

Intercultural Communication in Medical Context: An Analysis of Regional and Cultural Factors

Chenjie Zhang*, Yunping Zhao

Zhengzhou University of Aeronautics, Zhengzhou, Henan, China

**Author to whom correspondence should be addressed.*

Copyright: © 2025 Author(s). This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY 4.0), permitting distribution and reproduction in any medium, provided the original work is cited.

Abstract: In recent years, the number of visitors to China has surged. As a result, the number of foreign nationals utilizing China's healthcare system has inevitably increased. From the perspective of applied linguistics, empirical research on foreign patients' medical experiences and health examinations in China remains limited. This study, as a preliminary experiment focusing on communication between foreign patients and Chinese doctors, collected 10 short videos shared by foreign patients living in or visiting China, which documented their healthcare experiences. Through transcription and translation, a total of 9,033 words of text were obtained. The transcribed texts were then analyzed for sentiment using the micro-word cloud software. The study found that foreign patients in China praised the efficiency of healthcare services, particularly the ability to undergo tests and examinations without the need to wait for an appointment, as well as the high-quality doctor services, and affordable medical costs. However, concerns about privacy protection were also noted.

Keywords: Intercultural communication; Medicine; Region and culture

Online publication: October 29, 2025

1. Introduction

Over the past several years, the number of foreign visitors to China has risen markedly. For example, from January to July 2024, inbound tourist visits by foreign nationals reached 5.722 million and visits for meetings and business activities reached 3.803 million, representing year-on-year increases of 403% and 81.5%, respectively ^[1]. This trend objectively places greater demands on China's supporting infrastructure and service-provision systems. It is therefore imperative to undertake corresponding optimizations and upgrades to ensure that foreign visitors to China receive high-quality and convenient experiences during their stay, thereby further projecting China's open and inclusive international image and demonstrating its capacity for efficient service delivery.

The large number of visitors to China implies that their demand for medical services during their stay has increased accordingly, rendering cross-cultural doctor-patient communication an inevitable aspect of clinical

practice and posing new challenges and requirements for the cross-cultural adaptability of the healthcare system.

Over the past few decades, scholars worldwide have conducted extensive research on doctor–patient communication ^[2–4]. However, studies specifically addressing cross-cultural doctor–patient communication involving foreign patients in China remain limited.

As a pilot investigation for a program on doctor–patient communication in intercultural contexts, this study analyzes 10 consultations extracted from online vlogs produced by foreigners living in or visiting mainland China who documented their medical experiences or described their experience in China’s hospitals, with the aim of examining the features of this form of intercultural communication in mainland China. The findings reveal the processes by which trust is constructed between Chinese physicians and foreign patients and identify the discursive strategies employed in clinical consultations.

2. Intercultural communication in the medical context

Across disciplines, intercultural communication has been theoretically grounded in systematic examinations of cultural difference and its effects on communicative practice. Foundational contributions, such as Hall’s high-/low-context distinction and Hofstede et al.’s cross-national cultural dimensions, have supplied analytic constructs for understanding contextuality, implicitness, and national value orientations ^[5–6]. These macro-level frameworks continue to inform comparative empirical work on discourse practices, organizational behavior, and policy, thereby shaping subsequent theoretical and methodological developments ^[7].

Theoretical frameworks and methodological approaches from intercultural communication have been extensively employed in the analysis of professional discourse, including doctor-patient consultations ^{[8]–[10]}. Intercultural communication has become an increasingly important area of research within the medical field, as globalization leads to more diverse patient populations. In medical settings, the quality of doctor-patient communication is crucial to patient outcomes, satisfaction, and overall healthcare delivery. However, when healthcare providers and patients come from different cultural backgrounds, communication barriers such as language differences, contrasting health beliefs, and varying expectations of medical professionals can significantly impact the interaction. Intercultural communication in the medical context refers to the exchange of information between healthcare providers and patients from diverse cultural backgrounds.

Research on doctor-patient communication has highlighted the challenges that arise when cultural differences are not adequately addressed. Studies have shown that cultural barriers can lead to misunderstandings, lower trust in healthcare providers, and even poorer health outcomes. For instance, patients from minority or non-dominant cultures may feel misunderstood or marginalized, which could discourage them from seeking necessary medical care or following prescribed treatments ^[10]. Moreover, when doctors fail to recognize and adapt to patients’ cultural norms and preferences, the therapeutic relationship can suffer. These challenges underscore the need for healthcare professionals to develop intercultural communication skills to provide culturally competent care that fosters trust and improves health outcomes.

A key factor influencing intercultural communication in healthcare is language. Language differences not only complicate the transmission of medical information but also shape the way patients understand their health conditions and treatment options. Research has shown that language barriers can cause patients to misunderstand medical instructions, which may lead to non-compliance with treatment regimens ^[9]. In response

to these challenges, healthcare institutions have adopted strategies such as professional interpreters and cultural competence training programs for healthcare providers. These efforts aim to bridge communication gaps and reduce the risk of miscommunication, ultimately improving the quality of medical care.

The importance of intercultural competence in healthcare delivery has been widely recognized in medical education. Incorporating cultural competence training into medical curricula has been shown to enhance doctors' ability to communicate effectively with patients from diverse backgrounds. This training typically includes exposure to the cultural norms, values, and beliefs of various patient groups, as well as strategies for overcoming common communication barriers ^[9]. Furthermore, the development of these skills is not only beneficial in improving patient care but also in enhancing the healthcare provider's ability to adapt to a changing demographic landscape.

However, research on intercultural communication within the medical context in mainland China remains limited. Intercultural communication in the medical context in China is a multifaceted area of study, influenced by our country's rich cultural heritage, diverse population, and evolving healthcare system. Moreover, other factors, including the integration of Traditional Chinese Medicine and Western Medicine, family dynamics, and the concept of "face", make the intercultural communication in the medical context in China more complicated ^[11–12]. Healthcare providers must be culturally competent to navigate these dynamics and ensure effective communication with patients from diverse backgrounds.

3. Data collection and analysis framework

The present study collects 10 video clips of medical consultations between Chinese doctors and foreign patients, which are uploaded online by foreign patients receiving medical care in mainland China. The videos in English were transcribed directly, while the videos in Chinese were first transcribed and then translated into English. The transcription and translation of the video clips were carried out by two researchers, who cross-checked their work. Any discrepancies were discussed, and a final decision was made regarding the version of the transcript.

Once the final transcript of all video clips has been obtained, it is analyzed using the online software Weiciyun. Content analysis and sentiment analysis are conducted using this software to examine the attitudes and feedback of foreign patients regarding their experiences in hospitals in mainland China.

4. Sentiment analysis of the transcript through Weiciyun

The transcribed text comprises 9033 words and has been divided into 154 valid entries. The feedback from foreign individuals regarding the medical experience in mainland China is predominantly positive (35.06%) or neutral (44.16%). Negative responses constitute only 20.78% of valid entries. When examining the specific entries, it becomes evident that positive perceptions of the medical experience in China are primarily centered around efficiency, cost-effectiveness, and the high level of service provided by healthcare professionals. In contrast, negative evaluations mainly focus on cultural differences related to privacy protection.

5. Positive and neutral comments on medical experiences in China

The convenience of not needing an appointment, along with efficient and accessible medical check-ups, high service quality, and affordable prices, leads foreign patients in China to generally perceive Chinese doctors as

reliable and the overall healthcare experience as excellent.

5.1. No appointment requirement in China

Foreign patients typically describe the differences in medical appointment systems between China and Western countries with a neutral perspective. When discussing the lengthy waiting times for medical appointments abroad, foreign patients express dissatisfaction with the prolonged delays. In contrast, they are particularly impressed by the fact of walking into a hospital in China and quickly seeing a doctor, often emphasizing this point in videos, as in **Extract 1**.

Neutral	Sentiment word: not like
	I can just take regular cold medicine. If I see a doctor, it might take an hour to wait. In China, it's very fast; I just waited for 5 minutes, 10 minutes, 15 minutes. This is how things work in China. It's not like in the U.S., where you need to make an appointment. In the U.S., each doctor may only see ten patients a day.

Extract 1

5.2. Efficient and accessible medical check-ups

In many public hospitals abroad, laboratory tests and examinations often require waiting for several weeks or even months; however, in China, many hospitals can conduct tests or examinations on the same day. This high level of efficiency in medical testing and examinations often makes foreign patients surprised and astonished. The green indication provided by Weiciyun signifies that this entry exhibits a clear positive sentiment, as in **Extracts 2 and 3**.

Positive	Sentiment word: clear efficiency, truly shocking
	In just under a day, the stepfather underwent an MRI and blood tests in China, receiving a clear diagnosis, while in the UK, even scheduling an MRI would take months of waiting. This contrast in efficiency was truly shocking.

Extract 2

In **Extract 2**, the words with green shadow representing the positive emotions demonstrate that the foreign patients praise the efficiency of the test and examination, while in **Extract 3**, it is evident that foreign patients indeed perceive themselves as having endured significant waiting times when seeking medical care in their home countries.

Neutral	Sentiment word: free problem matter bad difficult
	Some might ask why he didn't immediately get treatment in the UK, considering the NHS is free. However, it's not that simple. In the UK, the doctor kept diagnosing the issue as a muscle problem and gave him painkillers, sending him home to rest. But the stepfather knew this wasn't just a muscle issue. To make matters worse, even if he wanted an MRI scan, the waiting time was 26 weeks, nearly half a year. Seeing a general practitioner (GP) was also difficult, with a complicated and lengthy appointment process. Sometimes, it took several days to get a reply to a phone call, and even after that, they had to wait weeks to see the doctor.

Extract 3

5.3. High-quality service of the hospital in China

Foreign patients generally praise the quality of service provided by physicians in Chinese hospitals. They express satisfaction with the presence of international departments in Chinese public hospitals and the proficiency of doctors in English, as indicated in **Extract 4**, which is categorized as “positive” by sentiment analysis software. This suggests that there are no significant barriers to doctor-patient communication in an intercultural context.

Positive	Sentiment word: excellent focus on cancer
	They can be quite expensive, especially in international hospitals, but regular Chinese public hospitals also have international departments, where the doctors speak excellent English. He also mentioned that these hospitals are linked to his university. They helped him with lab data because his PhD is focused on medical AI, assisting them with detecting and classifying cancer severity.

Extract 4

5.4. Affordable prices in Chinese hospitals

According to the comments of foreign patients, they are not informed of the medical charges until after they have left the hospital, and the prices are generally considered to be high, as in **Extracts 5** and **6**. In contrast, in China, patients have the option to decide whether or not to pay before receiving treatment. Foreigners are more positive about the price and payment method in Chinese hospitals.

Neutral	Sentiment word: easily pay major problem pay help pay
	I paid about 40 RMB for this visit. I just paid 17 RMB, so the total for this visit is 57 RMB, which is much cheaper than when I went for traditional Chinese medicine. It's even cheaper than in the U.S. If you go to such places in the U.S., you could easily pay 150 USD. One of the major problems in the U.S. is the very high healthcare costs. Even with insurance, you might pay 2,000 USD a month. The company usually helps cover about 70%, but you still need to pay about 30%.

Extract 5

Neutral	Sentiment word: pay pay pay not to pay credit
	Another major difference is that in China, you pay first. This time, I paid 17 RMB. In the U.S., I often don't know how much I will have to pay when I go to the doctor. I don't know how much I'll need to pay until I receive a bill, which can come days or even weeks later. When you get the bill, you can choose whether or not to pay it. But if you don't, it could affect your credit.

Extract 6

6. Negative comments on medical experiences in China

The primary concern expressed by foreign patients in Chinese hospitals is privacy, as in **Extract 7**. In China, individuals generally do not worry about others seeing their medication, and they may not tend to close the consultation room door when interacting with doctors. Moreover, Chinese patients may be less concerned if others briefly interrupt the doctor with simple questions. Additionally, it is common for patients to share their experiences or engage in casual conversation while waiting. This may not be acceptable to Western people.

Neutral	Sentiment word: want
	I think today's visit was very quick; I was in and out in 20 minutes. This is very different from the U.S. If I go to a doctor there, I might need to wait an hour. If I need to pick up medicine, it could take 20 to 30 minutes. In the U.S., if you go to a pharmacy to pick up medication, they give you a bag and don't want others to see what medicine you're getting. This is a privacy issue.

Extract 7

7. The regional and cultural factors

The differences between hospitals in China and those in many Western countries, in the eyes of foreign patients, can be largely attributed to regional and cultural factors that influence healthcare systems. In China, the concept of convenience in healthcare is deeply embedded in cultural expectations that prioritize accessibility and speed. The lack of a strict appointment system in many Chinese hospitals reflects a cultural focus on direct access to healthcare, which contrasts sharply with the highly structured and often appointment-based systems in Western countries. This approach is influenced by China's rapidly growing healthcare infrastructure, where hospitals strive to accommodate large patient volumes in a time-efficient manner. The convenience for patients to walk into a hospital and receive medical care almost immediately is a major advantage for the public, particularly in urban areas where public health resources are more concentrated. It aligns with the cultural value placed not only on quality, but also on immediacy and efficiency, where waiting times for appointments in Western countries often seem burdensome for foreign patients by comparison.

From a regional perspective, the healthcare systems in Western countries are typically shaped by historical precedents of insurance-based models, regulatory frameworks, and resource allocation. In many Western countries, medical appointments are the norm, largely due to the structure of healthcare insurance and the need for formal consultation and assessment. This system can result in longer waiting times for appointments and medical procedures, as hospitals manage patient flow and insurance protocols. This usually increases the management costs. Conversely, China's system, influenced by its rapid urbanization and large population, tends to focus not only on quality but also on practicality and access to healthcare. In terms of service quality, Chinese hospitals have made significant strides in the past decades.

In terms of pricing, China's healthcare system remains more affordable for many patients, especially compared to the high out-of-pocket costs often associated with healthcare in Western countries. The economic model in China, which is largely subsidized by the government, ensures that the cost of medical services is significantly lower, making it accessible to a wider population. In contrast, the cost of healthcare in Western countries is often more burdensome, with the added complexity of insurance and co-pays, leading to financial inaccessibility among foreign patients. Thus, while both systems have strengths and weaknesses, the cultural emphasis on convenience, efficiency, and affordability in China leads to a very different healthcare experience for foreign patients compared to Western countries.

8. Conclusion

The present study examines the medical experiences of foreign patients in mainland China. The findings reveal that foreign patients are highly satisfied with their medical consultations in China, particularly due to the convenience of not requiring appointments, along with efficient and accessible check-ups, high service quality,

and affordable prices. However, the primary concern identified is the issue of privacy, as well as cultural differences in the sharing of personal information, which contrast with practices in their home countries. A limitation of the current study is the lack of detailed classification of the patients, such as their educational background and age. Future research may explore medical consultations in an intercultural context from additional perspectives, including discursive strategies and patient compliance with doctors' instructions.

Funding

- (1) 2025 Graduate Education Quality Enhancement Project of Zhengzhou University of Aeronautics. Project Number: 2025YJSJD9
- (2) Joint Graduate Training Base Project of Henan Province. Project Number: YJS2023JD50

Disclosure statement

The authors declare no conflict of interest.

References

- [1] Tao Y, 2024, From January to July, the Number of Foreign Visitors to China Reached 5.722 Million, Representing a Year-on-year Increase of 403%. Bright Tourism. https://travel.gmw.cn/2024-09/11/content_37556154.htm
- [2] Zhang C, Chor W, 2023, Realizing Holism in Traditional Chinese Medicine (TCM) Consultations through the Voice of TCM (VOTCM): An Interactional Analytical Approach. *Health communication*, 38(2): 275–284. <https://doi.org/10.1080/10410236.2021.1950292>
- [3] Liu X, Zeng J, Li L, et al., 2024, The Influence of Doctor-Patient Communication on Patients' Trust: The Role of Patient-Physician Consistency and Perceived Threat of Disease. *Psychology Research and Behavior Management*, 2024(17): 2727–2737. <https://doi.org/10.2147/PRBM.S460689>
- [4] Chen X, Liu C, Yan P, et al., 2025, The Impact of Doctor-patient Communication on Patient Satisfaction in Outpatient Settings: Implications for Medical Training and Practice. *BMC Medical Education*, 25(1): 830. <https://doi.org/10.1186/s12909-025-07433-y>
- [5] Hall ET, 1976, *Beyond Culture*. Anchor Books, New York.
- [6] Hofstede G, Hofstede GJ, Minkov M, 2010, *Cultures and Organizations: Software of the Mind* (3rd ed.). McGraw-Hill, Ohio.
- [7] Martin JN, Nakayama TK, 2010, *Intercultural Communication in Contexts* (5th ed.). McGraw-Hill, Ohio.
- [8] Schouten BC, Meeuwesen L, 2006, Cultural Differences in Medical Communication: A Review of the Literature. *Patient Education and Counseling*, 64(1–3): 21–34.
- [9] Paternotte E, van Dulmen S, van der Lee N, et al., 2015, Factors Influencing Intercultural Doctor-patient Communication: A Realist Review. *Patient Education and Counseling*, 98(4): 420–445. <https://doi.org/10.1016/j.pec.2014.11.018>
- [10] Alkhamees M, Alasqah I, 2023, Patient-physician Communication in Intercultural Settings: An Integrative Review. *Heliyon*, 9(12): e22667. <https://doi.org/10.1016/j.heliyon.2023.e22667>
- [11] Jin Y, 2022, *Doctor-patient Communication in Chinese and Western Medicine*. Routledge, London. <https://doi.org/10.4324/9781003161929>

- [12] Hu Y, Wang W, Jiang Y, et al., 2024, Factors Associated with Family Decision-Making Self-efficacy among Family Members of Patients with Advanced Cancer in Mainland China. *Palliative & Supportive Care*, 22(5): 1317–1323. <https://doi.org/10.1017/S1478951524000658>

Publisher's note

Bio-Byword Scientific Publishing remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.