

Beyond Logistics: Intercultural Dimensions of Hosting Visiting Medical Students in the Dominican Republic

Pamela Jiménez Taveras¹

¹Office of the Vice-Chancellor for Internationalization and Community Engagement, Universidad Iberoamericana (UNIBE), Santo Domingo, Dominican Republic.

Corresponding author: Pamela Jiménez Taveras, MSc, Incoming student coordinator, Universidad Iberoamericana (UNIBE), email: p.jimenez2@unibe.edu.do

Abstract

This reflection explores the intercultural dimensions of hosting visiting medical students in the Dominican Republic from the perspective of local program coordination. While often perceived as primarily logistical, coordinating international exchanges involves navigating complex cultural, linguistic, and interpersonal dynamics that significantly shape students' experiences.

This perspective highlights key aspects of student adaptation, including language barriers in clinical settings, differences in communication styles within a high-context culture, and exposure to unfamiliar clinical practices and healthcare systems. Particular attention is given to the role of institutional support, host families, and campus integration in fostering a sense of belonging and facilitating intercultural competence.

The letter also emphasizes the often invisible role of coordinators in bridging communication gaps, managing expectations, and creating structured support systems that enable effective collaboration between students, healthcare providers, and host communities. Additionally, it acknowledges the reciprocal nature of these exchanges, where institutions and coordinators also benefit from students' perspectives and feedback.

Ultimately, this reflection underscores that global health education extends beyond clinical training and is rooted in meaningful intercultural engagement. Experiences such as these contribute to the development of adaptable, empathetic, and culturally competent healthcare professionals prepared to work in diverse global contexts.

Keywords

Global health education; intercultural competence; student mobility; cultural exchange; host institutions; Dominican Republic.

At first glance, coordinating visiting medical students within a university setting may appear to be primarily a logistical role. However, through our experience at Universidad Iberoamericana (UNIBE) in the Dominican Republic, we have observed that these exchanges are deeply shaped by intercultural dynamics that extend far beyond coordination. At UNIBE, visiting students are those who participate in short-term clinical rotations or exchange programs.

Each cohort of students arrives with clear expectations regarding their academic and clinical responsibilities, as well as an openness to engaging in a new cultural, academic, and linguistic environment. Yet, the transition from expectation to lived experience often reveals complex layers of adaptation, learning, and interpersonal growth that are central to global health education and exchange programs. Students also encounter everyday aspects of Dominican life, such as navigating traffic and adjusting to local rhythms, which become part of their broader learning experience and may present as culture shock in their first days.

One of the first and most evident challenges students encounter is language. Although all participants are required to have an intermediate to advanced level of Spanish proficiency, real-life communication in clinical settings presents a different reality. Students must navigate medical terminology, patient interactions, and fast-paced environments in a language they may not fully command in practice. Regional variations of Spanish, including faster speech patterns and colloquial expressions common in the Caribbean, can present additional challenges in clinical communication. While doctors, healthcare providers, and fellow

students may adjust their speech to facilitate understanding, patients typically communicate naturally, which can make comprehension more challenging for learners.

Additionally, the Dominican Republic is considered a high-context culture, where communication tends to be expressive and indirect, and meaning is often conveyed implicitly. Patients may not respond to questions in a direct manner, instead sharing broader narratives before arriving at the relevant point. This requires students to adapt their listening skills and approach to patient interaction. Rather than focusing solely on medical terminology, they learn to interpret context, identify patterns, and understand patients' lived experiences, including their habits, routines, and social environments. This process fosters a more empathetic approach to care, increasing students' awareness of both their surroundings and patients' realities, which are essential pillars of human-centered care.

Dominican culture also emphasizes relationship-building and warmth in interpersonal interactions. For many students, this represents a shift from more transactional or efficiency-driven models of care. They are encouraged to develop empathy, actively listen, and build trust with patients before moving toward diagnosis. This reinforces an important lesson: behind every diagnosis and set of symptoms, there is a person with unique experiences, emotions, and circumstances. Understanding diverse patient demographics within hospital settings becomes an essential component of their training and lived experiences. Beyond language and communication, students are exposed to clinical practices and pathologies that may differ from those in their home countries. These differences broaden their medical perspective and encourage adaptability in unfamiliar contexts. Exposure to alternative approaches to healthcare allows students to reflect on how medicine is practiced in different settings and consider how these insights may inform their own future practice.

Interpersonal and intercultural skills play a fundamental role in students' development throughout the program. Many initially arrive with hesitation or shyness but gradually gain confidence as they engage with their surroundings. The warmth and support of university and hospital staff contribute significantly to fostering a sense of belonging and helping students integrate into their new environment.

Host families are essential to this process and represent one of the most impactful elements of the program. Beyond providing accommodation, they facilitate cultural immersion by integrating students into daily life, traditions, traditional meals, and social dynamics. Through these relationships, students gain a deeper understanding of Dominican culture while finding a "home away from home." These connections often extend beyond the duration of the program, reflecting their lasting impact on both students and host families.

Adaptation also occurs through everyday experiences, such as navigating transportation systems, adjusting to different perceptions of time, customs, communicating in a second language, and engaging with new social norms. While these situations may initially present challenges, they often become meaningful and memorable aspects of the students' experience, contributing to the development of intercultural competence. Within healthcare settings, students encounter culturally embedded practices that shape patient care. These experiences broaden their understanding of healthcare systems and patient perspectives. They may also observe differences in available resources, equipment, and clinical processes compared to their home institutions. While some procedures may take longer or be approached differently, these variations provide valuable insight into how similar conditions can be managed across diverse contexts and healthcare systems.

Much of the students' adaptation is quietly supported through coordination efforts that aim to anticipate needs, bridge communication gaps, and foster a sense of belonging. Establishing clear roles and maintaining open communication allows institutions, healthcare providers, and host families to work collaboratively in supporting students. Communication gaps are further addressed by incorporating local student support, enabling peer-to-peer interaction that often feels more accessible and comfortable for visiting students. Additionally, designated healthcare providers, such as supervising physicians, are identified in advance and their contact information is shared with students to ensure clear and accessible points of communication throughout their clinical experience.

Our team also prepares the students' schedules prior to their arrival and shares them alongside their acceptance letter, giving students the opportunity to review, ask questions, and request adjustments before the program begins. This approach helps reduce uncertainty and ensures a smoother transition into both the academic and clinical environment.

As part of the adaptation process, we intentionally foster a sense of belonging by integrating students into the UNIBE campus community. From the beginning of the program, students are introduced to campus spaces and resources, including study areas, classrooms, the library, and recreational facilities such as the gym. They are also encouraged to use shared spaces, such as the "Plazoleta" (or the campus plaza), where they can have meals and interact with other members of the university community. This access allows students to move beyond their clinical responsibilities and experience daily academic life, reinforcing their identity as active members of the institution rather than temporary visitors.

Importantly, this exchange is reciprocal. Coordinators and institutions also learn from students' perspectives, reinforcing the importance of continuous feedback and program evaluation.

Student feedback has played a significant role in improving the program over time, allowing adjustments that enhance the experience for future cohorts while ensuring that participants feel heard and valued.

This experience highlights that global health training extends beyond clinical exposure and is fundamentally rooted in people, relationships, and context. Students gain not only medical knowledge but also a deeper understanding of cultural diversity and human-centered care. Developing empathy, emotional intelligence, and cultural awareness becomes essential in preparing healthcare professionals to work in diverse and complex environments. These experiences strengthen students' profiles by equipping them with intercultural and interpersonal skills that are increasingly valued in global healthcare environments.

Intercultural competence is not optional but essential for students to effectively engage with their areas of interest. Hospitals are inherently diverse spaces, where patients from various backgrounds, cultures, and socioeconomic realities converge. Understanding these differences is critical for delivering meaningful and effective care.

Ultimately, successful global health programs depend not only on academic or clinical excellence, but on meaningful intercultural and human engagement. What may appear as logistical coordination is, in practice, the continuous work of bridging cultures, managing expectations, and fostering human connection.

Acknowledgments

The author would like to acknowledge the support of the Office of the Vice-Chancellor for Internationalization and Community Engagement at Universidad Iberoamericana (UNIBE), as well as the School of Medicine, healthcare professionals, the host families, and partner institutions who contribute to the success of the program.

Conflict of Interest Statement: The authors declare no conflicts of interest.