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FORMATION OF PROFESSIONAL AND COMMUNICATIVE COMPETENCE FOR MASTERS OF MEDICINE IN UNIVERSITY CONDITIONS

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ФОРМУВАННЯ ПРОФЕСІЙНО-КОМУНІКАТИВНОЇ КОМПЕТЕНТНОСТІ МАГІСТРІВ МЕДИЦИНИ В УМОВАХ УНІВЕРСИТЕТУ

Abstract. The article analyzes the main aspects of the professional and communicative competence formation for the masters of medicine in university conditions, focuses attention on the “professional and communicative competence for masters of medicine” as a complex professional quality, clarifies the essence of the formation of this component of the professional training of highly qualified specialists in the medical field, reveals the means for mastering speech skills and abilities necessary for communication, a set of knowledge about the norms and rules of communication.

Key words: competence; professional communication; master of medicine; communicative interaction; educational process.

Анотація. У статті проаналізовано основні аспекти формування професійно-комунікативної компетентності магістрів медицини в умовах університету, зацентовано увагу на «професійно-комунікативній компетентності магістрів медицини» як складній професійній якості, з'ясовано сутність формування цієї складової фахової підготовки висококваліфікованих фахівців медичної сфери, розкрито засоби для оволодіння мовленнєвими уміннями й навичками, необхідними для спілкування, сукупність знань про норми й правила ведення комунікації.

Ключові слова: компетентність; професійне спілкування; магістр медицини; комунікативна взаємодія; навчальний процес.

Introduction. Reforming the system of higher professional education, improving the training process of medical specialists, involves the training of highly qualified specialists who would be able to solve professional tasks quickly and adequately as well as carry out communication. Recent research in the field of providing medical education indicates the importance of not only mastering professional knowledge and skills, but also the ability to integrate them into practice in the process of communication with patients and colleagues. In this context, the problem of forming the

professional and communicative competence of medical students acquires special importance [17, p. 109].

Many scientific works of national and foreign scientists are devoted to the problem of the formation of professional and communicative competence (V. Bespalko, D. Godlevska, A. Dubakova, S. Petrushyna, J. Raven, A. Holiday, T. Kazanin, V. Kashnytskyi, Ye. Semenova, H. Trofimov, A. Shcherbov, etc.).

Communication is a specific form of interaction between people in the process of their cognitive and labor activities, to achieve mutual understanding among themselves, that means the transfer and acquisition

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of knowledge and skills, which requires the ability to express oneself. Communicative competence of workers in the medical field unites many personal traits, characterized by readiness to perform communicatively oriented medical tasks. It is determined by the presence of knowledge (in the field of medicine in general, features of medical communication, methods of interaction with the patient), skills (informative, deontological, empathic perception and understanding of the patient), valuable attitude towards the patient and the profession and is manifested in mercy, sensitivity, attentiveness, tact, stress resistance, professional empathy, which contributes to the successful course of the treatment process, rehabilitation, and restoration of the patient's health [14, p. 114].

The aim of the article is to highlight the peculiarities of the professional and communicative competence formation for masters of medicine.

Theoretical framework. The development of communicative competence is one of the most important components of a doctor's successful activity, which serves as a guarantee of their further personal and professional development. The professional and communicative competence of future masters of medicine involves a positive attitude towards the profession, inclination and interest in it, the desire to improve one's training, to satisfy material and spiritual needs (humanity, diligence, honesty, sensitivity, patriotism), which are realized within the limits of one's profession [12].

A sufficient level of communicative culture ensures effective and high-quality interaction at the "doctor-patient" stage, as well as when communicating with colleagues, junior medical staff and relatives of patients [1, p. 67]. The formation of this competence in a specialist indicates his theoretical and practical readiness to carry out effective professional activities in a certain field, which requires establishing regular communicative contacts with other employees. It is important for masters of medicine to gain professional and communicative competence, which includes a complex of professional and communicative abilities and skills, which is the basis of this mastery.

Effective "doctor-patient" communication on the part of the patient allows him to understand the specifics of the disease better, to establish certain cause-and-effect relationships that could lead to this pathology, and to formulate sufficient compliance at the stage of treatment and prevention of further development of the pathology. However, there are certain difficulties in the interaction between the doctor and the patient, which do not depend on any of the parties at the time of

communication: 1) growing demands from the population as a result of increasing their medical literacy and the general level of education; 2) the formation of a low trust level for the medical professionals in the mass media and the Internet, which forces the doctor to convince the patient of the expediency and effectiveness of the prescribed treatment; 3) increase in the volume of bureaucratic procedures; 4) low willingness of the population to take responsibility for their health. For both parties, effective communication helps to solve a number of problems among the participants of the conversation, ensures the achievement of communication goals and leads to the establishment of mutual understanding with optimal costs [4, 15, 16]. Thus, N. Kasevych refers to professional and communicative qualities such as professional erudition, observation, ability to comprehend diagnostic and therapeutic manipulations, tact and prudence logically. He attributes to moral values such traits as tolerance, sensitivity, politeness, friendliness, compassion, benevolence; whereas the communication skills are the ability to communicate with patients, the patient's relatives, colleagues, subordinates and administration [6, p. 19].

Insufficient medical communication skills are the main factor that leads to dissatisfaction of the patient and his relatives with the treatment and vice versa, numerous studies indicate the dependence of the effectiveness of the treatment on fruitful communication with the patient. Effective mastery of communication skills also contributes to improving the quality of life of doctors themselves, their resistance to professional stress, and reduces professional "burnout". Patients rarely complain about such doctors, they are less likely to accuse them of insufficiently effective treatment [7, 8, 10]. In the process of the doctor's activity communicative competence determines the efficiency of communication with patients, their relatives, colleagues, etc. This is the kind of communicative interaction that contributes to the successful solving of problems by the participants of communication; ensures the achievement of communication goals with optimal costs and leads to the achievement of mutual understanding between communication partners [3, p. 43].

The high degree of interest in the problems of communicative competence among researchers is due to the replacement of the guardian model of interaction between the doctor and the patient by a partnership model and the pace of modern life. A patient's appointment with a doctor is limited by time, so the doctor's ability to properly structure a consultation is especially valuable. On the one hand, the patient must feel the

attention and interest of the doctor, on the other hand, it is necessary to use the appointment time as efficiently as possible.

Mastery of the art of speech is an important condition for successful influence on patients, a powerful means of disease prevention and treatment. Yu. Vilenskyi considers the basis of language contacts between a doctor and a patient, components of the high culture of speech among medical workers, to be the subtle psychological approach of the doctor, sensitivity and attention to a specific patient, individualization of linguistic influences that must be balanced and precisely addressed to a specific patient, immediate consideration of the patient's psychological reaction to any element of the doctor's speech "flow" [8, p. 119].

Thus, the results of the research of N. Ryndina [11] showed that if the patient is allowed to express himself fully during the appointment and does not interrupt him, it will take about one and a half minutes. This will not significantly affect the appointment time, but it will allow the patient to feel respect for himself and to form a friendship with the doctor. Taking into account that communication skills are established during the period of study at a higher educational institution, there is a need for its formation at a sufficient level in the process of communication with patients, colleagues, teachers in classes, industrial practice, clinical conferences, etc. In the future, this will allow doctors to improve their skills and abilities in the process of independent communication with patients, regardless of the psychological characteristics of the individual, age, level of education, professional affiliation.

Communicative competence is considered as a set of knowledge about communication in various conditions and with different communicators, as well as the ability to use them effectively in specific communication in the role of addresser and addressee. The formation of this quality in future doctors requires the possession of speech skills and abilities necessary for communication, a set of knowledge about the norms and rules of communication [9, p. 51]. It should be noted that nowadays medical specialists are required to possess not only professional competence, which is directly related to the subject of their own work, but also the presence of a high level of development of communicative competence, which, due to the further development of the information society, occupies a place no less important than professional preparation [13, p. 294].

Therefore, communicative competence is one of the most important factors in the successful professional activity of a doctor, which is manifested in: a positive

direction of interaction and the absence of a reaction of ignoring; a high level of empathy and self-esteem; treating another person as a value, as an active participant in interaction.

The doctor's communicative competence includes the ability to "read" and decipher human behavior i.e. to notice the slightest changes in the patient's behavior by eye movements, gestures, expressions; analyze a person's external behavior; to change one's own communication system in connection with changes in the expressive behavior of the patient. All this is particularly important in the professional activity of a doctor, and it should be taught to students using a system of exercises aimed at mastering complex communication skills that are part of communicative competence.

We consider the professional and communicative competence for future masters of medicine as a complex personal and professional quality that ensures integral professional and communicative medical activity both in the world of medicine and in the world of people. In our opinion, the professional and communicative competence of future doctors includes professional and special knowledge, abilities, skills; the ability to function in a society taking into account the positions of other people; the ability to enter into communication in order to be understood; the ability to speak the language of constructive dialogue fluently; the ability to correctly and easily formulate a professional opinion and social position, personal self-expression of a medical worker. Future doctors will be able to achieve this in the process of studying humanitarian subjects. Since a doctor is a specialist who constantly works directly with a person, he must have a high level of training in these disciplines, which in the process of his study form a thinking, moral, humane, conscious person. It is humanitarian training that influences the formation of the outlook of future masters of medicine, which is used to understand the world. In this aspect it is important to pay attention to the development of communication skills, which will allow motivated use of language tools to achieve the results predicted by medical students and related to their professional activities. The educational process of this cycle involves the assimilation of scientific knowledge about a society, a man, his nature, the possibilities of his development and self-development, the place and role of the individual in the society, and also affects the formation of key competencies of future specialists [1]. The study of humanitarian disciplines is based on the humanization of the educational process, solving educational tasks, which provides meaningful

potential in the formation of a developed, harmonious personality. In turn, this ensures the generation of basic value and outlook guidelines, teaches to think and act constructively and creatively. Intellectual, aesthetic, ethical development of the personality, raising the level of education of the future specialist is an important condition for his professional self-determination in further work. Without certain philosophical, ethical, political, and cultural concepts, it is impossible to comprehend reality in the interaction of all its parties and connections deeply, in the unity of all its laws and contradictions, without mastering the literary language, it is impossible to form a competitive specialist who would meet the requirements of the modern labor market. Accordingly, the importance and role of educational subjects that contribute to the formation of a student's worldview orientation, his awareness of his place and role in society, the purpose and meaning of social and personal activity, responsibility for his actions in choosing the forms and directions of his activity is growing [2, p. 9]. The basis of the formation of the doctor's profession, its defining feature is morality, humanity. The paradigm of the problematic circle of issues of the medical profession is reflected in the relationship between the doctor and the patient and his relatives, a holistic approach to the prevention and treatment of diseases, in issues of medical law, etc. [8, p. 28].

A doctor's professionalism is determined not only by how well he knows the etiology and pathogenesis of diseases, methods of their diagnosis and treatment, but also by his ability to consult, that is, communicate, teach, advise. The doctor's ability to communicate determines his relationship with the patient as only after gaining the patient's trust, you can collect a detailed anamnesis; explain what is required of him in the treatment process. An experienced specialist presents his thoughts in such a way that they are understandable, do not cause any anxiety, and can inspire trust.

An important aspect of the doctor's work is the ability to listen to the interlocutor, which includes perception of information, empathy for the interlocutor, analysis (Listen to the patient carefully without interrupting. If necessary, make suggestive remarks: "You are upset about something today", "It seems that you are upset because of your husband", "It seems that something serious has happened", "You seem to want to say that...").

A master of medicine must possess such qualities as the ability to empathize, care, respect for the patient, concern for the fate of the patient, compliance with

medical secrecy, competence, responsibility, trust in the patient, sensitivity, insight, conscientiousness. It is designed to be guided by the principles of communication i.e. accessibility, non-abuse of terms, clear instructions, avoidance of ambiguities, without promises of the impossible, meaningful decisions of the patient, checking the correctness of understanding, repetition regarding understanding, not leaving unresolved questions, referring the patient to a specialist. If the patient trusts his doctor, without doubting the correctness of the diagnosis and the adequacy of the therapy, then he will fulfill the appointment and undergo all the necessary diagnostic and therapeutic procedures. In the absence of psychological contact, the patient may not adhere to medical recommendations and prescriptions, and will engage in self-medication.

Communicative competence implies not only the presence of certain psychological knowledge (e.g., about personality types; ways of experiencing and responding to stress in different people depending on the type of temperament; the specifics of the relationship between body types and features of the mental makeup of the individual, etc.), but also the formation of some special skills, such as the ability to establish contact, listen, master non-verbal communication, build a conversation, formulate questions. It is also important for the doctor to have control over his own emotions, the ability to maintain confidence, control his reactions and behavior in general. Adequate communication involves a correct understanding of the patient and an appropriate response to his behavior. No matter what state of mind the patient is in, whether he feels anger or sadness, concern, anxiety or despair, the doctor must be able to interact with him, build relationships adequately, trying to solve professional tasks.

In this regard, a professionally significant quality of a medical specialist is communicative tolerance (as one of the aspects of communicative competence) – patience, leniency, etc. Communicative tolerance shows the extent to which the doctor tolerates subjectively undesirable, unacceptable for him individual characteristics of patients, negative qualities, reprehensible actions, habits, other people's behavior styles and thinking stereotypes. The patient can cause different feelings, be liked or disliked, can be pleasant or unpleasant to the doctor, but in any case, the psychological preparation of the latter should help to cope with the situation, prevent conflict or the emergence of informal relationships, when instead of the role structure "doctor - patient" arise relationships of friendship, psychological closeness, dependence,

love. Communicative competence in the professional activity of a doctor means the ability not only to build psychologically correct relations with the patient, but also the ability to remain within the framework of the professional role in the process of these relations.

Conclusions and Prospects for Research. Communicative competence of a doctor is a professionally significant quality. The profession of a doctor involves intense and long-term communication with patients, their relatives, medical personnel i.e. from nurses and matrons to chief doctors and heads of medical insti-

tutions. The professional success of a doctor largely depends on the ability to communicate, establish and develop relationships with people. A good psychological contact with the patient helps to collect anamnesis more accurately, to get a more complete and deep understanding of the patient. The ability to communicate, or communicative competence, ensures mutual understanding, trust in relationships, and efficiency in solving tasks. We see the prospect of further research in the need to reveal the structure of professional and communicative competence of future masters of medicine.

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