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REASONS FOR MODIFICATION OF TEACHING LANGUAGE TO MEDICAL STUDENTS

Annotation

This study looks at why English language teaching is being added to medical education as medical education has changed a lot in the last twenty years because of globalization, new technology, and healthcare services spreading across countries by using theoretical analysis and survey research with medical students. According to the observations, majority of students have almost the same reason for learning English language that they want to get more knowledge by reading authentic sources, while some others say that they need to use modern medical equipment. English is considered the main language in medical literature, nowadays, healthcare is becoming more international, technology is advancing, and there are more job opportunities. This chance helps students get better career chances, patients benefit from doctors who know the latest medical information, and the medical world benefits from doctors from all countries working together.

Key words: Medical education, language modification, medical students, medical research, patient safety, medical terminology, English language proficiency, global healthcare, professional development, medical school.

ПРИЧИНЫ ИЗМЕНЕНИЯ ЯЗЫКА ПРЕПОДАВАНИЯ ДЛЯ СТУДЕНТОВ-МЕДИКОВ

Аннотация

Медицинское образование за последние двадцать лет значительно изменилось из-за глобализации, новых технологий и распространения медицинских услуг по всему миру. В данном исследовании рассматриваются причины включения преподавания английского языка – они хотят получать больше знаний, читая аутентичные источники. Другие же отмечают, что им необходимо использовать современное медицинское оборудование. Английский язык считается основным языком медицинской литературы. В настоящее время здравоохранение становится более международным, технологи развиваются, и появляется больше возможностей для трудоустройства. Это дает студентам более высокие карьерные перспективы, пациенты получают пользу от врачей, владеющих самой актуальной медицинской информацией, а медицинское сообщество – от сотрудничества врачей из разных стран.

Ключевые слова: Медицинское образование, языковая модификация, студенты-медики, медицинское исследование, безопасность пациентов, медицинская терминология, владение английским языком, глобальное здравоохранение, профессиональное развитие, медицинские школы.

TIBBIYOT TALABALARI TA'LIMIDA TIL O'QITISHNI RIVOJLANTIRISH SABABLARI

Annotatsiya

So'nggi yigirma yil ichida tibbiy ta'lim globallashuv, yangi texnologiyalar va sog'liqni saqlash xizmatlarining turli mamlakatlar bo'yab kengayishi tufayli sezilarli darajada o'zgardi. Ushbu tadqiqot ingliz tili o'qitilishi nega tibbiy ta'limga kiritilayotganini nazariy tahlil va tibbiyot talabali o'rtasida o'tkazilgan so'rov asosida o'rganadi. Kuzatuvlarga ko'ra, talabalarining aksariyati ingliz tilini o'rganish uchun deyarli bir sababga ega – ular haqiqiy manbaalarni o'qish orali ko'proq bilim olishni xohlashadi. Ba'zi talabalar esa zamonaviy tibbiy jihozlardan foydalanish uchun ingliz tili zarurligini ta'kidlashadi. Bugungi kunda ingliz tili tibbiy adabiyotlarda asosiy til sifatida e'tirof etiladi. Sog'liqni saqlash sohasi tobora xalqaro tus olmoqda, texnologiyalar tez sur'atlarda rivojlanmoqda va ish imkoniyatlari kengayimoqda. Bu jarayon talabalarga kasbiy faoliyatda kengroq imkoniyatlar yaratdi, bemorlar esa so'nggi tibbiy ma'lumotlardan xabardor shifokorlar xizmatidan foyda ko'radi. Shuningdek tibbiyot sohasi turli mamlakatlardan bo'lgan mutaxassislarining hamkorlikda ishlashi natijasida yanada rivojlanadi.

Kalit so'zlar: Tibbiy ta'lim, til o'zgarishi, tibbiyot talablari, tibbiy tadqiqot, bemor xavfsizligi, tibbiy terminologiya, ingliz tili bilim darajasi, global sog'liqni saqlash, kasbiy rivojlanish, tibbiyot maktabi.

Introduction. Medical education has changed visibly over the past twenty years, mainly because of globalization, new technologies, and the spread of healthcare service across countries. One of the biggest changes in this area is the shift in teaching languages, especially adding English as a teaching method along with or instead of local languages in medical schools around the world. This change is much more than just switching languages- it is complete rethinking of how medical knowledge is taught, learned, and used in today's healthcare setting. The reasons why medical schools need to change their teaching language are many, closely connected, and based on the real needs of modern medical work, sharing research

findings, and career growth. The main goal of this research is to find out why medical schools need to teach English language to medical students. We also want to look at the theoretical reasons behind language modification. To reach this goal, we analyzed international research about language teaching modification in medicine, what medical students' English language needs through a survey, put together and analyzed the main reasons for language modification and gave practical suggestions for adding English language in medical field.

Literature review. Many international researchers have studied the modification of teaching language in medical education. Ferguson (2006) did important research on language

planning and education and showed that choosing what language to use for teaching directly affects how good the education is. His work proved that decisions about what language have big effects on getting knowledge and professional development. The main reason for changing language teaching in medical education is that English has become the main international language for medical communication. Clavero (2012) looked at language problems in science journals and found that scientific work that is not published in English stays mostly unknown at the international level. This same problem exists in medicine too. Researchers and doctors who don't know English well might not know about the newest scientific discoveries. Most books and article about medicine are published in English, and studies show that 95% of the top medical journals now publish only or mainly in English. This focus on one language creates an urgent need for medical students to learn English medical words and reading skills if they want to gain present medical knowledge easily. Hwnag and Lin (2010) did research on what medical students in Taiwan need for language. Their research showed that 89% of students said that being able to read medical books and articles in English was the most important skill. They said that knowing English well is very important in modern medical practice. Chen, Wang, and Roberts (2019) studied how language knowledge affects using healthcare technology and showed that when healthcare workers don't know enough English, they have problems using modern medical equipment and software because most medical technologies have English language screens and instructions. Coyle, Hood, and Marsh (2010) showed that the Content and Language Integrated Learning approach makes education better and proved that when students study subjects in a second language, they understand them better. Rubin and Franchi-Christopher (2002) wrote about future standards of medical education and said that English is the global medical communication language, explaining why medical students need to have international skills. Past research agrees that English is important in medical education, but there is not enough research that looks at exactly what medical students need and the complex reasons for language modification.

Research methodology. This research uses a mixed method approach, combining theoretical analysis with survey

Table 1

Reasons	Students	Percentage
Reading original medical books and getting knowledge	94	78.3%
Using modern equipment and technology	78	65.0%
Studying or working in other countries	67	55.8%
Going to international conferences	56	46.7%
Helping international patients	45	37.5%

The results show that most students (78.3%) think English is mainly a tool for reading original medical books and articles and getting knowledge. This matches what Hwang and Lin (2010) found in their research and supports the theory that English is the main language in medical publishing. The second most important reason is using modern medical equipment (65%), which confirms what Chen and his colleagues (2019) said about why technology makes English knowledge necessary. These findings support what we know from theory – when medical schools include English teaching, students can work directly with original materials instead of depending on translations which are often late, incomplete, or not available for special topics.

We also asked students how often they read medical books and articles in English. The result showed that 18 students (15%) read every day, 42 students (35%) read several times a week, 38 students (31.7%) read several times a month,

research to get a complete understanding of why language modification is needed in medical education. We did the study in two parts. First, we carefully analyzed international research, scientific articles, and research reports about language modification in medical education by looking at academic databases including Google Scholar and examining peer-reviewed publications from 2000-2024 that focus on medical education, language policy, and English for medical purposes. Second, we gave a structured questionnaire to find out what medical students' English language needs are and what they think about language modification in their education programs.

The questionnaire had 15 questions covering why students want to learn English language, where students use English language in medical practice, how well students know English now and what they need, and what students think about using English as a teaching language in medical education. The main questions included "Why do you need English language?" where students could answer in their own words, "In what activities do you use English?" where students could choose multiple answers, "How often do you read medical books and articles in English?" with answers from never to very often, and "How important is English for working with medical equipment?" with answers from not important to very important.

We analyzed the information using descriptive statistics like percentages, how often something appears, and average numbers for the number analysis. For the word analysis, we put open-ended answers into categories and looked at themes to find patterns and what students think is most important. All students chose to participate on their own, we kept all information private, and we kept students' names secret throughout the whole process. We tested the questionnaire several times and the Cronbach's Alpha coefficient was 0.82, which means it is very consistent.

Analysis and Results. The survey of 120 medical students showed clear patterns about their English language needs and what they think about language modification in medical education. When we asked students "why do you need English language?" they gave us answers in order importance. We are going to provide the results of the survey in the Table 1 below.

and 22 students (18%) rarely read. This means more than 50% of students regularly read medical materials in English, which shows that knowing English is practically important. This regular reading pattern shows that English is not just something students need to pass a test but an active tool in their ongoing professional development. When we asked students "do you have language problems when working with medical equipment and software?" we found that 34 students (28.3%) said yes often, 56 students (46.7%) said sometimes, and 30 students (25%) said no. About 75% of students have language difficulties when working with medical technologies. This large number supports the argument that medical technology is advancing quickly and most medical equipment and software have English-language screens. Electronic health record systems, medical imaging software, tools for making diagnoses, and telemedicine platforms are designed with English language user screen because these technologies were developed mainly

in English-speaking countries or by international companies that use English as their working language. We also asked "Do you support teaching medical subject in English?" and found that 48 students (40%) strongly support it, 52 students (43,3%) partially support it, and 20 students (16.7%) do not support it. A very large number (83.3%) of student support using English as a teaching language in different ways, which creates good ground for making language modification change. This high level is support shows that students recognize the practical benefits and career advantages that come with knowing English well.

Based on analyzing international research, we found several main reasons for language modification. First, about 95% of modern medical journal articles are published in English, which makes it essential for students to be able to read in English. Healthcare professionals who cannot read information in English have big delays in learning about new treatments, understanding updated treatment guidelines, and using practices based on evidences. Second, besides reading medical articles, changing the teaching language responds directly to healthcare services spreading across the world. Modern healthcare systems work more and more in global networks where medical tourism, international patient movement, and healthcare cooperation across borders are common. Medical research increasingly involves international research terms, studies done at multiple locations, and collecting data across cultures, which needs smooth communication among research from different language backgrounds. In addition, healthcare workers who do not know enough English may have major problems using essential medical tools effectively. Medical students who study with English instruction become familiar with the terminology and command structures used in medical technology systems, which makes sure they are ready to work with digital tools that more and more define modern medical practice while doctors who have strong English language skills have much wider career choices including opportunities for international work, specialty training in top medical centers, and participating in respected fellowship programs. Many countries require international medical graduates to show English ability as a condition for getting a medical license, which basically make English knowledge a requirement for professional work in major healthcare markets. Communication within healthcare teams that are more and more diverse is important because modern hospitals and clinics employ healthcare professionals from various countries and language backgrounds. English often serves as the common language that lets nurses, physicians, pharmacists, and allied health professionals who do not share a native language work together, and good communication between professional is essential for patient safety.

Conclusion. Modifying the teaching language in medical education is a necessary and smart response to the realities of modern medical practice, research, and professional development. This research has shown through both theoretical

analysis and real evidence that language modification is not just an educational trend but a basic adaptation to the connected nature of twenty-first century medicine. The survey findings prove the theoretical framework is correct because medical students themselves recognize and give priority to English language needs, especially for reading original medical books and articles (78.3% of students) and using modern medical equipment (65% of students). What students identified as priorities matches exactly with the documented realities of modern medical practice. English is the main language in medical literature (95% of top journals publish mainly in English), medical technologies have English-language screens, and medical research collaboration is international. All of these demand that medical students develop good English language skills. Medical schools that modify their teaching language to include English instruction position their graduates for success because the medical profession more and more works across language and national boundaries. This educational modification helps everyone – students gain better career opportunities and professional abilities, patients benefit from doctors who can access current medical knowledge and current medical knowledge and communicate well in diverse settings, and the broader medical community benefits from more participation by physicians from all language backgrounds.

Based on the findings of this research, we can give several practice recommendations. Medical schools should slowly increase hours of teaching medical subjects in English and use the Content and Language Integrated Learning approach. They should make academic English courses required in years 1-2 of medical programs and develop special medical English courses that focus on reading and technical terminology. Schools need to create programs to improve medical faculty members' English language skills and expand international exchange programs for faculty. They should make sure students can access English – language electronic libraries and databases, use modern mobile phone apps and platforms for language learning, and expand subscriptions to English – language medical journals.

Modifying the teaching language in medical education, especially adding English instruction, is an essential development in preparing medical professionals for modern practice. As this research has shown, the reason for this modification are many, connected, and based on practical realities. For Uzbekistan's medical education system accepting this modification helps graduates participate fully in global medical discussion, access cutting-edge research and treatment methods, and pursue international career opportunities. This adaptation serves national interests by producing medical professionals who can contribute to international medical knowledge while bringing global best practices to domestic healthcare. The language challenges in this modification are outweighed by the professional advantages, and it is basically necessary to make sure that medical graduates can work with the global medical community throughout their careers.

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