



Challenges of culturally and linguistically different healthcare students in learning environments

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Dear Editor

The increased number of international students in higher education systems is recognized as beneficial not only economically but also in terms of preparation of the workforce for the global environment. It is believed that diversity in the student cohort can also be beneficial for domestic students in terms of increasing cultural awareness and achieving cultural competency goals. Culturally and linguistically diverse students (CALD) include students whose first language and/or culture is not of the country they study in (1). There are 55,000 international students in Iran, of whom 26,000 have enrolled in universities affiliated to the Ministry of Science, 10,000 in different branches of Islamic Azad University, 2,000 in universities affiliated to the Ministry of Health, and 17,000 in Almustafa International University (2). According to the latest data from the UNESCO, more than 82% of the international students in Iran come from Afghanistan, 8.7% Iraq, and 6% Syria, Lebanon, and Pakistan combined (3). Meanwhile, the Ministry of Health and Medical Education follows a plan for expanding international medical education in eligible Iranian universities of medical sciences and, hence, concentrates on mechanisms to align the universities with international standards. Although economic,

political, and societal factors in both the host and home countries influence international students' decision to select the host country, it is necessary that the authorities address their needs and problems and then take some measures to solve them in order to increase the number of foreign applicants in Iranian universities.

International students' difficulties have been reported as academically and socially, with cultural and language barriers impacting their capacity to integrate with domestic students. These students have problems with language and communication, suffer from lack of confidence to speak out and ask questions, and approach the teaching staff. For some international students, adaptation to new environment gets so difficult and failure to adjust will cause them to experience psychological symptoms such as feelings of inferiority, confusion, homesickness, loneliness, and anxiety (4). Commonly cited key issues affecting international students in learning environments are communication difficulties, cultural differences, and lack of familiarity with social, educational, and professional health care environments (5). Most of the literature about international students comes from English speaking countries, and thus challenges in the Asian and Islamic learning context have not

been addressed enough in the existing evidence. According to the studies conducted in the international learning contexts, there is a greater power distance and uncertainty avoidance in the Asian culture, and these cultural differences may create tense interrelationships among the trainees, staff, and supervisors (6).

There is a need to develop understanding, accepting and appreciating the students from diverse backgrounds in the learning environments. For health professional students, the challenges become particularly evident in clinical practice settings. Clinical placement is of vital importance for healthcare disciplines and covers approximately 50% of the training activities. While clinical learning experience can be stressful and anxiety-provoking for any student, evidence suggests that this situation is significantly more complex for CALD students (7, 8). Support from the staff in the clinical area can be a source of motivation to students and makes them feel welcome and part of the team, thereby helping them with learning. On the contrary, failure to provide adequate learning opportunities for these students could result in graduates who have not met the required standards and competencies of the profession (9). Therefore, the educational problems of CALD students need to be searched and the reasons should be dealt with to increase their motivation for academic success. We suggest that medical education studies should address the international healthcare students' needs and find strategies to meet their needs in the classroom and clinical learning situations.

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