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# "Video Killed the Radio Star": Transitioning from an Audioto a Video-Based Exam in Hungarian Language Classes for International Medical Students

Gabriella Hild \*🕑, Anna Dávidovics, Vilmos Warta ២ and Timea Németh 몓

Department of Languages for Biomedical Purposes and Communication, University of Pécs Medical School, 7624 Pécs, Hungary; anna.davidovics@aok.pte.hu (A.D.); vilmos.warta@aok.pte.hu (V.W.); timea.nemeth@aok.pte.hu (T.N.)

\* Correspondence: gabriella.hild@aok.pte.hu

Abstract: This action research examines the transition from audio- to video-based tasks in the final Medical Hungarian exam for international medical students, aiming to better align assessment with real-life language needs and enhance student motivation. Conducted at a Hungarian medical university with 61 second-year students, the study uses a mixedmethods approach. Quantitative data from a questionnaire and qualitative insights from focus group interviews reveal students' experiences with the video-based exam tasks and preparatory materials. The results indicate a positive reception of the Practice Test Book and the new video exam format, with visual cues like body language aiding in comprehension and engagement. Students found that the video-based tasks closely mirrored clinical interactions, strengthening the relevance of language skills in professional contexts. Preparatory materials, including lead-in exercises, were well-received by students and seen as effective in improving readiness for the exam. The study suggests that the shift from audio- to video-based assessment can bridge classroom learning with real-world application, potentially serving as a model for other non-traditional study abroad settings in Languages Other Than English (LOTEs), especially as purely audio-based communication has become less prevalent in today's world.



Academic Editor: Sang Yeoup Lee

Received: 18 November 2024 Revised: 23 January 2025 Accepted: 25 January 2025 Published: 28 January 2025

Citation: Hild, G., Dávidovics, A., Warta, V., & Németh, T. (2025). "Video Killed the Radio Star": Transitioning from an Audio- to a Video-Based Exam in Hungarian Language Classes for International Medical Students. *Education Sciences*, 15(2), 161. https://doi.org/10.3390/ educsci15020161

Copyright: © 2025 by the authors. Licensee MDPI, Basel, Switzerland. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (https://creativecommons.org/ licenses/by/4.0/). **Keywords:** LOTE; audio–visual skills; language learning motivation; non-traditional study destinations; listening skills; medical communication; international medical students

# 1. Introduction

In recent years, there has been a significant increase in the number of students choosing to study abroad in non-traditional destinations like Hungary, particularly in specialized fields such as medicine (Németh et al., 2022, 2024; Apsite-Berina et al., 2023; Dávidovics & Németh, 2021; Knight, 2013). This shift is largely due to several factors, as follows: lower tuition costs, high-quality medical education, and the opportunity to gain unique clinical experiences. Hungary, with its strong medical programs and ability to practice on real patients, has become an attractive option for international medical students (Dávidovics et al., 2024). According to Wells (2006), study programs in regions like Central and Eastern Europe are increasingly recognized for offering rigorous training at lower costs, drawing students from across the globe.

These non-traditional study destinations offer a different set of challenges and opportunities compared to traditional English-speaking countries. One of the most notable challenges is the language barrier, which is particularly significant for international students enrolled in English-medium programs in non-English-speaking countries (Faubl et al., 2021). Research shows (Trentman, 2013) that students in such environments frequently rely on English as the "global lingua franca", which minimizes their perceived need to acquire proficiency in the local language. This can result in a lack of motivation to engage in language learning unless there is a clear, immediate necessity, such as passing exams or fulfilling specific program requirements.

A lack of motivation to learn the local language has also been observed in the context of this study (Hild et al., 2018, 2019; Krommer, 2020), which was conducted at a Hungarian medical university where international students participate in a structured Hungarian language learning program during their first two years. Although the primary language of instruction for these students is English, proficiency in Hungarian is crucial for effective communication with patients during clinical rotations in Hungarian hospitals. By the end of the two-year period, students are required to demonstrate their Hungarian-language competence through a final oral and listening exam specifically designed for medical contexts. The final language assessment traditionally included an audio-based listening exam, but both students and teachers raised concerns about its difficulty and its lack of relevance to real-life clinical interactions and the students' actual language needs. In response to this feedback, a needs analysis was conducted, which confirmed these observations (Hild et al., 2024). Based on the findings of the needs analysis, a decision was made to transition from an audio- to a video-based format for the final Hungarian exam. Sample exam tasks were developed and piloted with students who also had experience with the audio-based exam, allowing for direct comparisons (Hild et al., 2024). The results indicated that the video format provided a more immersive and realistic assessment experience, helping to bridge the gap between language learning and clinical practice and potentially increasing the international medical students' motivation to learn Hungarian.

This action research will present the results of the next phase when the new videobased Hungarian exam was implemented. It will detail the methodology behind this pedagogical shift and share the findings aimed at evaluating its effectiveness. By doing so, it will provide valuable insight into the exam's impact on student motivation and their perceived preparedness for clinical practice.

#### 1.1. Language Learning Motivation

Recent research underscores the L2 learning experience as a central factor in language learning motivation (Dörnyei, 2019; Al-Hoorie, 2018; Mendoza & Phung, 2018). According to Dörnyei (2019), this experience comprises various elements, such as the influence of teachers, curriculum content, activities, and teaching methods, all of which shape the learner's motivation. The immediate classroom environment, including instructional methods and task relevance, has a strong influence on motivation, often more impactful than anticipated (Dörnyei & Ushioda, 2011). Dörnyei (2009) also notes that students' initial motivation often stems from positive and enjoyable learning experiences, which can lead to better language outcomes. Csizér et al. (2010) identified several classroom-related motivational factors in language learning, including the influence of learning experiences within the group, teaching methods, task types, and assessment practices.

In the context of Languages Other Than English (LOTEs), similar findings have emerged regarding motivational factors. Huang's (2021) study, guided by Dörnyei's L2 Motivational Self System framework, investigated motivational factors for Taiwanese learners in elective LOTE courses within a monolingual setting. The results highlighted that the learning experience was the most significant motivator, with factors like teacher involvement, engaging tasks, and classroom dynamics all strengthening students' commitment. Interview data also showed that assessment played a role equal to personal aspirations for success, with some students setting high grades as a personal goal, which positively influenced their motivation. However, poorly designed assessment was found to demotivate if students felt unprepared, emphasizing the need for supportive practices. Based on the results, Huang (2021) suggested that assessment should function not only as a way to measure learning but also as a tool to foster student engagement. Similarly, Převrátilová's (2024) study of 13 Erasmus students learning Czech found the learning experience to be a primary motivator, influenced by the teaching quality, course content, relevance, and emotional engagement. Students valued the communicative approach and practical applicability of the material.

Studies have also found that instrumental motivation (Gardner, 1985)—motivation driven by practical goals, such as career advancement or academic requirements—is also essential in learning an LOTE. Zhang and Laohawiriyanon (2023) examined Thai university students' motivations to learn English and Chinese. The results showed that instrumental motivation was a prominent factor driving sustained interest in language acquisition, indicating that clear, goal-oriented reasons support stronger engagement with the target language. Jitpaiboon et al. (2024) similarly found instrumental motivation as a major factor for 167 Thai students in Bangkok studying Japanese, especially among those nearing graduation and, thus, preparing for job markets. Many of these third- and fourth-year students reported studying Japanese specifically to pass the Japanese-Language Proficiency Test, underscoring the practical career advantages they associated with language proficiency.

As noted in the above studies, assessment plays a key role in enhancing students' motivation and engagement in language learning. Bachman and Palmer (1996) similarly emphasize that exam tasks, when designed to be relevant, meaningful, and engaging, can significantly impact students' motivation to study and perform well. According to Bachman and Palmer (2010, 1996), a critical component of assessment is authenticity, referring to how closely test tasks and contexts reflect real-life language use. Exam tasks that mirror the language skills needed by students' in everyday or professional interactions can strongly motivate learners to advance their proficiency (Bachman & Palmer, 1996). In addition, assessing language used beyond the classroom enables educators to align instruction with real-world demands (Bachman & Palmer, 2010; Fulcher, 2010). This approach is particularly valuable for LOTEs with limited global use, such as Hungarian. When students see connections between classroom learning and practical application, their engagement and motivation increase, fostering meaningful progress in language proficiency.

### 1.2. Listening Skills

Listening comprehension is critical in language learning but is often challenging due to its complexity, involving sound discrimination, grammar and vocabulary understanding, and cultural context interpretation (Vandergrift, 2007, 1999). Paivio's (1990) Dual Coding Theory suggests that information retention improves when both verbal (i.e., linguistic) and non-verbal (i.e., imagery-based) systems are activated, making multimedia learning materials beneficial. Mayer's (2014) Cognitive Theory of Multimedia Learning aligns with this, proposing that using both visual and auditory channels enhances cognitive processing and supports skill development in listening and overall language acquisition.

In a language-learning classroom, videos combine visual and auditory elements, enriching the learning experience and engaging both verbal and non-verbal processing systems. Non-verbal cues, such as gestures, facial expressions, and movements related to the message can enhance communication, reinforcing and facilitating comprehension (Zona & Felser, 2023; Buck, 2001). Previous research studies also show that using audio–visual materials can enhance learners' engagement in listening activities and foster the development of better listening skills than audio materials alone (Rahmatian & Armium, 2011; Berk, 2009;

Cakir, 2006). Brown (2006) adds that incorporating authentic materials, such as videos and interviews into the teaching process not only boosts learners' motivation and engagement, but encourage them to pay closer attention to the audio–visual content. Buck (2001) similarly notes that visual components serve as focal points, helping to direct and hold students' attention during listening tasks—a crucial factor for Generation Z students, who are often noted for shorter attention spans (Düzenli, 2021). In addition, while "seeing the situation, the participants tend to call up relevant schema" (Buck, 2001, p. 172). Schema refers to the cognitive structures that help individuals organize and interpret information based on their past experiences and knowledge. When learners view a video, their brains use these to make sense of the visual and auditory information by linking it to what they already know. This activation of relevant schemas allows them to predict or infer meaning more effectively, which aids in comprehension and retention.

While previous studies highlight the benefits of using audio–visual materials to enhance learners' engagement and listening skills, it is essential to acknowledge the potential drawbacks. For instance, Alderson et al. (1995) point out that the complexity of simultaneously processing video, text, and audio, while also writing responses, can overwhelm learners, causing some to disengage from the video content entirely. Furthermore, research also shows (Mayer, 2009, p. 274; Buck, 2001) that the presence of visual information can sometimes increase the cognitive load on test-takers, negatively affecting their ability to process and understand the material effectively. These insights suggest that while audio–visual tools can be powerful, their use must be carefully managed to prevent cognitive overload and ensure they truly support learning.

Visual skills have also become essential in our visually dominated, digital world, particularly for Generation Z, whose learning preferences lean heavily toward visual and kinesthetic methods. Studies show that Gen Z, shaped by constant interaction with digital media, has developed advanced visual-processing skills, making visual learning both natural and efficient for them (Shorey et al., 2021; Prensky, 2001). This preference for visual materials supports independent and interactive learning, aligning with Gen Z's distinct cognitive strengths and helping them thrive in visually focused environments.

One of the most common challenges in listening comprehension tasks is the rate of speech (Buck, 2001). Research suggests that the speed of speech plays a significant role in comprehension, especially for those with lower proficiency levels. Goh (2000) notes that rapid speech increases the cognitive load, making it harder for learners to process and grasp the information. Field (2008) emphasizes the importance of adapting to natural speech patterns and suggests that learners benefit from a structured approach where the complexity and speed of the spoken input are gradually increased. Field argues that exposing students to progressively faster speech can help build their listening comprehension skills by training them to handle more authentic conversational speeds over time.

In terms of strategies used in the domain of listening, Graham (2017) found that a significant majority of foreign language teachers in England (78%) believe that it is beneficial to review vocabulary previously learned in relation to new topics. According to Vandergrift (1999), pre-listening activities are essential in second language learning, as they prepare students for what they will hear and what they need to do during the listening task. This phase involves activating learners' prior knowledge about the topic, understanding the structure of the content, and considering relevant cultural contexts. Setting a clear purpose for listening also guides students in focusing on key details. With this groundwork, students can better predict and anticipate the information they are about to encounter, enhancing their comprehension (Vandergrift, 1999). Brown (2006) suggests that when learning objectives are clearly defined and keywords are highlighted, students can more effectively understand and retain the information. He further recommends that learners should be encouraged to pay attention to details and make inferences beyond what is directly stated.

Guided by the literature, this study strives to enhance medical international students' comprehension and motivation to learn Medical Hungarian by enriching the learning experience through the application of a more contextually relevant assessment that incorporates the benefits of visual elements through video.

## 2. Materials and Methods

## 2.1. Research Methodology

This study adopts an action research approach to explore the effectiveness of videobased exams in enhancing Hungarian language learning within an English-medium program at a Hungarian medical university. In educational contexts, this method is valuable as it empowers educators to refine teaching strategies, curriculum, and assessments based on real-world needs (Richards & Farrell, 2005). Unlike traditional methodologies focused on generalizability and standardized metrics, action research emphasizes real-world impact through observations, interviews, and iterative improvement (Richards & Farrell, 2005). Action research is effective in promoting student-centered learning environments. Teachers can directly involve students in identifying challenges and potential improvements, leading to more meaningful and engaging classroom experiences (Mills, 2014). However, action research often relies on qualitative data, such as observations and interviews, which can lead to subjective interpretations and biases (Burns, 2010). Mills (2014) highlights that generalizability is a limitation in action research, as it focuses on specific, localized challenges within a classroom or institution. Rather than producing universally applicable results, action research aims for applicability within its immediate context, prioritizing improvements and relevance for participants. Mills (2014) suggests that findings from action research are best viewed as valuable insights for similar contexts rather than broadly generalizable conclusions.

### 2.2. Research Context

This action research was conducted at the language department of a Hungarian medical university. This medical university offers three programs—Hungarian-medium, English-medium, and German-medium—serving students from over 91 countries, with more than 60% of the student population being international. The present research targeted the English-medium program, where English is the primary language of instruction. However, international students are required to learn Hungarian primarily to communicate verbally with Hungarian patients during clinical rotations in Hungarian hospitals. To prepare for these interactions, they take Medical Hungarian courses during their first four semesters, consisting of two 90 min classes weekly over a 12-week semester. By the end of this period, the international students must pass an oral and listening exam in Hungarian to qualify for clinical rotations. Given the limited instruction time, the curriculum is carefully structured to equip students with essential Hungarian language skills for patient interaction.

It is important to note that the international students start learning Hungarian with no prior knowledge and have a packed timetable with numerous exams, underscoring the importance of teaching them language skills that directly align with their clinical communication needs during their studies in Hungary. In addition, English serves as the language of instruction in the Hungarian classes, which for the majority of these students is their second, third, or even fourth language, posing an additional challenge for them. Previous research (Faubl et al., 2021; Krommer, 2020; Németh & Pozsgai, 2018; Hild et al., 2018, 2019) along with informal conversations with the international medical students, suggest that many of them do not fully immerse themselves in the Hungarian culture or interact with local residents or Hungarian medical students at the university. Instead, they tend to socialize

with peers from their home countries or with other students in the English-medium program. This pattern extends to their daily lives in Hungary, where they predominantly use English, considering it an international language rather than Hungarian. This finding aligns with other studies in study-abroad contexts, which show that many students primarily interact with their co-nationals or other international students (Beech, 2018; Bracke & Aguerre, 2015) and rely on English in social settings (Trentman, 2013; Wiers-Jenssen, 2003). Consequently, despite being in a Hungarian-speaking environment, the international students predominantly learn and use Hungarian within the classroom setting. An additional difficulty for Hungarian language teachers in motivating the international medical students is that they learn Hungarian during their first two years of study in Hungary, while they are simultaneously adapting to a new culture and education system and living alone far from their families. As informal feedback from the international students and previous research (Krommer, 2020; Hild et al., 2018, 2019) also confirmed, the limited global applicability and long-term utility of Hungarian further compound these challenges for both teachers and students in finding the motivation to learn the language. The shift to video format was intended to enhance student motivation by creating an exam that closely mirrors their real-life language needs and is more relevant to their practical skills, providing a more authentic and immersive learning experience.

#### 2.3. Procedure and Participants

Following a needs analysis that revealed international students faced difficulties with the audio-based final Medical Hungarian listening exam due to its highly challenging nature and lack of alignment with their practical language needs in clinical rotations, a decision was made to transition to a video-based format (Hild et al., 2024). This new format aimed to better reflect the language skills required for face-to-face patient interactions during clinical rotations and provides additional visual support to aid comprehension. Sample video-based exam tasks were developed and piloted with students who had previously taken the audio-based version, allowing them to compare both formats. The pilot results indicated that the video-based exam format effectively addresses many of the difficulties students encountered with the previous version, offering a more immersive and realistic assessment experience that bridges language learning with clinical practice (Hild et al., 2024). Based on the pilot findings, exam preparatory materials were created in the form of a Practice Test Book, and minor adjustments were made to refine the video-based exam tasks.

This study outlines the next phase, during which the Practice Test Book with 15 videobased mock exams was implemented in the spring semester of 2023/2024, following the initial pilot. Four groups of second-year international students participated in this phase. All four groups enrolled in the same Hungarian language course designed to prepare them for their final exams, but attended at four different class sessions. After a semester of preparation with the Practice Test Book, the four groups took the new video-based Hungarian final exam. Each group consisted of 12–18 second-year international students, totaling 61 across all groups, from the English-medium program of the university. This semester was their last of the required four semesters of Hungarian language studies, ending with the Final Hungarian Language exams. The participating students were from Norway (26%), Iran (22%), China (20%), Jordan (14%), South Korea (6%), Japan (5%), Nigeria (4%), and Turkey (3%). Among the participants, 39 were female and 22 were male. English, the language of instruction in the Hungarian classes, was their second (54%), third (28%), or fourth language (18%).

In addition to the 15 mock exam tasks, the Practice Test Book also contained lead-in exercises, answer keys, and the transcripts of the videos. The lead-in exercises were designed to prepare students for the subsequent comprehension tasks by activating their prior knowledge, introducing key vocabulary or concepts, and engaging their interest

in the topics of the doctor-patient dialogues depicted in the subsequent videos. They aimed to improve students' recall and retention of essential terms, facilitating better understanding during the video mock exams and building students' confidence in using the vocabulary. The new exam tasks included a video paired with a task sheet containing 20 open-ended comprehension questions that required brief responses in English. The task sheets maintained the same structure and question types as the audio-based exam format, as the needs analysis revealed no issues with this aspect of the assessment. The instructions and comprehension questions on the task sheets were provided in English, consistent with the prior audio-based version, allowing assessment of students' understanding of the Hungarian dialogue. Similarly to the audio-based tasks, each video depicted a doctor-patient interview conducted in Hungarian, where the doctor gathered information on the patient's health and medical history to aid in diagnosis or treatment planning. The scenarios were developed with input from healthcare professionals to mirror typical interactions that international medical students might face during rotations. The videos were specifically created for pedagogical purposes within the department and varied in length, spanning from 3 to 5 min.

### 2.4. Data Collection

On the final class of the semester, the participating four groups of second-year international students were administered a questionnaire to elicit their experiences and opinions regarding the Practice Test Book containing the 15 mock video-based exam tasks. The questionnaire consisted of three sections. The first section comprised 13 statements about the mock exam tasks, with students asked to rate their level of agreement on a 6-point Likert scale. In the second section, students were prompted to complete incomplete statements regarding what they liked or disliked about the mock video-based tasks, with the option to select multiple choices. The third section featured six statements regarding the lead-in exercises, with students again rating their level of agreement on a 6-point Likert scale.

In addition to administering the questionnaire, focus group interviews were conducted with the four groups separately in English to further clarify their experience with the new, video-based Hungarian exam. The students in each group were part of the same class during the semester, which helped create a comfortable environment for sharing their experiences during the group discussions, as they already knew one another. Conducting the interviews during their usual class times also made it easier for everyone to participate. The interviews took place after the students took the video-based final Medical Hungarian exam at the end of the semester. Participation in the study was voluntary, and the focusgroup interviews were conducted only after students received their exam results, ensuring they felt no pressure to participate.

A total of 53 students from the four groups agreed to participate in the interviews. The interviews were recorded and transcribed into electronic scripts using the transcription feature of Microsoft Word, available on the Microsoft Office online platform. Thematic analysis was used to identify patterns and themes within the interview data (Braun & Clarke, 2006). Quotations from the interviews are extracted and written in bold in the following to provide an in-depth understanding of the participants' views and to support the findings. During the interviews the following questions were addressed:

- 1. What benefits did you gain from using the video-based tasks for learning Hungarian?
- 2. What challenges did you encounter while using the video-based tasks for learning Hungarian?
- 3. What particular skills or knowledge did you gain from these video-based tasks?
- 4. What strategies did you find most effective in doing these video-based tasks?

- 5. What changes would you suggest to the lead-in exercises you did before watching the video to make them more effective or engaging?
- 6. What changes would you suggest for the video-based tasks to make them more effective or engaging?
- 7. Would you recommend the use of video-based tasks in the future for teaching Hungarian to other medical students? Why or why not?

### 3. Results

## 3.1. Questionnaire Results

The questionnaire administered to the second-year international medical students at the end of the implementation period showed positive results. A noteworthy shift was observed in students' perceptions of the video-based tasks. Initially, 63% of students found the tasks challenging. However, by the end of the semester, there was a noticeable change, with 73% of students either strongly disagreeing or disagreeing with the statement that the tasks were challenging. This suggests that the Practice Test Book effectively prepared them for the exam.

A large majority of students (88%) found the video-based exam tasks both engaging and helpful in simulating a clinical environment. This aligns with the intended design of the tasks to mirror real-life medical settings and supports the finding that contextual relevance can boost student motivation and engagement. Moreover, 82% of participants reported an improved understanding of spoken Medical Hungarian, emphasizing the utility of these tasks in enhancing language comprehension specific to their clinical needs.

Reflecting on their readiness for practical communication, 68% of students agreed that they felt confident using the skills developed through video-based tasks in real-life scenarios with Hungarian-speaking patients. This sentiment is reinforced by 80% of students, who reported feeling capable of applying their language skills during interactions with patients. These results suggest that the video-based format not only bolstered students' confidence but also supported their practical language preparedness for clinical settings.

The visual elements in the video-based tasks also contributed positively to students' experiences. All respondents (100%) reported enhanced comprehension of spoken Hungarian, with 91% indicating that visual aids significantly improved their understanding. Specific visual aspects, such as body language, were identified as beneficial by 86% of participants, illustrating the role of visual cues in complex language tasks. Additionally, 61% of students found video tasks easier to understand compared to traditional audio-only tasks, reinforcing the value of multimedia in language learning.

Regarding the effectiveness of the mock, video-based exam tasks, 77% of international students recognized these exercises as valuable tools for preparing for the final exam. They provided insights into doctor–patient communication, valued by 54% of respondents, highlighting the relevance of the tasks to their future clinical practice. Additionally, more than half of the students (58%) expressed that the learning experience was enjoyable, suggesting that the use of engaging materials fostered a positive attitude toward language acquisition.

While only a small percentage of students encountered issues with the video-based tasks, these concerns are worth noting for further improvement. A total of 21% of the respondents faced challenges related to language proficiency, indicating that some students may struggle to fully engage with the content because of their varying levels of Hungarian language skills. Additionally, 10% expressed a perceived lack of relevance of the tasks, which could diminish motivation. A minority (6%) preferred traditional methods over the video tasks, highlighting a desire for more familiar learning formats. Technical issues and quality concerns were mentioned by 5% of students, while 15% noted that repetitive content led to decreased engagement. Furthermore, 18% found certain visual elements distracting,

which may detract from the overall learning experience. These insights emphasize the need for ongoing evaluation and adaptation of teaching methods to ensure they effectively meet the diverse needs of students in a clinical context.

Regarding the lead-in exercises in the Practice Test Book, the questionnaire results showed that a significant majority of students (88%) expressed some level of agreement that these exercises effectively prepared them for engaging with the subsequent video content. The largest group, 36%, "Strongly Agreed", and 34% "Agreed", showing that the exercises were well-received overall. More than 80% of the participating students found the lead-in exercises helpful in activating their prior knowledge before watching the videos and agreed that the lead-in exercises made the video-based tasks more interesting and engaging by incorporating group discussions on the topics covered in the videos. In line with these answers, 60% of respondents disagreed with the notion that these exercises were unnecessary, further underscoring their importance in enhancing comprehension.

When asking the participants what changes they would suggest to the lead-in exercises, one of the recurring themes was the inclusion of more interactive and "fun activities", such as "crosswords and puzzles", to revise the vocabulary related to the videos. A smaller group of respondents (10%) recommended allocating more time to revision in each unit:

#### A bit more time for practicing in each unit would help.

More time would be a good idea.

A few respondents (15%) appreciated the colorful pictures and format of the lead-in exercise and suggested incorporating more visual elements in the Practice Test Book:

#### I really liked the pictures.

It would be great if the book had more visuals—like diagrams, illustrations of medical situations to help with the vocab and main ideas.

In addition, 26% of the students were of the opinion that no changes were necessary, indicating satisfaction with the current exercises and format:

I think they were good as they are.

They were perfect.

#### 3.2. Focus-Group Interview Results

After completing the video-based final Medical Hungarian exam at the end of the semester, the four groups of second-year international medical students were separately interviewed to gain further insights into their experiences with the new exam format. The thematic analysis of the data revealed several key findings, categorized into benefits, challenges, skills gained, effective strategies, and suggestions for improvement.

In terms of the benefits of the new video-based exam task, the findings of the interviews were in accordance with the questionnaire results. A major theme among the responses was that the visual cues provided in the video-based tasks significantly enhanced comprehension. In particular, 64% of the respondents highlighted the importance of visual elements, such as body language, gestures, and lip-reading, in improving their understanding of spoken Hungarian, as follows:

Body language of the doctor and patients helped with easier understanding.

Lip reading and body language came in handy when I had difficulty understanding the dialogue.

When she [the patient] pointed or touched where it hurt, helped narrow down the meaning.

I found it easier to follow the conversation because I could see the reactions and expressions of the speakers, which gave me hints about the context.

Another recurring theme was the perceived realism of the video-based tasks. A total of 66% of the participants explicitly mentioned that these tasks reflected the real-life clinical environment they would face during their rotations:

*It felt much closer to what will happen during rotations than just listening to audio. Seeing expressions and gestures made it feel real.* 

*I really liked that it reflects what actually happens in the clinic, it gave us a preview of real patient interactions.* 

The videos simulate the real patient–doctor communication that we'll experience in clinical rotations, which makes it easier to relate to what we're learning.

A related theme was the increased understanding of specific medical communication between Hungarian doctors and patients. The students (22%) appreciated that the videos helped them learn medical terminology and observe how the Hungarian patients described their symptoms:

It was really helpful to hear a real Hungarian patient talk about their issues—it made the medical vocabulary stick better and showed how it's actually used.

One could hear how the patients speak, including their choice of words, the natural expressions they use, and the way they describe their symptoms.

*I really liked the common daily phrases that the patients used.* 

One participating student pointed out that videos like these are rare on the Internet, making this the first opportunity for him to observe a doctor–patient dialogue in Hungarian:

You cannot really find such videos on the internet. So it was the first time I saw a Hungarian doctor and patient talking to each other.

A number of responses (17%) also touched upon the engaging and interactive nature of the video-based tasks. They described the experience as fun or more interesting compared to other methods:

It was a fun way to learn spoken Hungarian, much better than simple listening exercises.

It was interactive and helpful.

It was less monotonous and boring than just listening to audio.

Another key benefit of the video-based exam tasks that many students (44%) highlighted was its ability to help them maintain focus on the task at hand. Watching the video seemed to engage them more actively, reducing the tendency for their thoughts to wander and enabling them to follow the dialogue more closely, as shown in the following:

Watching the video made it easier for me to stay focused; I didn't get distracted as easily as I usually do with just audio.

*The visuals helped me follow the conversation better because I could see what was happening, so my mind didn't drift off.* 

When asked about the benefits of the new video-based task, several students (38%) directly compared it to traditional, audio-only language tasks, explicitly stating that video was easier to understand and more effective for learning:

Videos are so much more useful than just audio.

I find the video tasks way better and more interesting than audio.

When I watch the video, I can actually see what's going on. Audio doesn't give me the same understanding.

One of the most significant challenges noted by the students (18%) was the speed at which the speakers communicated in the video:

*The characters spoke fast, I could not keep up sometimes. It is a good thing we can watch it twice at the exam.* 

The conversations were too fast for me.

A few students (25%) mentioned that, unlike during the video-based exam tasks, they would have the opportunity during clinical rotations to ask the patient to repeat what they said or to speak more slowly if needed:

*In a clinical situation with patients, I can ask them to speak slower. So it's not the same as just watching.* 

Another challenge identified by some students (27%) was the tendency to become distracted or struggle with multitasking while watching the video and simultaneously filling out the task sheet:

Sometimes I got distracted by what they [the doctor and the patient] were doing instead of focusing on what they were saying. It was hard to balance paying attention to the conversation and watching their actions at the same time, especially since I needed to concentrate more to understand the language.

It was a bit hard to write and listen at the same time, especially since it's a new language and I need to concentrate on understanding.

*I couldn't analyze her actions* [the patient] *and follow the conversation at the same time; I felt like I was missing parts of both.* 

A few students (33%) reported encountering difficulties with the video-based tasks at first, but their ability to comprehend and manage the content improved as they gained more experience through practice during the semester:

*In the beginning, it was a bit challenging, but later on, I got the hang of it and started understanding more easily.* 

Some things were difficult to grasp at first, but with constant practice, it got better. I felt more comfortable with each task.

At first, keeping up with both the visuals and audio was overwhelming, but over time, it became easier to follow along. Practice made a big difference.

During the interviews, the international medical students were also asked to suggest changes to the video-based exam task and the Practice Test Book. Consistent with the challenges they identified in the exam task, one of the most common suggestions was to reduce the speech rate in the videos:

*If the speakers talked a bit slower, it would help us understand them more clearly.* 

*I think slowing down the speech in the videos would make it easier for us to catch the words and understand what's being said.* 

A few students (21%) suggested improving the Practice Test Book by gradually increasing the difficulty level of the mock video-based tasks throughout the semester. They proposed that introducing different levels of difficulty in the video tasks would better align with their learning progress as they developed their Hungarian language proficiency:

Maybe adding different stages of difficulty that increase over the semester would be useful to keep up with our progress.

*I think it would be really helpful if the video tasks started off easier and then got more challenging as we went through the semester.* 

It would be great to have tasks in the book that gradually become more complex throughout the semester.

The students (38%) also recommended alternating the individuals who play the roles in the videos in the Practice Test Book. They believed that this approach would help them get used to various accents and speaking styles, making the learning experience more realistic and comprehensive:

Using different people to play the roles in the videos would really help.

*If we could hear different accents, it would prepare us better for real-life situations where not everyone speaks the same way.* 

Some participants (18%) highlighted the need for a wider range of videos covering various topics, as well as more videos that they could also use at home for additional practice. They felt that having access to more diverse video content would help reinforce their learning outside of the classroom and give them more opportunities to become familiar with different language contexts:

It would be great if we had more videos on different topics that we could watch at home when we have time.

Sometimes there's not enough time in class, so if we have extra videos we can use to practice it would really help.

More videos with different scenarios would be useful so we can get used to the language in various situations.

Although there are already lead-in exercises before the videos in the Practice Test Book, several students (24%) suggested incorporating more activities specifically focused on vocabulary practice. They felt that increasing the number of these vocabulary exercises beforehand would better prepare them for the content of the videos, allowing them to follow the dialogues more easily and focus on understanding the context:

It would be helpful to do more vocabulary exercises before we watch the videos so we know the key words in advance.

*I think if we had some more interactive tasks to really practice the words before the video, it would make it easier to understand what they are saying.* 

Overall, the questionnaire and the interviews provided valuable insight into the experiences of international medical students with the new video-based Hungarian exam format. The findings highlight the significant benefits of this approach, including enhanced comprehension, realism, and engagement, alongside challenges such as the speed of dialogue and multitasking.

# 4. Discussion

This action research aimed to evaluate the effectiveness of implementing video-based tasks in the final Medical Hungarian exam, along with preparatory materials designed to enhance the comprehension and motivation of international medical students. The study included second-year international medical students enrolled in a Hungarian language course within an English-medium program of a Hungarian medical university. Data collection combined quantitative responses from a questionnaire, completed by 61 students, and focusing on the exam preparatory materials, including mock video-based exam tasks, with qualitative insights from post-exam focus group interviews, in which 53 students participated. This approach aimed to gain a comprehensive understanding of students' experiences with the new, video-based exam format.

The questionnaire administered at the end of the implementation period reflected a positive reception of the new video-based tasks and the exam preparatory materials among the international medical students. Initially, many students reported difficulty with the mock exam tasks; however, by the end of semester, most students felt more comfortable with the format, suggesting that the structured approach in the Practice Test Book facilitated gradual adaptation. The lead-in exercises in the book were well-received and played a crucial role in preparing students for the subsequent video-based tasks. This aligns with Graham's (2017) emphasis on reviewing prior vocabulary to strengthen retention and comprehension as students progress to new topics. Similarly, Vandergrift (1999) underscores pre-listening activities' roles in activating background knowledge and guiding students' focus, which proved effective in this study, as reflected by student feedback. The students' suggestions for more interactive elements and additional revision time provide valuable insights for further improving these exercises.

In addition, many students felt that video-based tasks effectively replicated the clinical environment they would encounter in Hungarian hospitals, directly tying language skills to the professional requirements they will face. Instrumental motivation, as discussed by Gardner (1985), Zhang and Laohawiriyanon (2023), and Jitpaiboon et al. (2024), emphasizes how goal-oriented reasons, like career preparation and professional advancement, drive engagement and commitment to language study. The respondents also believed that the mock video-based exam tasks were both engaging and effective for exam preparation, helping them develop doctor-patient communication skills, which they identified as directly relevant to their future clinical practice. These findings align with literature emphasizing the importance of a meaningful and engaging learning experience, particularly in learning LOTEs (Převrátilová, 2024; Huang, 2021). Research highlights that an enjoyable learning environment, alongside activities that closely mirror real-life language needs, can significantly enhances motivation and retention (Dörnyei, 2019; Csizér et al., 2010). Additionally, all respondents reported an improved understanding of spoken Hungarian, underscoring the importance of visual aids in language acquisition. This aligns with Mayer's (2014) Cognitive Theory of Multimedia Learning, which posits that visuals can enhance information processing and support comprehension.

The interviews provided further insight into students' experiences, complementing the questionnaire data. A prominent theme among responses was the role of visual cues, such as body language and gestures, in enhancing comprehension. These elements activated students' schemas related to clinical interactions, as described in Buck's (2001) theory of visual focal points, allowing them to better interpret spoken language and anticipate context. The students reported that the visual elements also improved their focus, helping them feel more engaged and less distracted than with audio-only tasks. This finding aligns with Buck's (2001) assertion that visual cues in listening tasks anchor attention, enhancing comprehension. For Generation *Z*, who favor visual and kinesthetic learning (Shorey et al., 2021; Prensky, 2001), incorporating visuals not only enhances their engagement but also aligns with their cognitive strengths, helping them stay focused and process information more effectively.

The post-exam interviews further supported the questionnaire findings, with many students highlighting the realism of the exam tasks and noting how the video-based format closely reflected clinical environments. This realism aligns with findings in the literature emphasizing that contextually relevant assessments can improve comprehension and motivation by demonstrating the practical utility of language skills beyond the classroom setting (Fulcher, 2010; Bachman & Palmer, 1996). Huang (2021) suggested that assessment should not only measure learning but also serve as a tool to foster student engagement, and the video-based tasks in this study did just that by immersing students in realistic

clinical scenarios. By exposing students to typical patient interactions, the video-based tasks bridged classroom learning with real-world clinical practice, reinforcing their relevance.

Despite the positive reception, some challenges emerged. Some students reported difficulties with multitasking while observing the video and completing tasks simultaneously, reflecting cognitive overload, which is a common issue noted in the literature on multimedia learning (Mayer, 2009; Buck, 2001). The tendency to become distracted while managing visual and auditory inputs suggests that further adjustments, such as adding preparatory exercises targeting multitasking skills, could help alleviate cognitive load. Another issue identified was the pace of speech in the videos. Vandergrift (1999, 2007) and Field (2008) highlight that gradual exposure to native speech rates enhances listening skills, suggesting that tasks with varied speech speeds could aid comprehension. Interestingly, the students themselves proposed a similar approach, recommending a progressive increase in task difficulty in the Practice Test Book to align with their learning pace.

During the interviews, international medical students offered several suggestions for improving the video-based exam tasks and the Practice Test Book. Key recommendations included reducing the speech rate in the videos, which they believed would aid comprehension, as faster speech often leads to cognitive overload—a known challenge in multimedia learning (Mayer, 2009; Buck, 2001). Some students also recommended using a range of speakers in the videos of the Practice Test Book to expose them to various accents and speaking styles, enhancing their readiness for real-world clinical interactions. Students further expressed a need for more video topics and take-home materials for continued practice, underscoring the value of sustained engagement with the target language outside the classroom. Finally, they recommended additional vocabulary exercises before the video-based tasks in the Practice Test Book, suggesting that targeted pre-listening activities would allow them to focus more effectively on understanding dialogue. Literature also supports these types of lead-in exercises as a means of activating prior knowledge and guiding student focus (Graham, 2017; Vandergrift, 1999).

## 5. Conclusions

This study aimed to evaluate the effectiveness of video-based tasks in the final Medical Hungarian exam and to assess how these tasks, along with preparatory materials, could enhance comprehension and motivation among international medical students. The findings suggest that video-based assessments, incorporating visual elements and authentic dialogue, can significantly improve language acquisition and engagement for international medical students in LOTE contexts. The use of realistic, clinically relevant scenarios helped students better prepare for real-world interactions, bridging the gap between classroom learning and practical application. Building on student feedback, planned improvements to the video-based tasks and Practice Test Book will further align the content with students' language needs. The approach presented in this action research could serve as a valuable model for creating multimedia assessments in other non-traditional study abroad settings.

Reflecting on the title "Video Killed the Radio Star", a 1979 hit by The Buggles, which highlights the transition from simpler forms of media to more complex multimedia experiences, our research suggests that it may indeed be time to place greater emphasis on audio–visual skills in language assessment. In today's digital world, in which purely audio-based communication is increasingly rare—even in online conferencing, which typically includes visual interaction—integrating visual elements may provide a more realistic approach. This shift could provide a richer, more immersive experience that more accurately reflects modern communication contexts and aligns with the learning preferences of the current student generation, enhancing language comprehension and engagement in ways that audio alone may not fully achieve.

In terms of limitations, this study's focus on a single Hungarian medical university and a specific group of international students in an English-medium program limits its generalizability to broader contexts. Participants' unique challenges in a non-immersion environment, with limited Hungarian use beyond academics, may affect the relevance of findings for other contexts. Additionally, the reliance on self-reported perceptions from questionnaires and focus groups introduces a potential bias. Short-term evaluations of video-based tasks also limit understanding of their long-term impact on language retention and clinical efficacy. Future studies are necessary to broaden this scope and track longitudinal outcomes to address these limitations.

**Author Contributions:** Conceptualization: G.H. and T.N.; methodology: G.H. and T.N.; validation: G.H., V.W., A.D. and T.N.; formal analysis: G.H. and T.N.; data curation, G.H., V.W., A.D. and T.N.; writing—original draft preparation: G.H.; writing—review and editing: G.H., V.W., A.D. and T.N. All authors have read and agreed to the published version of the manuscript.

Funding: This research received no external funding.

**Institutional Review Board Statement:** Ethical review and approval were waived for this study due to the minimal risk posed to participants, the voluntary nature of their involvement, and the assurance of confidentiality and anonymity in the data collection and analysis processes.

Informed Consent Statement: Informed consent was obtained from all subjects involved in the study.

**Data Availability Statement:** The data are unavailable due to privacy and ethical restrictions implemented to safeguard participant confidentiality and adhere to ethical research standards.

**Acknowledgments:** We would like to thank all of the students whose voluntary participation contributed immensely to the study.

Conflicts of Interest: The authors declare no conflicts of interests.

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