IGNATIAN
INTERNATIONAL JOURNAL FOR MULTIDISCIPLINARY RESEARCH
www.icceph.com
ISSN 2984-9942

CHALLENGES AND BENEFITS OF CODE-SWITCHING IN CLINICAL DUTIES: A QUALITATIVE DESCRIPTIVE APPROACH OF THE PERSPECTIVE OF STUDENT NURSES

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ABSTRACT

This study was conducted over the period of August 2025 to May 2026. Effective communication is essential in multilingual healthcare environments, where student nurses frequently practice code-switching to improve patient understanding and interaction. In the Philippine clinical setting, forms such as Taglish (Tagalog and English) and Kapampagalog (Kapampangan and Tagalog) are commonly used; however, the experiences of student nurses regarding its challenges and benefits remain underexplored. This study explored the use of code-switching among Level II and Level IV student nurses during clinical duties at a Tertiary Catholic Archdiocesan University in San Fernando, Pampanga. Guided by a qualitative descriptive design, purposive sampling was utilized, and data were gathered through semi-structured face-to-face interviews with eleven participants, consistent with Hennink and Kaiser's (2022) principle of data saturation. Reflexive thematic analysis following Braun and Clarke (2024) was employed to analyze the data. Findings revealed five major themes: code-switching practices in clinical communication, code-switching across clinical situations, challenges in using code-switching, benefits and perceptions of code-switching, and perceived effectiveness and recommendations for practice. Results showed that nursing students use code-switching to adapt to patients' preferred language, improve comprehension, establish rapport, and facilitate health education. However, challenges such as limited fluency in local dialects, difficulty translating medical terminology, and occasional communication barriers were also identified. Overall, the study concluded that code-switching is an effective patient-centered communication strategy that enhances understanding, trust, and quality of care in multilingual clinical environments while supporting culturally responsive nursing practice and education.

Keywords: *code-switching, student nurses, clinical duties, communication, multilingual communication, patient centered care*

INTRODUCTION

Code-switching, defined as the alternation between two or more languages or dialects within a single conversation, is a prevalent linguistic practice among multilingual speakers (Maranan et al., 2025). In the Philippines, where English, Filipino, and regional dialects such as Kapampangan coexist, code-switching has become an integral and functional mode of communication in both everyday and professional interactions. Within clinical settings, this practice assumes a more complex role, serving as a bridge between formal medical discourse, typically conducted in English, and patient-centered communication, which often relies on local languages to ensure comfort, comprehension, and cultural relevance. Given the critical importance of accuracy and clarity in healthcare, code-switching becomes a strategic tool that supports effective and empathetic patient care.

Effective communication is fundamental in healthcare, as it directly influences patient safety, quality of service, and overall health outcomes Ahrens, E., & Elias, M. (2023). Inadequate communication in clinical environments can lead to treatment noncompliance, medical errors, and adverse health consequences. As frontline providers, nurses must adapt their language use to ensure that patients from diverse linguistic backgrounds fully understand their diagnoses, treatment plans, and self-care instructions. In this context, code-switching functions as both a communicative bridge and a practical instrument, enhancing patient understanding, reducing anxiety, and fostering rapport particularly when patients are more comfortable expressing themselves in their native language (Candilas et al., 2023).

Recent studies have highlighted the impact of communication strategies on patient-centered care. Effective nurse–patient communication plays an important role in building trust, strengthening therapeutic relationships, and facilitating patient-centered care (Höglander et al., 2023). Code-switching enables nursing students and professionals to tailor their communication to individual patient needs, balancing technical precision with emotional support. This dual function is especially significant in clinical settings, where both cognitive (informational) and affective (emotional) dimensions of communication are essential for holistic care.

In multilingual healthcare environments, code-switching is strategically employed to reduce tension, prevent misunderstandings, and ensure mutual understanding. Among multilingual student groups, it is widely regarded as a valuable technique for promoting inclusivity, bridging language gaps, and clarifying complex medical concepts (Maranan et al., 2025). While much of the existing literature has focused on code-switching in educational or general social contexts, few studies have explored its specific benefits and challenges within the clinical duties of nursing students (Ilarde & Ponce, 2024). This gap underscores the need for deeper understanding of how language use influences nursing

students' confidence, professional identity, and clinical competence in real-world patient care settings.

Effective communication is a fundamental component of safe and quality nursing care, particularly in multilingual clinical settings where nursing students interact with patients from diverse linguistic and cultural backgrounds. According to Ashipala and Matundu (2023), language barriers in clinical environments often lead to miscommunication, difficulty obtaining accurate patient information, delayed interventions, and reduced confidence among nursing students. However, the study also found that students adapt by adjusting their language, seeking assistance from bilingual healthcare professionals, and learning common local expressions to improve patient interactions. Similarly, Zhu et al. (2023) emphasized that communication competence develops through continuous clinical exposure, reflective learning, and meaningful patient interactions, enabling nursing students to modify their communication according to patients' needs. Supporting this, Baitleuova et al. (2025) reported that while healthcare students demonstrate confidence in general English proficiency, they encounter challenges in medical English communication, particularly in speaking and using medical terminology. The researchers highlighted the importance of strengthening language proficiency through practical and clinically relevant instruction to prepare future healthcare professionals for effective communication in multilingual healthcare settings.

Code-switching has been recognized as an essential communication strategy that promotes understanding between healthcare professionals and patients. Cedden et al. (2024) explained that code-switching requires bilingual language competence and serves as a purposeful means of adapting communication in multilingual environments. Likewise, Chen (2025) emphasized that healthcare professionals use code-switching by shifting from technical medical terminology to simpler, patient-friendly language, thereby improving patient comprehension, trust, and healthcare delivery. Harrington et al. (2022) further demonstrated that language adaptation extends to healthcare technology, as individuals naturally modify their speech patterns to facilitate successful communication with voice-assisted health systems. These findings indicate that language adaptation and code-switching are valuable communication strategies that enhance effective interaction across various healthcare contexts.

Communication challenges are especially evident when caring for patients who are deaf or hard of hearing. Jeong et al. (2024) found that communication barriers hinder patients' understanding of health information and negatively affect treatment adherence and self-management. Similarly, Tannenbaum-Baruchi et al. (2024) and Qadhi (2025) emphasized that accessible communication strategies and formal sign language training are essential for improving healthcare experiences and promoting inclusive patient care. Silvera-Tawil et al. (2021) likewise reported that multilingual communication tools and alternative communication methods strengthen nurse-patient interactions and contribute to patient safety and quality care. Collectively, the reviewed literature demonstrates that effective communication, multilingual competence, and code-switching are essential skills in nursing practice. However, despite the growing body of international research on healthcare communication, there remains limited literature specifically examining the

challenges and benefits of code-switching among Filipino nursing students during clinical duties. This gap highlights the need for the present study, which seeks to explore nursing students' experiences of code-switching in clinical practice using a qualitative descriptive approach.

Furthermore, language functions not only as a medium of communication but also as a marker of cultural identity. A study in Pampanga revealed that the interplay between English and Kapampangan in daily interactions reflects both functional necessity and cultural identity (Pilares & Dizon, 2025). This supports the notion that language use in therapeutic settings has broader implications for cultural competence and patient trust. Recognizing and integrating code-switching into nursing practice can contribute to more inclusive, patient-centered care aligning with global standards that emphasize cultural sensitivity as a key component of high-quality healthcare.

This study aimed to address these gaps by examining how nursing students at the University of the Assumption in San Fernando, Pampanga, perceived the benefits and challenges of code-switching in clinical practice. Specifically, it investigated students' views on the role of code-switching in communication, the demographic and linguistic factors that influenced its use, and the clinical contexts in which it was most frequently employed. The findings are expected to contribute to nursing education by providing evidence-based insights into communication strategies that support culturally responsive and effective patient care, thereby aligning with Sustainable Development Goal 3 (Good Health and Well-Being) and Sustainable Development Goal 4 (Quality Education).

Research Questions

This study explored the challenges and benefits of code-switching among student nurses during clinical duties, particularly its role in facilitating communication with patients and other healthcare professionals. Specifically, it sought to answer the following research questions:

Specifically, the researchers aimed to address the following questions:

1. In what clinical situations or interactions do student nurses use code-switching during clinical duties?
2. What challenges do student nurses encounter when using code-switching during clinical duties?
3. What benefits do student nurses perceive from using code-switching during clinical duties?
4. How do student nurses perceive code-switching as a strategy for effective communication with patients and other healthcare professionals.

METHODOLOGY

Research Design

A qualitative descriptive research design was employed in this study. This approach was selected to explore nursing students' perceptions of the benefits and challenges of code-switching during their clinical duties. It allowed the researchers to gain a deep and comprehensive understanding of participants' lived experiences and the contextual factors influencing their communication practices in clinical settings. Rather than quantifying human behaviors, qualitative research focuses on understanding meanings, emotions, and interpretations. This approach is particularly valuable in healthcare research, as it helps explain complex interpersonal and social phenomena such as empathy, communication, and patient interactions (Pyo et al., 2023).

Locale of the Study

The study was conducted at the First Archdiocesan Tertiary Catholic School in the City of San Fernando, Pampanga, Philippines. The study focused on Level II and Level IV student nurses who had clinical duty experience and had encountered code-switching during interactions with patients and other healthcare professionals. Data were gathered through semi-structured face-to-face interviews using open-ended questions to explore the participants' experiences, challenges, and perceived benefits of code-switching in clinical communication.

Participants and Sampling Method

The participants of the study were eleven (11) Level II and Level IV student nurses enrolled at the First Archdiocesan Tertiary Catholic School in the City of San Fernando, Pampanga, Philippines, during the Academic Year 2025-2026. The participants were selected based on their relevant clinical experiences and exposure to code-switching during interactions with patients and other healthcare professionals.

Purposive sampling was employed to select participants who could provide relevant information about the challenges, benefits, and use of code-switching in clinical duties. This sampling method is appropriate for qualitative research when participants are deliberately selected based on their relevance to the research objectives (Etikan, et al., 2022). The sample consisted of eleven participants as recurring responses and themes were observed during data collection, indicating that data saturation had been achieved

Research Instruments

A semi-structured interview guide developed by the researchers will be used in this study to explore how Level II and Level IV nursing students perceive their use of code-switching during clinical tasks. In relation to code-switching practices within clinical settings, this qualitative tool aims to elicit comprehensive, in-depth narratives and lived experiences from nursing students. While maintaining a consistent framework across all

interviews, the semi-structured format provides flexibility to probe further into individual responses when necessary.

The open-ended interview questions focused on four areas: clinical situations and interactions in which code-switching is used; challenges encountered when using code-switching; perceived benefits of code-switching; and perceptions of code-switching as a strategy for effective communication with patients and other healthcare professionals. The semi-structured format provided a consistent framework for all interviews while allowing the researchers to ask follow-up questions to clarify responses and explore participants' experiences in greater depth.

The interview guide also included a section for participants' demographic and language-related information, including name, sex, year level, place of birth, ethnic or cultural background, primary language, additional languages spoken, and clinical areas experienced. The questions were formulated to encourage participants to describe their experiences, motivations, and perceptions in their own words. The development of the guide was informed by related literature, including Anker-Hansen et al. (2025), while Chen's (2025) proposed code-switching model provided a conceptual basis for understanding how language adaptation may support clear communication and foster trust between healthcare professionals and patients.

Data Collection Procedure

Before the data collection, the researchers secured the necessary approvals to guarantee adherence to ethical standards; institutional ethics board approval will be sought before data collection begins. Additionally, all administrative clearances required to carry out the study will be acquired. The researchers asked the total number of enrolled college students for the first semester of the 2025–2026 academic year to create a sampling frame. From this population, participants will be purposely selected based on their year level (Level II and Level IV) and current or prior clinical exposure.

This purposive sampling guarantees the inclusion of only nursing students with relevant experiences in clinical communication and code-switching in the study. The interviews will be conducted face-to-face on the university premises at a time convenient to the participants. Each session will last approximately 10 to 15 minutes and will be audio-recorded with the participants' consent to ensure accuracy of transcription.

Data Analysis

The researchers used Thematic Analysis to systematically identify and interpret recurring patterns within the qualitative data (Braun & Clarke, 2024). The researchers will first familiarize themselves with the data, then generate initial codes, search for and review themes, define and name them, and finally produce the analytic report. After the initial coding, the researchers will cluster similar ideas, refine them into broader, more comprehensive themes, and ensure that each accurately reflects the participants' voices. Throughout this process, reflective journals will be maintained to document analytic

decisions and promote transparency. To enhance trustworthiness, techniques such as peer debriefing, member checking, and reflective journaling will be implemented (Bringsén et al., 2021). These strategies will help maintain consistency, minimize bias, and ensure that the interpretations remain faithful to the data.

RESULTS

The findings of the study were derived from the semi-structured interviews conducted with eleven (11) Level II and Level IV student nurses. The participants' responses were coded and organized into themes that reflected their experiences, challenges, perceived benefits, and recommendations regarding code-switching during clinical duties. Five major themes emerged from the analysis: (1) Code-Switching Practices in Clinical Communication, (2) Code-Switching Across Clinical Situations, (3) Challenges in Using Code-Switching, (4) Benefits and Perceptions of Code-Switching, and (5) Perceived Effectiveness and Recommendations for Practice.

Table 1
Summary of Themes and Subthemes

Themes	Subthemes
I. Code-Switching Practices in Clinical Communication	Determining and adapting to patients' preferred language; using appropriate language for clarity and procedures; multilingual communication
II. Code-Switching Across Clinical Situations	Language adaptation during patient assessment; communication during critical situations; explaining medications and medical terms; individualized patient education; communication with healthcare professionals
III. Challenges in Using Code-Switching	Language barriers due to unfamiliar dialects; difficulty translating medical terminology; limited language fluency; communication gaps between patients and healthcare staff

IV. Benefits and Perceptions of Code-Switching	Improved patient understanding; clearer explanations and health teaching; increased patient comfort and engagement; building rapport and trust; facilitating safe and effective communication
V. Perceived Effectiveness and Recommendations for Practice	Asking about patients' preferred language; adapting language to patient needs; simplifying medical explanations; checking patient understanding; maintaining professional communication and documentation practices

I. Code-Switching Practices in Clinical Communication.

The findings revealed that student nurses used code-switching to adapt their communication to the language preferences and responses of patients. Rather than consistently using one language, participants described beginning conversations in Tagalog or another familiar language and adjusting their language based on the patient's response and level of comfort. The use of Tagalog, Kapampangan, and English allowed student nurses to communicate with patients and healthcare professionals in different clinical contexts.

Determining and Adapting to Patients' Preferred Language

Participants emphasized the importance of identifying the language patients were most comfortable using. Some student nurses initially introduced themselves in Tagalog before observing the patient's response, while others directly asked which language the patient preferred. This practice allowed them to adjust their communication according to the patient's needs.

<u>One participant explained:</u>

> "Ini-introduce ko 'yung sarili ko, mag start ako sa Tagalog and then i-gauge ko kung ano 'yung response ng patient sa akin." — NS 1

<u>Another participant shared:</u>

> "Tatanungin ko muna kung anong language siya comfortable, minsan nag-mi-mix ng English at Kapampangan." — NS 4

These responses demonstrate that language adaptation was an intentional part of patient interaction. Student nurses considered the patient's preferred language and adjusted their communication to establish a more comfortable interaction.

Using Appropriate Language for Clarity and Procedures

Participants also described using different languages depending on the purpose of the interaction. Kapampangan or Tagalog was commonly used when communicating with patients, while English was used when explaining certain technical or medical terms. This practice allowed student nurses to combine familiar language with professional terminology when necessary.

One participant described the use of different languages in clinical practice:

> "Mas nagagamit Kapampangan sa patient, Tagalog sa staff, English sa medication." — NS 7

This response illustrates how student nurses adjusted their language according to the person they were communicating with and the information they needed to convey.

II. Code-Switching Across Clinical Situations

The findings showed that code-switching was used in various clinical situations, including patient assessment, medication administration, health education, and communication involving medical instructions. Participants explained that the language they used depended on the clinical task, the patient's characteristics, and the urgency of the situation.

Language Adaptation During Patient Assessment

During patient assessment, participants emphasized the importance of using language that patients could understand. Clear communication helped student nurses gather relevant information and encourage patients to share their concerns.

One participant stated:

> "Kapag mag-a-assess ako, mostly Tagalog at Kapampangan, pero technical terms sa Tagalog." — NS 3

The response reflects how student nurses used familiar languages during assessment while adjusting technical terminology to make questions and explanations more understandable.

Communication During Critical Situations

Some participants described the importance of communicating efficiently in situations requiring immediate information, particularly in the emergency room. In these situations, language adaptation helped student nurses communicate questions and obtain information from patients when time was limited.

One participant explained that in the emergency room, code-switching was used when obtaining a brief patient history, especially in critical situations when information needed to be gathered quickly.

This finding highlights the importance of clear and appropriate language during time-sensitive clinical interactions.

Explaining Medications and Medical Terms

Participants reported using code-switching when explaining medications, medical instructions, and procedures. English medical terminology was sometimes retained when a direct translation was unfamiliar, followed by an explanation in a language the patient could understand.

One participant explained:

> "May terms na hindi ma-translate… tulad ng catheter… kaya English ang ginagamit." — NS 7

This response shows that code-switching helped student nurses retain necessary medical terminology while providing explanations intended to improve patient understanding.

Individualized Patient Education

Student nurses also adjusted their language when providing health education. Participants described considering the patient's age, educational level, and ability to understand medical information. Simpler words and familiar languages were used when necessary to make explanations more accessible.

These findings suggest that code-switching was not limited to everyday conversation but was also used as part of patient teaching and the explanation of healthcare instructions.

III. Challenges in Using Code-Switching

Despite its perceived usefulness, participants identified challenges in using code-switching during clinical duties. These included unfamiliarity with local dialects, difficulty translating medical terminology, limited fluency, and communication gaps between student nurses and patients.

Language Barriers Due to Unfamiliar Dialects

Some participants experienced difficulty communicating with patients who spoke a dialect they did not fully understand. In such situations, student nurses sometimes relied on classmates or other healthcare staff to help interpret the patient's statements.

One participant shared:

> "So since, hindi ako Kapampangan… hindi ko maiintindihan… I have to have another classmate to interpret that… main challenge ko." — NS 1

This response illustrates how unfamiliarity with a patient's language could create barriers to direct communication and require assistance from another person.

Difficulty Translating Medical Terminology

Participants also reported difficulty translating certain medical terms into familiar language. Some terms did not have an easily understood equivalent, requiring student nurses to retain the English term and provide an additional explanation.

One participant stated:

> "Ayun po minsan nahihirapan po ako i translate yung ibang medical terms po sa mga patients." — NS 7

This finding indicates that student nurses needed to balance the use of accurate medical terminology with explanations that patients could understand.

Limited Language Fluency

Limited fluency in a local dialect was another challenge identified in the interviews. Some participants described difficulty expressing themselves accurately when they were not sufficiently familiar with the language being used by the patient.

One participant explained:

> "Hirap sa Kapampangan… hindi maexpress… fluency challenge." — NS 11

Such experiences suggest that limited language proficiency may affect a student nurse's ability to explain information clearly and respond confidently during patient interactions.

Communication Gaps Between Patients and Healthcare Staff

The findings also indicated that code-switching did not always eliminate communication difficulties. Participants described situations in which they still had difficulty conversing with patients despite adjusting their language. These experiences emphasized that effective communication requires more than switching languages; it also involves ensuring that both parties understand the information being exchanged.

IV. Benefits and Perceptions of Code-Switching

Participants generally perceived code-switching as beneficial in clinical communication. They described how adjusting language could improve patient understanding, encourage

patients to express their concerns, make explanations clearer, and strengthen the relationship between student nurses and patients.

Improved Patient Understanding

Participants reported that using a language familiar to the patient helped clarify explanations about medications, procedures, and health instructions. When patients understood the information being communicated, they could ask questions and seek clarification when necessary.

One participant explained that using English after initially speaking in Tagalog was more helpful when the patient indicated that English was easier to understand, particularly during medication explanations and patient education.

This finding highlights the importance of adapting communication to the individual patient's language preference rather than assuming that one language is appropriate for everyone.

Building Rapport and Trust

Participants also associated code-switching with improved patient comfort and the development of trust. They perceived that patients were more willing to share information when communication took place in a language they understood.

One participant shared:

> “Nakikita ko sa patients na naiintindihan nila ako kapag mas nagtatanong sila… mas nakakakwentuhan… dito niya nakukuha yung trust.” — NS 3

This response suggests that understandable communication may encourage patient participation and contribute to a more trusting nurse–patient interaction.

Facilitating Mutual Understanding and Patient Expression

Participants described how using familiar language could make it easier for patients to explain their feelings, symptoms, and concerns. In turn, student nurses could obtain information more effectively and respond to the patient's needs.

The findings indicate that code-switching was perceived as a way to support two-way communication. It helped student nurses explain information while also encouraging patients to express themselves more comfortably.

Supporting Health Education and Safe Communication

Code-switching was also viewed as useful during health teaching, medication explanations, and discussions of procedures. Participants emphasized that patients needed to understand what would be done, why a medication was given, and what instructions they needed to follow.

These accounts highlight the perceived value of language adaptation in supporting patient education and clear communication during clinical care. However, the findings reflect participants' experiences and perceptions rather than a direct measurement of patient outcomes.

V. Perceived Effectiveness and Recommendations for Practice

The participants generally perceived code-switching as an effective strategy for communication during clinical duties. Their recommendations focused on identifying the patient's preferred language, adjusting explanations to the patient's level of understanding, avoiding unnecessary technical terms, and maintaining appropriate professional communication.

Asking About Patients' Preferred Language

Participants recommended asking patients which language they preferred before proceeding with assessment or health education. They also suggested observing how patients responded and adjusting the language used during the interaction.

<u>One participant recommended:</u>

> "Kung ano 'yung language na ginamit nila… ibalik mo na language… Para ma-assure mo din na 'yung understanding… mutual siya." — NS 2

This recommendation emphasizes the importance of adapting communication to the patient and checking whether understanding is mutual.

Simplifying Medical Explanations

Participants also recommended avoiding unnecessary technical terms when speaking with patients. When medical terminology was necessary, they suggested explaining the terms using familiar words and a language the patient could understand.

This approach was viewed as particularly important during medication administration, patient assessment, and health education, when clear explanations are needed for patients to understand the information being provided.

Checking Patient Understanding

Another recommendation was to assess whether patients understood the information communicated to them. Participants emphasized that student nurses should not assume that a patient understands simply because an explanation has been given. Asking questions and allowing patients to clarify their concerns may help identify misunderstandings during clinical interactions.

Maintaining Professional Communication and Documentation Practices

Participants also recognized the importance of following professional communication practices. While code-switching could be used when communicating with patients, participants distinguished this from formal clinical documentation, which they indicated should follow the language and documentation requirements of the healthcare institution.

This finding suggests that student nurses viewed code-switching as a flexible communication strategy that should be applied appropriately according to the patient, clinical situation, and professional requirements.

Narrative Form:

THEME 1: Code-Switching Practices in Clinical Communication

This theme describes how nursing students utilize multiple languages during clinical practice to communicate effectively with patients and healthcare professionals. It highlights language adaptation, patient-centered communication, and the strategic use of multilingual skills across various clinical contexts. Participants consistently reported that they assess patients' preferred language at the beginning of interactions and adjust their communication accordingly to facilitate understanding and build rapport.

PARTICIPANT NS1: "Ini-introduce ko 'yung sarili ko, mag start ako sa Tagalog and then i-gauge ko kung ano 'yung response ng patient sa akin"

PARTICIPANT NS4: "Tatanungin ko muna kung anong language siya comfortable, minsan nag-mi-mix ng English at Kapampangan."

PARTICIPANT NS5: "Kapag sa patient, sumasagot sila Kapampangan, nag-su-switch ako sa Kapampangan. Pero sa nurses, Tagalog lang."

PARTICIPANT NS8: "Itatanong natin kung gusto nila Kapampangan o Tagalog; tayo ang nag-a-adjust para sa kanila."

THEME 2: Code-Switching Across Clinical Situations

This theme identifies specific clinical interactions in which code-switching is commonly applied, including patient assessment, medication administration, and communication with healthcare professionals. Participants indicated that their use of code-switching varied according to the clinical situation, patient condition, urgency, educational level, and communication needs.

PARTICIPANT NS1: "Kapag sa patient… Tagalog muna… minsan Kapampangan… kapag nurses Tagalog… ginagamit sa assessment and procedures."

PARTICIPANT NS3: "Sa ER… brief history… lalo na kapag critical… kailangan makuha agad ang impormasyon."

PARTICIPANT NS4: "Mas magiging comfortable sila… mas madali silang magkwento."

PARTICIPANT NS5: "Depende sa educational level… ina-adjust ang explanation."

PARTICIPANT NS7: “May terms na hindi ma-translate… kaya English ang ginagamit.”
PARTICIPANT NS9: “Code-switching sa doctor’s order, consent, medication.”
PARTICIPANT NS10: “Mas naiintindihan ng patient kapag ipinaliwanag ang gamot sa simpleng terms.”
Participants also emphasized that code-switching supports clearer explanations during assessment, medication discussions, and clinical procedures

THEME 3: Challenges in Using Code-Switching

This theme explores the difficulties encountered by nursing students when using code-switching in clinical practice, particularly language barriers and communication limitations. Participants reported experiencing communication difficulties related to unfamiliar dialects, limited language fluency, and challenges in translating medical terminology.
PARTICIPANT NS1: “Hindi ako Kapampangan… I have to have another classmate to interpret.”
PARTICIPANT NS10: “Hindi ako familiar sa language… nagiging barrier.”
PARTICIPANT NS11: “Hirap sa Kapampangan… hindi ma-express.”
PARTICIPANT NS5: “Mahirap siyang i-explain in Tagalog.”
PARTICIPANT NS6: “Gamot… mahirap i-Tagalog.”
PARTICIPANT NS8: “Nauutal… hindi makuha tamang term.”
PARTICIPANT NS9: “Kahit code-switching… hindi pa rin minsan maganda ang communication sa pasyente.”

THEME 4: Benefits and Perceptions of Code-Switching

This theme examines the perceived benefits of code-switching as an effective communication strategy in clinical settings. It highlights how language adaptation improves patient understanding and supports clearer information exchange. Participants consistently reported that code-switching enhances patient comprehension and fosters trust and rapport.
PARTICIPANT NS1: “Mas helpful sa kanya in understanding medications and patient education.”
PARTICIPANT NS2: “Effective siya kasi na-e-explain nang maayos sa patient.”
PARTICIPANT NS3: “Mas nagtatanong sila… nakukuha yung trust.”
PARTICIPANT NS5: “Mas madaling ma-explain… na-eestablish yung trust.”
PARTICIPANT NS6: “Na-improve yung communication lalo na sa informed consent.”
PARTICIPANT NS10: “Mas nagkakaroon ng trust lalo na kapag pareho kayo ng language.”

THEME 5: Perceived Effectiveness and Recommendations for Practice

This theme presents participants’ perceptions of code-switching as an effective communication strategy and their recommendations for its appropriate

use in clinical practice. Participants emphasized that effective understanding should be prioritized over strict adherence to language, and that communication should be adapted according to patient preferences.

PARTICIPANT NS1: “Very efficient and very useful yung code-switching.”
PARTICIPANT NS2: “Mas important kung naiintindihan ba ni patient.”
PARTICIPANT NS4: “Ask muna sa patient kung saan siya mas comfortable.”
PARTICIPANT NS6: “Mas maganda sa health education ang code-switching.”
PARTICIPANT NS8: “Important na flexible tayo base sa comfort ng patient.”
PARTICIPANT NS9: “Kung documentation, English; kung communication, pwede code-switching.”
PARTICIPANT NS11: “Include language preference in first assessment para mas malinaw ang communication.”

DISCUSSION

The findings of this study emphasize that nursing students actively use code-switching as a strategy to facilitate clearer communication, enhance patient understanding, and establish rapport. The identified themes indicate that code-switching is more than just a linguistic habit; it is a deliberate and flexible method that supports patient-centered care. This section addresses the findings in light of previous literature and their implications for nursing practice.

THEME 1: Code-Switching Practices in Clinical Communication

According to Çakmak and Uğurluoğlu (2024), patient-centered communication, including information exchange and interaction with healthcare professionals, had a substantial impact on patient engagement. This supports the study's findings, which show that nursing students consciously change their language to match patient preferences, enhancing comprehension and encouraging active engagement. Patients who understand the information presented to them are more likely to participate in their care, ask questions, and express their concerns. Daggett et al. (2023) emphasized that the use of multiple languages in healthcare settings contributes to stronger patient–provider relationships, particularly by increasing patient trust. This supports the findings of the present study, where nursing students used code-switching to match the patient’s preferred language, resulting in improved rapport and more open communication. By adapting their language, students are able to create a more comfortable environment for patients, which is essential in establishing trust and promoting effective therapeutic relationships.

THEME 2: Code-Switching Across Clinical Situations

The results of Theme 2 show that code-switching is most commonly employed during essential clinical interactions such as patient assessment, medication explanation, and emergency situations. Its application becomes more vital in critical situations where immediate comprehension is required to protect patient safety. This implies that

communication in therapeutic settings must be prompt, clear, and precise, particularly when dealing with urgent or complex problems. Nursing students displayed the ability to change their language based on the urgency and complexity of the information being given, moving between languages or simplifying terminology to improve comprehension. Bosco et al. (2024) highlighted that the use of non-technical and more accessible ways of communication in healthcare settings improves patient understanding, especially in situations where clear and personal interaction is required.

The concept of reducing difficult medical information applies to clinical nursing communication. This supports the current study's findings that nursing students used code-switching during patient assessments, medication explanations, and emergency scenarios to translate sophisticated medical jargon into more comprehensible language. This suggests that changing language based on context is critical in maintaining clarity, improving patient comprehension, and promoting safe and effective care delivery.

THEME 3: Challenges in Using Code-Switching

The results show that the use of code-switching in clinical practice is not without challenges, particularly in relation to language barriers, limited fluency in local dialects, and difficulty in translating medical terminology into simpler terms. Nursing students reported that unfamiliarity with certain dialects, such as Kapampangan, often leads to miscommunication and dependence on peers or healthcare staff for interpretation, which may delay the exchange of information and affect communication accuracy. In addition, participants expressed difficulty in explaining medical concepts using the patient's preferred language, which may compromise the effectiveness of health education and informed consent. This implies that while code-switching is intended to bridge communication gaps, its effectiveness is influenced by the speaker's level of language proficiency and familiarity with both clinical and local language use. Al Shamsi et al. (2020) emphasized that language barriers in healthcare are associated with reduced patient understanding, increased risk of clinical errors, and poorer health outcomes. Similarly, Hawkins et al. (2021) highlighted that limited language proficiency among healthcare providers contributes to communication breakdowns, particularly when delivering complex medical information. These findings suggest that strengthening language competence and communication skills is essential to ensure that code-switching remains an effective strategy in clinical settings.

THEME 4: Benefits and Perceptions of Code-Switching

The results also demonstrate that code-switching serves as an effective communication strategy that enhances patient understanding, promotes trust, and strengthens the nurse–patient relationship. Nursing students reported that adjusting their language based on patient preference allows for clearer explanation of procedures, medications, and health instructions, resulting in improved patient engagement and participation in care. The use of familiar language also enables patients to express their concerns more freely, thereby creating a more comfortable and therapeutic environment. This implies that code-switching supports patient-centered communication by prioritizing

comprehension over strict adherence to a single language. Rajan et al. (2020) emphasized that communication strategies aligned with patients' linguistic needs improve understanding, satisfaction, and adherence to treatment. In addition, Canol-Ibáñez et al. (2021) found that language concordance between healthcare providers and patients enhances trust and reduces miscommunication in clinical interactions. These findings indicate that code-switching is not merely a linguistic adjustment but an essential component of effective communication that contributes to better patient outcomes and quality of care.

THEME 5: Perceived Effectiveness and Recommendations for Practice

According to the study's findings, nursing students view code-switching as an effective communication technique that places patient comprehension ahead of strict adherence to a single language. Participants suggested evaluating language during initial interactions and emphasized the significance of adjusting communication according to patient preferences. This is supported by Awal (2024), who discovered that language proficiency has a significant impact on patients' comfort in healthcare settings, with those with more comprehension feeling more at ease during healthcare interactions. Additionally, the study found that native language use in healthcare communication is strongly preferred, especially by those with lower levels of education. These results highlight the value of adaptable and patient-centered communication techniques by indicating that matching communication to patients' language skills and preferences improves comfort, comprehension, and overall care quality.

Conclusions

This study explored the use of code switching among nursing students in clinical settings, particularly in relation to communication with patients and healthcare professionals. The findings revealed that nursing students use code switching as a deliberate strategy to adapt to patients' preferred language and to ensure clear and effective communication. This practice is commonly applied during patient assessment, medication explanation, and health education, where understanding is essential.

The results also showed that code switching contributes to improved patient comprehension, increased participation, and stronger rapport between patients and student nurses. However, challenges such as limited fluency in certain dialects and difficulty in translating medical terms were also identified, which may affect the consistency of communication.

Overall, the study concludes that code switching plays an important role in facilitating effective communication in multilingual clinical environments. It allows nursing students to adjust their language based on patient needs, thereby supporting clearer interaction and better delivery of care. It is recommended that nursing education provide guidance and training on appropriate language use in clinical practice to further enhance communication skills.

Recommendations

Based on the study's findings, several recommendations are proposed to improve the use of code-switching in clinical nursing practice. Nursing students and healthcare providers may identify the patient's preferred language during the initial interaction to promote effective and patient-centered communication. The use of simple, clear, and non-technical language, particularly when explaining procedures, medications, and health education, may help improve patient understanding and reduce confusion.

Additionally, there remain areas that require further improvement to enhance the effectiveness of code-switching. These recommendations are intended to guide nursing students, healthcare professionals, clinical instructors, educational institutions, and future researchers in strengthening patient-centered communication and addressing language barriers in healthcare settings. Hence, the findings of the study are recommended to the following:

Nursing Students

Nursing students may benefit from identifying the patient's preferred language during the initial interaction to help establish effective and patient-centered communication. The use of simple, clear, and non-technical language when explaining procedures, medications, and health education may contribute to improved patient comprehension, reduced misunderstandings, and fewer medication errors. In addition, practicing appropriate code-switching during clinical interactions, particularly in situations requiring immediate understanding and clarification, may further enhance communication effectiveness. Continuous development of language proficiency and communication skills may also help students address challenges associated with language barriers and the interpretation of medical terminology.

Healthcare Professionals

The appropriate use of code-switching in clinical practice may help healthcare professionals improve patient understanding and promote more effective communication. Flexibility in verbal communication based on the patient's preferred language may support better patient engagement, while maintaining professional standards in documentation and formal medical records remains important. Moreover, the use of culturally sensitive and patient-centered communication approaches may contribute to stronger therapeutic relationships and improved quality of patient care.

Clinical Instructors

Clinical instructors may play an important role in guiding and modeling the appropriate use of code-switching during clinical duties and patient interactions. Providing nursing students with constructive feedback regarding communication techniques may help enhance their ability to communicate effectively while maintaining professionalism.

Facilitating learning experiences that strengthen students' confidence and competence in multilingual communication may also better prepare them for diverse healthcare settings.

Nursing Educational Institutions

Integrating multilingual communication and code-switching training into the nursing curriculum may help strengthen students' clinical communication competence. Educational programs that offer simulations, role-playing activities, and clinical exposure may provide students with opportunities to develop effective communication skills in multilingual healthcare environments. Enhancing students' linguistic competence and interpersonal communication abilities may also support their ability to address communication barriers encountered in clinical practice.

Future Researchers

Future researchers may consider conducting more comprehensive studies involving larger sample sizes and diverse clinical settings to further examine the effectiveness of code-switching in healthcare communication and patient outcomes. Additional investigations may also explore the long-term impact of multilingual communication strategies on patient satisfaction, safety, quality of care, and the overall efficiency of healthcare delivery. Future researchers may use this study as a basis for further exploring and improving the use of code-switching among nursing students. This study may also contribute to addressing the limited availability of related research sources in Region III, particularly in Pampanga.

Compliance with Ethical Standards

The study followed established ethical principles to protect the rights, safety, privacy, and welfare of the participants. Ethical clearance was obtained from the University of the Assumption Research Ethics Board, and the necessary approval from the correctional facility administration was secured before data collection.

Informed Consent

Before data collection, the researchers obtained approval from the University of the Assumption Research Ethics Board (UA-REB), dated February 24, 2025. The participants were provided with an informed consent form in English and Filipino to ensure that they understood the purpose of the study, the procedures involved, and their rights as participants. Participation was voluntary, and participants were informed that they could withdraw from the study without academic penalty. The researchers explained the measures implemented to maintain confidentiality and protect the participants' information. Each interview lasted approximately 10-20 minutes, and permission was obtained before audio recording.

Privacy, Confidentiality, and Data Management

The researchers protected the privacy and confidentiality of participants throughout the data collection, analysis, and reporting. Coded identifiers, such as NS1 and NS2, were used instead of participants' names in the presentation of findings and quotations. Personal identifiers were excluded from the research report to minimize the possibility of identifying individual participants.

Interview recordings, transcripts, and other research documents were handled confidentially and stored in password-protected digital storage, with encrypted backup storage where applicable. Access was restricted to authorized members of the research team and other individuals permitted under the approved research protocol. The collected data were used solely for the purpose of the study and were not disclosed to unauthorized individuals.

Participants were informed of the procedures for requesting the review or withdrawal of their responses, subject to the conditions of the approved research protocol. Research data were retained from November 2025 until May 2026 and were scheduled for secure deletion after the completion of the study, in accordance with the applicable institutional requirements and approved data management plan.

Benefits

Participation in the study provided an opportunity for student nurses to reflect on their communication practices and experiences with code-switching during clinical duties. The findings may contribute to a better understanding of language adaptation in multilingual clinical settings and its perceived role in communication between student nurses, patients, and healthcare professionals. The results may also inform future nursing education initiatives and research concerning multilingual communication and patient-centered care. However, no direct personal or clinical benefit was guaranteed to participants.

Risk and Inconveniences

The study involved minimal anticipated risk. Participants might have experienced mild discomfort or self-consciousness when discussing their communication experiences during clinical duties. A potential risk of unauthorized disclosure of information was also considered. To minimize these risks, interviews were conducted respectfully, participation remained voluntary, and confidentiality safeguards were applied during data handling and reporting. Participants could decline to answer a question or withdraw from the study in accordance with the approved protocol, without academic penalty.

Conflict of Interest

The researchers declared that they had no conflict of interest in conducting the study. The research was undertaken for academic purposes as part of the requirements

for the Bachelor of Science in Nursing degree at the University of the Assumption. The researchers reported no external financial sponsorship or other competing interests that influenced the study's design, data collection, analysis, or reporting. The findings and interpretations were presented based on the collected data, with the intention of maintaining objectivity, transparency, and academic integrity.

Acknowledgments

The researchers would like to express our heartfelt gratitude to the UNIVERSITY OF THE ASSUMPTION for continuously guiding and shaping us into competent, compassionate, and dedicated nursing students. Through its unwavering support, values-centered education, and commitment to excellence, the institution has inspired us to become "Biasa, Maganaca, at Mayap" individuals who strive not only for academic success but also for meaningful service to others.

To DEAN ANELE C. MALLARI, Dean of the College of Nursing and Pharmacy, the researchers extend their sincere appreciation for her unwavering trust and support, which greatly contributed to the success of this study, and for inspiring us by believing in our potential.

The researchers also express their special gratitude to DR. JOSEPH MICHAEL D. MANLUTAC, their Nursing Research Instructor, for his continuous support, constructive guidance, and sustained encouragement in the conduct of our research. Your experience and commitment have emboldened us to undertake this study with diligence and confidence.

To MS. MYAN SHERYN IHSSAN ISSA W. YNGSON, their Research Adviser, who has so unselfishly devoted her time to supervise our research procedures, provide insightful comments, and guide us on the right track. Your mentorship and patience strengthened the quality and integrity of our work.

The researchers are also grateful to their CLINICAL INSTRUCTORS, for their continued support, professional insights, and encouragement. The expertise and contributions of each are significant in furthering our understanding and sharpening the course of our study.

To their LOVED ONES, FAMILY, AND FRIENDS, the researchers express their heartfelt gratitude for their unconditional love, encouragement, and understanding during the entire research process; to them, this has been our foundation and inspiration in seeing this through.

Most importantly, to the ALMIGHTY GOD for His divine guidance, wisdom, and strength; His grace sustained us through every challenge and made the completion of this study possible.

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APA Citation:

Paule, M. M. S., David, T. J. P., Maglaqui, V. R. D., Batol, R. S., Lugtu, J. Z., & Sungcang, S. U. S. (2026). CHALLENGES AND BENEFITS OF CODE-SWITCHING IN CLINICAL DUTIES: A QUALITATIVE DESCRIPTIVE APPROACH OF THE PERSPECTIVE OF STUDENT NURSES. Ignatian International Journal for Multidisciplinary Research, 4(11), 499–522. https://doi.org/10.5281/zenodo.24137290

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