

Educational Environment in a Multicultural Society to Meet the Challenges of Diversity

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ABSTRACT

Educators in a multicultural-environment face complex-tasks in teaching for diversity. The objective of this study was to determine the educational environment in a Malaysian medical school, aimed to face the diversity. This cross-sectional study was conducted utilising "Dundee Ready Education Environment Measure", a validated instrument that contained 50 items rated 0-4 with a maximum 200 score under five sub-scales. Sub-scales were perceptions of: learning, teacher, academic-self, atmosphere and social-self. Respondents were 193 year-5 medical students of session 2011-2012, comprised of Malays, Chinese, Indians and Other ethnic-group. The overall mean score perceived by all ethnicity was 130/200 (65%). All sub-scales perceived >60% scores except social-self and atmosphere. The social-self sub-scale perceived the lowest score (53.57%) by the Other ethnic group while interestingly social-self also perceived highest (75%) by the Indians. Atmosphere sub-scale perceived a score of 58.33% by Other ethnic-group. Positive perceptions of educational environment among the students of diverse ethnicity reflects that educational environment at the medical school is well equipped to meet the challenges of diversity. However, there is opportunity to increase further positivity in general and social-self and atmosphere sub-scales in particular. Educators in a multicultural-environment must work to avoid monocultural instructional methodologies to promote a multicultural society.

INTRODUCTION

Educational environment is a broad concept where education encompasses both teaching and learning while environment encompasses everything that surrounds us. So, educational environment is defined as everything that is experiencing surrounding an educational institution. Malaysia is a multi ethnic society of 28.7 million people where the population comprises of 50.4% Malays, 23.7% Chinese, 11% Indigenous peoples, 7.1% Indians with few Others (Yeoh, 2012; MDF, 2012). In such a variety of ethnic groups, with their own distinctive lifestyles and value systems, living together with harmony is not an easy matter. In an educational institute, student with such a different ethnic heritage also differs in a wide range of perspectives, experiences, expectations, and approaches to learning (Hixson, 1991) Education system must respect diverse

norms and values and committed to share and enable learners to respond positively to these values (Baginda, 2005). A positive educational environment or system is said to exist in an educational institution when it reflects diversity, in other words when an educational institution is aware of various lifestyles and cultures. Culture comprises of the template of stories, norms, beliefs, attitudes and behavioural patterns (Baginda, 2005; Elizabeth *et al.*, 2007). Therefore, understanding of educational environment and meeting the diverse students' needs is very important for an effective curriculum. Curriculum is a composite of everything that is happening in the class room, department, faculty, medical school or the university as a whole (Bassaw *et al.*, 2003). Curriculum's most significant manifestation and conceptualization is the educational environment (Genn, 2001). The objective of this study was to evaluate the students' perception of educational environment at UKM Medical Centre aimed to identify the strength and weakness and to undertake remedial measure to enhance further improvement of medical education.

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Table 1: Distribution of ethnicity of the respondents, n=193.

Ethnicity	Frequency	Percentage
Malays	115	60
Chinese	67	35
Indians	7	3
Others	4	2
Total	193	100

Table 2: Distribution of perception score \pm SD and (%), contributed by different ethnicity on educational environment measure in different subscales of DREEM and as a whole.

Ethnicity	Students perception of learning	Students perception of teacher	Students academic self perception	Students perception of atmosphere	Students social self perception	Total score as a whole
Malay	33/48 \pm 0.67 (68.75%)	30/44 \pm 0.71 (68.18%)	22/32 \pm 0.70 (68.75%)	30/48 \pm 0.75 (62.50%)	18/28 \pm 0.80 (64.29%)	132/200 \pm 0.73 (66%)
Chinese	33/48 \pm 0.67 (68.75%)	28/44 \pm 0.80 (63.64%)	21/32 \pm 0.74 (65.63%)	29/48 \pm 0.80 (60.42%)	17/28 \pm 0.90 (60.71%)	129/200 \pm 0.78 (64.5%)
Indians	33/48 \pm 0.79 (68.75%)	30/44 \pm 0.79 (68.18%)	23/32 \pm 0.70 (71.88%)	28/48 \pm 0.80 (58.33%)	21/28 \pm 0.90 (75%)	135/200 \pm 0.80 (67.5%)
Others	29/48 \pm 0.64 (60.42%)	32/44 \pm 0.75 (72.73%)	21/32 \pm 0.79 (65.63%)	28/48 \pm 0.70 (58.33%)	15/28 \pm 1.00 (53.57%)	125/200 \pm 0.78 (62.5%)
Mean	32/48 \pm 0.69 (66.67%)	30/44 \pm 0.76 (68.18%)	22/32 \pm 0.73 (68.75%)	29/48 \pm 0.76 (60.42%)	18/28 \pm 0.90 (64.29%)	130/200 \pm 0.77 (65%)

MATERIALS AND METHODS

This was a cross-sectional study carried out in 2011 utilising “Dundee Ready Education Environment Measure” (DREEM) which is an internationally validated, widely used instrument. DREEM contains 50 items under five sub-scales which are students’ perception of learning, students’ perception of teacher, students’ academic-self perception, students perception of atmosphere and students social-self perception. There were 7-12 related items under each sub scales which were measured using Likert scale 0-4 where 0 stands for strongly disagree (SD), 1 for disagree (D), 2 for unsure (U), 3 for agree (A) and 4 for strongly agree (SA).

Students’ perception of learning sub-scale contains 12 items giving a maximum score of 48; students perception of teacher composed of 11 items with a maximum score 44; students academic self-perception contains eight items giving maximum 32 score; students perception of atmosphere contains 12 items with a maximum score of 48; and students social-self perceptions constitutes maximum 28 score with seven items. So, the total maximum score was 200. Respondents were 193 fifth year medical students of UKM medical centre. Data was collected by administering the DREEM questionnaire to the respondents in July 2011 during a seminar at the auditorium of UKM medical centre. Before administration of the questionnaire, the aim of the study was clearly explained, clarified and then consent was obtained. The data was then compiled and analysed using SPSS version 19.

RESULTS

Table 1 showed the frequency and percentage distribution of respondents of different ethnic groups. It was revealed that 60% of the respondents comprised of Malays, 35% Chinese, 3% Indians and 2% comprised of Other ethnicity that includes the indigenous group and other races. **Table 2** showed the respondents’ perception of educational environment in five different subscales. The over all mean score of educational

environment among the five subscales perceived by the respondents was 130/200 (65%).

Mean perception score among Malay, Chinese, Indians and Others were 132/200 (66%), 129/200 (64.5%), 135/200 (67.5%) and 125/200 (62.5%) respectively. The table also showed the perceptions score of different ethnicity for different subscales such as: students perception of learning, students perception of teacher, students academic self perception, students perception of atmosphere and students social self perception.

DISCUSSION

While societies are becoming increasingly multi-ethnic, there has been a ‘re-discovery’ of ethnicity and cultural identity (Hernes & Martin, 2013). The social construction of cultural identity occurs as a part of the differences between the ethnic group whether in terms of boundary or content (Bradby, 2012). Malaysia is a multicultural society composed of Malays, Chinese, Indians and Indigenous group. The students composition of our study comprised of 60% Malays, 35% Chinese, 3% Indians and 2% Other ethnic (Table 1) which actually represented the overall ratio of the students ethnic group of the medical school. It is now widely acknowledged that social cohesion among ethnic groups can be fostered by managing diversity through active interventions and policies (Hernes & Martin, 2013). The diverse student population requires that teachers at medical school need a broader range of knowledge and skills to meet these diverse needs of the student population (Bynoe, 1998). Broader range skilled teachers are the inspirer of intellectual, social, and personal development of all of their students to their highest potential in terms of diverse ethnic, culture, and socioeconomic background (Edwards & Kuhlman, 2007).

Students’ perceptions of learning in this study were in a more positive direction in all ethnic groups and scored similar (68.75%) in major three groups such as Malays, Chinese and Indian while Other ethnic group scored 60.42%. These positive direction may reflect that teachers were aware about their students

which was a more favorable educational environment that ensured by the teachers at UKM medical school. Teachers who were aware of the impacts of ethnic differences are more likely to bring learners' different cultures into the classroom (Gay, 1994).

Malay and Indian students perceived similar score of 68.18% for their teachers followed by Chinese 63.64%. Other ethnic perceived a high score of 72.73% in students perception of teachers sub-scale. As such, students perception of teachers also indicated a favourable environment in the medical school. Teachers face complex tasks in teaching for diversity in today's globalizing environment (Hickling-Hudson, 2003). This study indicated that students perceived their teachers as knowledgeable and were moving in the right direction towards understanding of norms, values and traditions in a multicultural teaching framework.

Malays perceived higher score in their perception of atmosphere (62.50%) followed by Chinese (60.42%). Indian and Other ethnics perceived similar score of atmospheres' perception i.e. 58.33% which was slightly lower. This results showed a positive attitude with a socially comfortable feeling in the class as a relaxed atmosphere. However, the atmosphere perception could be more relaxed. Higher education has revealed that extroverted individuals be inclined to value more socially (McCrae & Costa, 2008; Salgueira *et al.*, 2012). Culturally competent extroverted instructors make communication atmosphere good and more effective by applying the techniques of active listening, elaborating, paraphrasing and restatement (Chang, 1996) which enhances satisfaction, relaxation, compliances and health outcomes (Salam *et al.*, 2011; Salam *et al.*, 2008a).

Indians perceived highest (75%) score in social-self perception followed by Malays (64.29%), then Chinese (60.71%) and Others (53.57%). It is important to understand diverse students' needs to ensure a strong positive environment (Salgueira *et al.*, 2012). Social-self perception by Other ethnics' although rated low, it is >50% which is an indication of 'not too bad' environment. Students agreed that they had good friends in the school, however the support system for all the diverse-ethnicity should be improved.

The world in which we live today, is composed mainly of countries which are multi-ethnic nations either due to they have experienced long-standing migration or their societies are naturally composed of different ethnic groups (Hernes & Martin, 2013). Malaysia is a new industrial country where many immigrants came to work from all over the world. This encourages overseas students to studies further and acting as an educational hub which had changed the ethnic communities in Malaysia. A good education system must reflect diversity, encourage understanding of various cultures and lifestyles (Baginda, 2005). Similar and closer positive perceptions of educational environment by the three major different ethnic student populations reflected that the education system at the medical school is well equipped and meeting the challenge of diversity in a multicultural society. Although composition of Other ethnicity is low they can not be ignored. Teachers need to give more attention to Other ethnic to increase

their social-self perception as it perceived low score. Educators provides the educational experiences needed for the acquisition of minimum necessary competencies in their diverse ethnic groups (Salam *et al.*, 2008b; Schwarz, 2001). However, it is evident that health professionals educators expressed some level of discrimination when dealing with individuals who are different from them in terms of socio-cultural background (Shaya & Gbarayor, 2006). Understanding of the nature of human differences and the realization of individuals approaches from their own perspectives is crucial to manage diversity successfully (Tiedt, 2002). If educators are to manage diversity and produce good future human capital, must work to remove blinders build of monocultural instructional methodologies, ignorance, social distance, racism and bias research (Lisa, 1992).

Findings of the present research revealed that, all sub-scales perceptions of educational environment measures were rated >60% by all ethnic-groups except social-self perception rated 53.57% by Other ethnicity and atmospheres' perception rated 58.33% by both Other and Indian ethnicity. The highest rating score of 75% is perceived by the Indian and the lowest rating score of 53.54% is perceived by the Other ethnic; interestingly, both are in social-self perception sub-scale. Assessing educational environment by asking students perceptions is vital to identify the institutional norms and behavior (Jawaid *et al.*, 2013). The more is the percentage of perceptions scores, the more is the conducive educational environment in institution. High quality education is a fundamental aspect of high quality care (Salam *et al.*, 2011). Diversity is a very important component of current society and educational institutions must trained their graduates to handle diversified situations effectively. It is essential for faculty members to emphasise on core issue of professionalism among their future graduates for the welfare of whole society (Islam *et al.*, 2014). There is opportunity to further increase of the perceptions rate of educational environment in this study by more social and atmospheres' integration among the various ethnic groups. In a multicultural educational environment, educators must celebrate similarities, accept differences and manage a diversified atmosphere through elimination of social prejudices, ignorance, social distance and inculcate respect for socio-cultural diversity and sensitivity to rights of others aimed to further harmonization and further development of a multicultural society.

This study finding reflected educational environment and management of diversity only in one tertiary education institution in a country. Further large scale research inclusive of other higher education institutions around the globe are necessary to understand more of various cultures, perspectives, experiences and expectations of multi-ethnic populations in order to further harmonization and further development of a multicultural society.

CONCLUSION

It is concluded that positive perceptions findings ranged from 53.54% to 75% in different sub-scales of educational environment by different ethnic students population at the UKM

medical school is an indication of positive educational environment which reflects that the medical school is well equipped to meet the challenges of diversity in a multicultural Malaysia. However, there is opportunity to increase further positive perceptions of educational environment in general and social-self and atmosphere sub-scales' perceptions in particular. Understanding of human differences by the educators in a diverse multi-ethnic population and the realization of individuals approaches from their own perspectives is crucial to ensure a more positive environment in a multicultural educational institution. To produce a good human capital and manage the diversity effectively, educators in a multicultural society must work to avoid any monocultural instructional methodologies and act as inspirer of intellectual, social, and personal development of all of their students to their highest potential in terms of diverse ethnic, culture, and socioeconomic background.

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