilising a foreign language for education, followed by practice in Arabic, may create a gap between physicians and patients. This communication barrier is evident in countries such as the United Arab Emirates, where international medical practitioners often encounter difficulties in effectively communicating with their Arab patients. [8].

Nevertheless, when the participants in this study were asked if they were comfortable taking a history in English, most students were moderately comfortable or neutral, thus suggesting that students were more comfortable taking a history in Arabic. This could be because Libya is a monolingual country. Students speak only Arabic at home and at school too; so, the introduction of a new language in late-stage education is unlikely to affect their communication skills. This is echoed in other studies done in the MENA region. In Lebanon, a study found that despite studying in English, an overwhelming 88.5% of first year clinical students were confident in their ability to conduct a history in their mother tongue: Arabic [9]. Similarly, in the Arabian Gulf University, it was found that 66% of the students were confident in their Arabic history taking skills [10]. However, it is important to note that 82% of the students were not aware of medical terms in Arabic, proving that communication skills training in English alone can leave Arab medical students unconfident with patient communication in their native language [11].

Moreover, Yang believes that the purpose of this type of education is to upgrade the global and local ranking of institutions rather than focusing on the needs of students [12]. This might be corroborated by the fact that some universities engaging in EMI do not invest in preparing their students for the drastic change from high school native language education to English. In this study, it was found that the many students (55.6%) were unsatisfied with the availability of language resources provided by the institution. Additionally, when asked if they would recommend suggestions on improvements the institution could take to support students facing language barriers, 60.4% had recommendations, sharing their opinions and many different reforms were enthusiastically expressed including the training of professors in teaching in English, suggesting that the professors were incompetent or unprepared for EMI.

In observations for Norwegian lecturers, it was revealed that despite their scientific competencies, many science lecturers do not possess sufficient English language competencies, having a limited vocabulary [13]. This was a common sentiment among students, stressing that oftentimes, lectures and exam questions have many errors to the point of becoming incomprehensible. Not only that, but in a study by the British Council linked to EMI challenges, it is believed that lecturers in such an educational environment consider their role is not to help students understand English, which

is the language of the scientific content, but to provide content in English whether the student understands it or not [14]. Thus, proving that universities are unprepared for the use of EMI, leaving both students and faculty ill equipped for the challenges they will face.

Other arguments against the Anglicisation of education include fears that the spread of the English language not only negatively influences students' education but also may threaten students' mother tongue and their religious and cultural identities [15]. Arabic, historically a dominant language of science and scholarship from the 8th to the 13th century during the Islamic golden age, has experienced a decline in its prominence in contemporary scientific and academic spheres. However, the correlation between the widespread adoption of English as the language of instruction and the diminishing role of Arabic and its relegation to secondary status in favour of English instruction in scientific and academic discourse remains largely overlooked in the academic discourse of the MENA region. This absence of discourse perpetuates linguistic inequality and neglects the potential impact of language policies on the preservation and promotion of Arabic as a language of scientific and academic inquiry [16]. Researchers also critique the discourse that reinforces the dominance of English in science and academia while marginalising the Arabic language to specific cultural and religious contexts, suggesting that this discourse is problematic, restricting the full expression and use of Arabic [17].

However, Arabisation of university education cannot be a viable solution to this problem as it is also a controversial topic. Furthermore, the consensus generally leans towards rejecting Arabisation in the modern day; having less supporters than Anglicisation. In this study, 83.4% of the participants chose to study in English rather than Arabic, despite facing difficulties with the language. This could be attributed to the aforementioned idea that EMI allows for more opportunities and is confirmed by the fact that 82.2% of the participants believe that being proficient in English is essential for success in their medical career. The preference of EMI and rejection of Arabic as a medium of instruction (AMI) is an attitude commonly found across MENA universities such as in the Gulf [10], Jordan [18] and Sudan [19]. We may conclude that to satisfy both parties, educational institutions must find a middle ground and compromise. This is where bilingualism as a method of instruction comes into play [20]. The use of both Arabic and English as mediums of instruction together allows students better understanding of the learning material and the preservation of Arabic as an academic language while still embracing the global communication offered by English. This method is adopted in some European countries as well as other leading tech countries such as Japan and Norway. Similarly, the UN also advocates the use of multilingual education as a means to bridge language barriers, improve academic performance, and prepare students to thrive in a globalised world [21]. Among recommendations for change in this study, many students suggested using the bilingual method. In a comparative study carried out in Syria, which is notably the only country using AMI, students were given lectures in Arabic, English and in both languages. It was found that the bilingual approach was the most effective [22]. Similar results were found in universities in Palestine [23] and the Gulf [24]. Ultimately, it was found that medical students at the clinical stage in the University of Tripoli did not feel that English was a significant barrier in their studies with 62.7% disagreeing with the existence of language barriers. This is attributable to students' position as clinical stage students. Having studied at least 4 years in English, it is likely that they have become more versed in the language, losing the initial challenge. It is also important to note that out of 113 countries, Libya's English proficiency was ranked 110 which is considered very low [25]. Despite this, there were mixed views on whether or not English caused an impact on student performance [Figure 3]. This discrepancy might be due to varying levels of English proficiency and different learning styles among students. Individual backgrounds and prior exposure to English also play a significant role in how students adapt. Similarly, in another study, out of the 7 difficulties listed in a questionnaire, students ranked peer competition first, not English language barriers [26]. A majority of students were also dissatisfied with the passive, lecture-based method of teaching and wanted the English language curriculum to be improved by more emphasis on conversation skills. Aligning with our Results a university in gulf [10] found: 99 (70%) of the 142 students who responded did not feel a language barrier irrespective of their proficiency in English. We believe that since these students were asked about their perceptions after six years of studying in English, they might have overcome the language difficulties over these years.

To the authors knowledge, this is the first study in Libya that explored barriers and views of medical students toward EMI. The present research targeted students at the clinical phase in the largest medical faculty in the country. However, the findings were limited by the fact that the participants were recruited from one university. Additionally, by focusing on clinical phase medical students, we are only sampling the views and attitudes of a small section of medical students whose ideas have naturally been changed over the course of time.

CONCLUSION

This article aims to address the concerns and barriers faced by Libyan medical students regarding the use of English as

an EMI. Highlighting these concerns and perspectives is essential for fostering an inclusive and supportive learning environment that enables Arab medical students to excel in their education and future practice. Considering the students' suggestions may facilitate the development of potential strategies and solutions that educational institutions can implement to alleviate the challenges encountered by Libyan medical students in English-medium medical education.

Acknowledgments

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Conflicts of Interest

The authors declare no financial or competing interests.

REFERENCES

1. Dyvik E. Most Spoken Languages in the World [Internet]. Statista. 2023. Available from: <https://www.statista.com/statistics/266808/the-most-spoken-languages-worldwide/> (Last accessed on 01/05/2024).
2. English medium Instruction: A Growing Global Phenomenon. ResearchGate. Available from: https://www.researchgate.net/publication/309230956_English_medium_Instruction_A_Growing_Global_Phenomenon (Last accessed on 28/04/2024).
3. Kim JJ, Kim MS, Lee JS, Lee DS, Lee MC, Kwon JS. Dissociation of working memory processing associated with native and second languages: PET investigation. *NeuroImage*. 2002 Apr 1;15(4):879-91.
4. Alnasir FA, Jaradat AA. The effectiveness of AGU-MCAT in predicting medical student performance in year one of the College of Medicine of the Arabian Gulf University. *Education for Health (Abingdon)*. 2011 Aug 1;24(2):447. Available from: <https://pubmed.ncbi.nlm.nih.gov/22081649/>
5. United Nations. International Mother Language Day. United Nations. Available from: <https://www.un.org/en/observances/mother-language-day>
6. Phillipson R. English in globalisation, a lingua franca or a lingua Frankensteinia? *TESOL Q*. 2009 Jun 1;43:100007. doi: 10.1002/j.1545-7249.2009.tb00175.x
7. Hamad A. Decolonization of medical education: a global screening of instructional languages and mother tongue dependence. *Journal of Medical Surgery and Public Health*. 2023 Sep 7;1:100007. doi: 10.1016/j.gmedi.2023.100007.
8. Al-Yateem N, Hijazi H, Saifan AR, Ahmad A, Masa'Deh R, Alrimawi I, et al. Quality and safety issue: language barriers in healthcare, a qualitative study of non-Arab healthcare practitioners caring for Arabic patients in the UAE. *BMJ Open*. 2023 Dec 22;13(12):e076326. doi: 10.1136/bmjopen-2023-076326. PMID: 38135338; PMCID: PMC10748954.
9. Abi Raad V, Raad K, Daaboul Y, Korjian S, Asmar N, Jammal M, et al. Medical education in a foreign language and history-taking in the native language in Lebanon - a nationwide survey. *BMC Med Educ*. 2016 Nov 22;16(1):298. doi: 10.1186/s12909-016-0826-7. PMID: 27876043; PMCID: PMC5120416.
10. Tayem Y, AlShammari A, Albalawi N, Shareef M. Language barriers to studying medicine in English: perceptions of final-year medical students at the Arabian Gulf University. *Eastern Mediterranean Health Journal*. 2020 Feb 24;26(2):233-238. doi: 10.26719/2020.26.2.233. PMID: 32141602.
11. Mirza DM, Hashim MJ. Communication skills training in English alone can leave Arab medical students unconfident with patient communication in their native language. *Education for Health (Abingdon)*. 2010 Aug;23(2):450. Epub 2010 Jul 23. PMID: 20853245.
12. Yang JS, Kim TY. Sociocultural analysis of second language learner beliefs: A qualitative case study of two study-abroad ESL learners. *System*. 2011 Sept;39(3):325-334. ISSN 0346-251X. <https://doi.org/10.1016/j.system.2011.07.005>.
13. Griffith EJ. English as a medium of instruction in higher education institutions in Norway: A critical exploratory study of lecturers' perspectives and practices [Unpublished doctoral thesis]. University of Exeter, UK; 2013.
14. Should non-English-speaking countries teach in English? | British Council [Internet]. [Britishcouncil.org](https://www.britishcouncil.org/voices-magazine/should-non-english-speaking-countries-teach-in-english). 2014. Available from: <https://www.britishcouncil.org/voices-magazine/should-non-english-speaking-countries-teach-in-english>
15. Solloway A. English in the United Arab Emirates: Innocuous Lingua Franca or Insidious Cultural Trojan Horse? In: Buckingham L, editor. *Language, Identity and Education on the Arabian Peninsula: Bilingual Policies in a Multilingual Context*. Bristol, Blue Ridge Summit: Multilingual Matters; 2016. p. 176-196. Available from: <https://doi.org/10.21832/9781783096602-01>
16. Al-Aufi A. Domination of English and its impact on the Arabic system of scholarly communication. *Journal of Arts and Social Sciences [JASS]*. 2012;3(1):5-28. doi: 10.24200/jass.vol3iss1pp5-28.
17. Troudi S, Jendli A. Emirati students' experiences of English as a medium of instruction. In: Al-Issa A, Dahan LS, editors. *Global English and Arabic - Issues of language, culture, and identity*. Vol. 31. Oxford, UK: Peter Lang; 2011. p. 23-48.
18. Al-Shboul O. The students' perceptions of Arabic and English as a medium of instruction in Jordan. *Theory and Practice in Language Studies*. 2022 Jul 4;12(7):1441-1446. doi: 10.17507/tpls.1207.26.
19. Mahmdani AA, Abdel Rahman SH. Evaluating the impact of Arabization on medical students' acquisition, Gezira University, Sudan. *Eastern Mediterranean Health Journal*. 2006;12 Suppl 2:S223-9. Arabic. PMID: 17361694.

20. Raddawi R, Meslem D. Loss of Arabic in the UAE: Is bilingual education the solution?. International Journal of Bilingual & Multilingual Teachers of English. 2015;3(02):85-94.
21. United Nations. Multilingual Education: A Key to Quality and Inclusive Learning. Available from <https://www.un.org/en/un-chronicle/multilingual-education-key-quality-and-inclusive-learning>
22. Alsaid B, Alhimyar M, Naem A, et al. Teaching of medical science using mother language with bi-lingual approach, an experimental cross over trial. Preprint at Research Square [Internet]. 2020 Apr. doi: 10.21203/rs.3.rs-21439/v1
23. Jabali O. Language of medical instruction in Palestine: a mixed method approach of students' perceptions. BioMed Research International 2022;8999025. Available from: <https://doi.org/10.1155/2022/8999025>
24. Tayem Y, Almarabheh A. Medical students' perceptions of introducing medical terms in Arabic within a curriculum taught in English: a descriptive study. Arab Gulf Journal of Scientific Research. 2023 Sep. doi: 10.1108/AGJSR-02-2023-0090.
25. Education First. EF EPI 2022 - EF English Proficiency Index. Ef.com. 2023. Available from: <https://www.ef.com/wwen/epi/>
26. Almoallim H, Aldahlawi S, Alqahtani E, Alqurashi S, Munshi A. Difficulties facing first-year medical students at Umm Alqura University in Saudi Arabia. Eastern Mediterranean Health Journal. 2010;16(12):1272-1277. Available from: <https://iris.who.int/handle/10665/118066>

الحوار اللغوية في دراسة الطب باللغة الإنجليزية: مخاوف و وجهات نظر طلاب المرحلة السريية في كلية الطب بجامعة طرابلس

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المستخلص

على الرغم من أن اللغة الإنجليزية تعتبر لغة أجنبية، إلا أنها وسيلة التدريس في العديد من كليات الطب في العالم العربي، مما يخلق حوار لغوية وصعوبات للطلاب. الهدف من هذه الدراسة هو تقييم مخاوف ومواقف الطلاب تجاه اللغة الإنجليزية كلغة تدريس واستكشاف الحوار وتأثيرها على أدائهم الأكاديمي. كانت هذه دراسة وصفية مقطعية استهدفت الطلاب المسجلين في المرحلة السريية في كلية الطب بجامعة طرابلس، باستخدام استبيان يُملأ ذاتياً. خلال الفترة من 10 مارس 2024 إلى 24 مارس 2024. أظهر 61 طالباً (36.1%) من طلاب الطب أنهم يشعرون بالراحة مع اللغة الإنجليزية، في مقابل 10 طلاب (5.9%) كانوا غير مرتاحين للغاية. ولم ير معظم المستجيبين أن مشكلة اللغة تجعل الدراسة أصعب وأوصى الأغلبية (60.4%) بإجراء تغييرات لمعالجة القضايا اللغوية في المنهج الدراسي. من بين 66 مشاركاً أجابوا عن هذا القسم، أوصى 33.3% بأن توفر الجامعة دورات لغة إنجليزية مجانية، وذكر 161 طالباً (95.3%) أنهم سيختارون دراسة الطب باللغة الإنجليزية مرة أخرى. كشفت الدراسة أن غالبية المشاركين لم يشعروا بأن اللغة الإنجليزية تشكل حاجزاً كبيراً في دراستهم، حيث رفض 62.7% منهم وجود حوار لغوية.

الكلمات الدالة: التعليم الطبي، اللغة الإنجليزية كوسيلة للتعليم، الحوار اللغوية.