THE EFFECTIVENESS OF CONTEXTUAL LEARNING IN TEACHING MEDICAL TERMINOLOGY

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1. Introduction

English for Specific Purposes (ESP) plays a vital role in medical education, especially for students who are required to acquire professional vocabulary to read, understand, and communicate in academic and clinical settings. Medical terminology often poses a challenge for first-year medical students, as many lack the linguistic and contextual background necessary to comprehend and use specialized vocabulary effectively. Contextual learning—an approach that emphasizes learning vocabulary through meaningful, real-life contexts—has proven to enhance vocabulary retention and understanding. This study investigates the effectiveness of contextual learning in teaching medical terminology to first-year medical students.

2. Literature Review

Previous research in ESP and vocabulary acquisition highlights that context plays a crucial role in understanding and retaining new words. According to Nation (2013), vocabulary learned through contextualized exposure tends to be retained longer than isolated word learning. Medical vocabulary teaching traditionally relied on memorization techniques and translation-based tasks. However, studies by Dudley-Evans and St John (1998) and Hutchinson and Waters (1987) emphasize the importance of integrating content-based learning where students encounter terms within medical texts, dialogues, and case studies. Recent research (Nguyen, 2020; Rahimi, 2022) confirms that contextual learning promotes deeper cognitive processing, leading to better understanding and practical application of medical terms.

3. Methodology

This study employed a mixed-method design to evaluate the effectiveness of contextual learning in teaching medical terminology. Participants included 60 first-year medical students enrolled in a Foundation Medical English course at Urgench State University. The students were divided into two groups: a control group that learned terminology through traditional methods (word lists and definitions) and an experimental group that used contextual learning activities such as case-based reading, patient dialogues, and simulated clinical tasks. Both groups studied the same set of 300

essential medical terms over a six-week period. Data were collected through pre-tests, post-tests, and student feedback questionnaires. Quantitative data were analyzed using paired t-tests to measure vocabulary gains, while qualitative feedback provided insights into learners' perceptions of contextual learning.

4. Results

The findings revealed a statistically significant improvement in the vocabulary acquisition of the experimental group compared to the control group ($p < 0.05$). Students in the contextual learning group showed a 35% higher increase in post-test scores and demonstrated stronger retention after two weeks. Qualitative data supported these findings, as students reported that learning through realistic contexts helped them better understand medical terms and remember their meanings. They also expressed increased motivation and confidence in using the terminology in classroom discussions and written tasks.

5. Discussion

The results confirm the positive impact of contextual learning in teaching medical terminology. By embedding vocabulary within authentic medical scenarios, students can connect linguistic knowledge to professional application. This supports the theoretical foundation of CLIL (Content and Language Integrated Learning) and ESP methodology, which advocate for language instruction embedded within meaningful content. Contextual learning enables students not only to memorize terms but also to understand their functional use, thereby promoting communicative competence. The study also highlights the importance of using varied contextual materials—such as case studies, dialogues, and visual aids—to accommodate different learning styles.

6. Conclusion

This study concludes that contextual learning is an effective method for teaching medical terminology to first-year medical students. Compared to traditional methods, contextualized instruction significantly improves vocabulary acquisition, retention, and student engagement. The findings suggest that ESP and medical English instructors should integrate contextual materials into their curriculum to foster deeper learning. Future research should expand on this study by including larger participant groups, longer instructional periods, and integration of digital tools for contextualized practice.

References

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