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DILEMMA AND INTERCULTURAL PARTICULARITIES IN UNIVERSITY MEDICAL EDUCATION IN IAȘI

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Abstract

Over the years, with the increase in accessibility to university mobility, the nationality and ethnicity of students at the University of Medicine and Pharmacy "Grigore T Popa" from Iași, Romania, has progressively diversified, with students originating not only from different countries, but also from extremely varied cultures. They brought to the university environment not only the enthusiasm of the beginning of a new professional educational endeavor, but also a series of particular elements that usually add value to university network, even though this heterogeneity may sometimes create contextual dilemmas they need to overcome with the support of teachers and colleagues. The educational path from admission, at different university and post university studies, including doctoral level is in constant adaptation to local requirements, in line with the European ones and dynamic (that mixes elements of harmony or sometimes conflict) with the need to preserve the cultural and spiritual identity of origin. Medical education, requiring constant interaction with the patient, creates apart from the classic student-teacher relationship, another layer of students' social and professional interaction, this time with the patients integrated into the hospital life. The detailed analysis of the impact factors in relation to the intercultural variability of medical students could constitute a starting point for an improvement of the management of possible difficulties or struggles inherent in the cultural-educational mix, especially that the model of the "Grigore T Popa" University of Medicine and Pharmacy is, to a large extent, similar to other medical universities in Romania.

Key words: medical education, multiculturalism, adaptive mechanisms

Introduction

"Grigore T Popa" University of Medicine and Pharmacy, Iași, is one of the oldest medical education institutions in the country, having been founded in 1879 as a Faculty of Medicine, later the educational range broadened with the Faculty of Pharmacy and Dentistry and then including the Faculty of Medical Bioengineering. The university is an elite unit in the training of students with aspirations to various medical fields, having a broad educational offer for undergraduate studies at all 4 faculties. Even beginning from the communist period, University of Medicine and Pharmacy "Grigore T Popa" has received an impressive number of foreign students for enrollment in medical studies, initially from Arab countries, Africa and Greece. Later, with the growth of the University's fame and international visibility, the origin countries of foreign students have been increasingly numerous, so that currently the university trains students from 75 countries. Moreover, the emergence of teaching directions in languages other than Romanian has opened even wider the gates of accessibility to studies for candidates from other countries even in the absence of special linguistic inclinations, and the possibility of continuing studies through a master's or doctorate degrees, offered by the University is an additional element of optimizing medical studies in the same educational

space, integrating the international collaborations. With the arrival of an increasing number of foreign students, intercultural interrelations arise between them and the local cultural and educational space, implying adaptation efforts on the part of both those who have arrived and the hosts also (Ecochard & Fotheringham, 2017).

However, the broad relational openness sometimes implies dilemmas that, to the extent that we will know/recognize them, are manageable in an optimal manner (Lucza et al., 2024).

Considerations regarding the admission method

Candidates for medical studies at the University of Medicine and Pharmacy "Grigore T Popa", Iași, have several admission methods available. These include: the admission exam with multiple-choice questions in the subjects of anatomy and physics/chemistry (addressed to Romanian candidates, residents in Romania, on a predetermined number of budgeted or fee-paying places and with studies taught in Romanian), competitive exam with high stakes related to expectations, admission based on a file (addressed to foreign candidates who wish to access medical studies taught in English or French, admission being made based on the score obtained), admission with an exam but on separate places for Romanian candidates from abroad (i.e. from a country other than Romania) or dedicated to some minorities.

These different admission methods could generate ethical dilemmas that students could perceive as inequities: for example, the admission of a candidate with a grade of 5 to special places versus the failure to admit another with a significantly higher average but who applied for the spots available for Romanian students residing in Romania. It is true that the existence of disadvantaged social categories has imposed these diversifications of admission patterns with the declared purpose of surmounting local social inequities (Levitt, Gilbert-Hunt & Murray, 2021).

Admission based on application to courses taught in English or French creates discrepancies among these various backgrounds of students (educated in different systems, with different assessment criteria, often difficult to directly compare to each other), many of whom come from Romanian families (from the diaspora) but who were assimilated in the respective countries and became foreign citizens in relation to their native country, compared to Romanian students resident in the country who compete in a much more uniform manner in terms of criteria (the single grid).

From a purely ethical perspective, admitting all candidates on the same criteria would be an option that meets ethical needs but not social ones, which is probably why parallel admissions are maintained. However, admission is more uniformly regulated for master's and doctoral studies, in these situations the polymorphism of the proposed research makes a grid-type admission inappropriate, which is why the interview and the research plan presentation are the essential elements of admission (Huhn et al., 2016).

Student mix according to origin

The students studying at "Grigore T Popa" University of Medicine and Pharmacy, Iași, come from 75 countries all over the world, but their distribution is different, the majority being enrolled in the series taught in English or French. There are still a number of foreign students who have opted to enroll in the series taught in Romanian; to this end, they have invested significant efforts to learn the Romanian language from the beginning. This diversity of student origin is an element to be considered in the university assessment, but it involves efforts to adapt students with different nationalities or citizenship and with previous residence outside Romania to the social, cultural and traditional conditions of our country. Obviously, the traditional hospitality of the Romanian people is a significant facilitator of this adaptation, with students often helping each other in matters, not only educational-medical.

Moreover, even among students with Romanian citizenship, there is a share of students of different nationalities that reflects their proportion in the general population; for some nationalities this is perhaps less evident in Moldova and more evident in Transylvania, but for others the distribution of students is proportional (Hungarians, Roma, Turks, Tatars, Jews, Saxons, Germans, Italians, Greeks etc). These students have the advantage of having acquired Romanian language skills since childhood, even if not as their native language, implying a smaller adaptive effort.

For all medical students, regardless of faculty, speciality and origin, student life involves not only didactic activities, but also social, cultural and spiritual development during the years of studentship, master's or doctoral studies (Cobb-Roberts et al., 2017).

In this regard, the intercultural mixture of a clearly positive nature, facilitates the access of foreign students, together with Romanians, to the cultural and spiritual, but also urban values of the Romanian people, in a city with ancient and profound cultural-spiritual activities and established traditions. The joint participation of students in this cultural-spiritual life amplifies the acquisition of vast knowledge for all participants in these extracurricular activities, because "non scolae sed vitae discimus". Participation in spiritual life is obviously a personal option and the open, multi-optional climate allows everyone to develop in the spirit of their origins, traditions and preferences, without limiting their accessibility to knowledge of other spiritual aspects specific to other geographical areas. This unrestrained access is the cornerstone of the existence of a student life carried out in multiculturalism and opens up horizons for students to freely embrace their personal options, perhaps in a more profound and unbound way than they could have experienced living their student life in their countries of origin.

The language barrier

In medical education as in medical practice, communication is essential. Communication skills and the richness of the vocabulary allow better educational and professional development, but unfortunately in recent years we have witnessed an impoverishment of the language that reflects an impoverishment of thinking (including critical thinking). Multilingualism, although apparently opening the doors to communication, accentuates linguistic impoverishment (Li, Han & Zheng, 2025); we are currently witnessing mixtures of various languages, even defined by some as unconventional: Frenglish/Franglais, Romglish etc. These bring along the impoverishment of the defining and indispensable nuances useful in clinical medical activities, activities that for most graduates will have to be carried out in an effective and culturally defined space, few being those who will opt for a migratory-style practice, most frequently in the form of substitutes in services with a temporary lack of qualified personnel (Osadcha, 2024).

If in preclinical disciplines there are no significant differences in linguistic comprehension between the series taught in Romanian and those taught in foreign languages, in clinical disciplines the native Romanian-speaking student has a clear advantage over the non-native speakers, because the contact with the Romanian patient requires at least medium level knowledge of the Romanian language. Students who have difficulty handling Romanian, those who use regionalisms (mostly from the Republic of Moldova) or foreign students for whom Romanian is a foreign language, otherwise mandatory to know at a basic level when entering clinical spaces, are at a disadvantage because communication with the patient is essential to be done in a direct manner and not using the support of teaching staff to mediate the students' interaction with the patient. Moreover, patients are sometimes reluctant and less willing to be involved in the educational process, when the students are not able to communicate and perform patient interview in Romanian. This disadvantage is counteracted by the sustained activities of the foreign language departments within the University, the

teaching staff being engaged in students' activities of learning, understanding and speaking the Romanian language freely.

Peculiarities of student multiculturalism in clinical disciplines

Clinical disciplines require direct contact between students and patients during internships, to achieve optimum teaching outcomes and also develop communication skills (Ohlan et al., 2022).

However, most patients admitted to state/public hospitals (where medical students carry out their medical-educational activity) either do not speak any language other than Romanian, or due to their impaired general status (often patients with severe medical conditions) they are not available to communicate with students in any language other than Romanian. That is why the university regulations specify the need to know the Romanian language for all medical students regardless of the language of the course. However, this is achieved with different performances, with students enrolled in courses taught in English or French having the same learning tasks as those in Romanian-language courses, but in addition, the need to learn the Romanian language, which requires an additional effort during periods of busy learning, which creates difficulties in communicating with the patient. During practical internships, there are frequent situations in which the teaching staff becomes a translator between the student and the patient, which consumes the internship time, which is predetermined and equal for all series, being detrimental to the students' professional training and an additional effort for the teaching staff whose purpose is to teach medicine and not to translate. This dilemma could be avoided by imposing the acquisition not only a basic level of Romanian language knowledge gradually, but a medium level at least during the first (preclinical) years, so that the burden of learning Romanian as a foreign language is alleviated and at the time of access to the clinic, foreign students have real knowledge of Romanian language.

Peculiarities of multiculturalism in the conduct of university assessments

Evaluations during the semesters, oral practical exams, written and grid-type exams are complex aspects of the assessment of the level knowledge accumulation and practical skills acquisition of medical students. Depending on the type of exam, the difficulty of the examination could be perceived differently between foreign students compared to Romanian students. Multichoice questions are perceived as the most comfortable and easy to handle evaluation method for students who, during their pre-university schooling, were extensively familiar with this manner of assessment. This type of examination is used in an extremely variable manner in different countries and even in different educational institutions in the same country (for example, state education versus Waldorf-type pedagogy). Oral examinations, especially those conducted during practical examinations at the patient's bedside, will be easier for native Romanian-speaking students, but also for those who know Romanian very well, while those with comprehension or speaking difficulties will be disadvantaged. On-line examination was a surrogate accepted only in pandemic years (Lajoie et al., 2020).

However, it is likely that the division of exams into three distinct tests that are given on different days (an action carried out for a broader, better, clearer, less biased or influential manner) represents a great burden for students, some of which may have several sub-tests, in turn with the possibility of being taken on different days, which puts continuous learning pressure regardless of the student's origin. Obviously, such an evaluation is much more complex, but also obviously the ideal would be a single evaluation for each subject at least to avoid burnout syndrome in students (Cui et al., 2025).

Extracurricular activities and the socio-cultural and spiritual life of students

Socio-cultural activities are an integral part of student life and present particularities and special challenges in an institution characterized by multiculturalism (De Wit & Altbach, 2021).

The extracurricular activities organized within the University of Medicine and Pharmacy "Grigore T Popa" bring additional value to the preparation of students both for their chosen profession and for life. Obviously, although accessibility is usually general (with small exceptions depending on the activity, some requiring a pre-existing knowledge base, therefore not accessible to early years of study), the willingness to participate is dictated by personal options and beliefs regardless of their country and culture of origin and often motivated by the expected benefits. These benefits are direct (additional medical knowledge) but also indirect (cementing relationships between students, wider openness to the medical or pharmaceutical world, broadening horizons outside of areas of strict interest). In accessing these extra-curricular activities, the motivation is individual and there are no participation trends depending on cultural affiliation, but rather depending on natural inclinations and desired directions of professional development (Cole & Packer, 2019).

However, in the cultural activities offered by the space in which the students have immersed, namely the cultural life of the city, activities that are not the object of interest of an institutional organization, with very rare exceptions (special offer for students of tickets to participate in conferences, concerts, opera or theater etc), the approach is clearly subordinated to the cultural background of the student (Mittelman et al., 2018).

Thus, some students, accustomed to the social life of a city, are more willing to experience new events compared to others with backgrounds of reduced cultural activities or from conflict zones, who are not used to these activities. The interest for socio-cultural activities can be stimulated by their colleagues and sometimes even by the tutors, leading to opening new perspectives or at least to recharging and recovering the energy necessary for the intense medical activity of students (Alkharusi & Segumpan, 2024).

The social life of medical students has an important component of inter-group relations; these relations, often initiated between local groups known from the pre-university space, subsequently mix, broaden and involve groups or students from other geographical areas belonging to the same culture (from Romania), other cultures from the same space (the cohabiting nationalities) but also students from anywhere in the world, both those with Romanian origins and those completely foreign to Romanian or European culture. This is fundamentally useful for the balanced psycho-emotional development of students within the perimeter of tolerance, mutual understanding and good human coexistence.

University mobility

Due to the nature of their age, enthusiasm and wish for self-development, medical students are open to academic educational exchanges most frequently by carrying out 1-2 semester internships in partner universities, either directly or within institutional European programs (for example, the Erasmus program agreed by most students) (Rothwell et al., 2023).

These exchanges of location, style, and manner of learning are extremely beneficial to students who, through these experiences, open up their relational horizons more than could have been achieved through virtual contacts alone (Imafuku et al., 2021).

The duration of the exchange and the need to integrate into different educational institutions, even if with the same profile, represent a challenge that will stimulate adaptive mechanisms and the medical knowledge obtained in these location exchanges will be equated, so that their medical educational rhythm is not disturbed (Wang, Liu & Zhang, 2023).

In these programs, although shorter in duration than those experienced by foreign students studying in the University of Medicine and Pharmacy "Grigore T Popa" in Iași, Romanian students will experience the same challenges as the international students who chose to study in Iași and have to adapt by obtaining a maximum of knowledge without compromising their spiritual and cultural personality, and even obtaining (depending on the degree of openness) knowledge about the culture and civilization of the space where they are going.

Graduation

In a multicultural institution, the graduation of undergraduate studies, the first step towards becoming a professional that the student opted for at the time of admission, is a step that remains in everyone's memory as an event with profound significance. The graduation festivities, extensive, marked by moving speeches given by both teaching staff and students from all series, with teaching in all the official languages of the university, in which families, relatives and acquaintances of the students also participate, represent a peak of unity in diversity culminating with the Hippocratic oath in the 3 official university languages. It is the moment of temporary separation, each graduate following his professional and life path but will certainly be remembered at reunions in years to come.

Access to the labor market

A graduate diploma from a faculty within the University of Medicine and Pharmacy "Grigore T Popa" grants the holder the right to practice medicine in the many countries where it is accepted, but access to the labor market differs depending on the health programs of each country. Therefore, although all graduate students from a faculty within the University of Medicine and Pharmacy "Grigore T Popa" have a level of knowledge (certified by the bachelor's exam) that allows them access to the labor market, their further development will depend on the specialty they will chose, the manner of accessing residency (interview versus exam/competition), the manner of conducting studies within a residency (duration, location, level/standard of the medical unit), state policy (residency with position versus without position), access to state versus private medical services. Obviously, the options will be individual, the role of university being to inform the graduate about the possibilities and to guide them according to their natural inclinations so that each graduate is put in the best position to achieve maximum performance (Alvarez-Cruces, Mansilla-Sepulveda, & Nocetti-de-la-Barra, 2025; Ishimaru et al., 2025).

After completing their undergraduate studies, facilitated by the guidance along the way, derived from the perception of natural inclinations, some graduates prefer a medical career, pharmaceutical or biomedical engineering career, others will opt to work in for industry, while others will continue their studies with master's or doctorate degrees and will head towards an academic or research career (Tight, 2019).

Ideally, the number of graduates who opt out from practicing in their field of study should be extremely small (Caligiuri et al., 2020).

Adapting teaching to multiculturalism

Not only students from different cultures need to adapt to teaching, but also teachers need to adjust to this multicultural context (Villafañe et al., 2022).

This adaptation requires tolerance, an effort to understand the particularities of students from different cultures and backgrounds, but at the same time it requires an effort to maintain standards that increase the academic visibility of the university and the effort not to reduce the quality of the teaching act when faced with barriers in the educational process.

Conclusions

With the admission of international students to higher medical education, both in the Romanian teaching section and English and French teaching sections, a series of relational challenges around the adaptation and integration processes emerged not only in the didactic process, but also in the spiritual-cultural life of students, teaching staff, the University's administration, and overall, in the society as a whole.

These challenges, sometimes generating dilemmas and difficulties, have been addressed, either via using the level of cultural and educational background or clearly established through regulations, guides and protocols for carrying out educational activities. Moreover, the organization of extra-curricular activities, the efforts for community integration based on the norms of democracy, diversity and European inclusiveness of all students create the premises for an optimal development of their activity and social life within the welcoming university community that continuously adapts to these challenges on the fly.

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