UDC 378

DOI: https://doi.org/10.24919/2308-4634.2024.318748

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MEDICAL COMMUNICATION IN THE DOCTOR'S PROFESSION

The article is focused on the study of effective methods and approaches in doctor-patient communication. Nowadays communication is a fundamental need that is realized by society day by day. The article presents the theoretical aspects of the communicative competence of future doctors' formation during their studies at higher medical institutions. The terms "communication", "medical communication", "competence" are substantiated and the main approaches to high-quality communication during work with the patient are considered. The use of a consultative model in doctor-patient communication is proposed. The role of social sciences and theoretical disciplines in the formation of medical communication competences and skills is investigated. The main varieties of professional language are characterized. The concept of "competent specialist" is analyzed. The key competencies which have a positive impact on medical communication have been identified.

It is determined that a patient-oriented approach controls personal health. It is established that the qualitative formation of communicative competences and skills of future doctors is a necessary link in professional training during their studies at medical universities. The influence of the intonation and speech culture of the doctor on the patient's condition during treatment and recovery is described. The main reasons for the growth of demand are allocated and the modern role of telemedicine in society development is considered. It is concluded that communication skills should not be used in isolation, but should be implemented during patient consultation in accordance with the goal. After all, successful communication with the patient regarding his state of health is the primary step towards effective treatment. Therefore, doctors should learn, develop and maintain communication skills throughout their professional activities.

Keywords: medical communication; effective communication approaches; patient; competence; speech; future doctors; higher medical education institutions.

Ref. 10.

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МЕДИЧНА КОМУНІКАЦІЯ У ПРОФЕСІЇ ЛІКАРЯ

Стаття присвячена дослідженню ефективних методів і підходів у комунікації лікаря з пацієнтом. Комунікація у сучасному світі— це фундаментальна потреба яка реалізовується суспільством щодня. У статті представлено теоретичні аспекти формування комунікативної компетентності майбутніх лікарів під час навчання у закладах вищої медичної освіти України. Обгрунтовано поняття "комунікація", "медична комунікація", "компетенція" та розглянуто основні підходи якісної комунікації у роботі з пацієнтом. Запропоновано використання дорадчої моделі комунікації у спілкуванні лікаря з пацієнтом. Досліджено роль соціальних наук та теоретичних дисциплін у формуванні вмінь і навичок медичної комунікації. Охарактеризовано основні різновиди професійної мови. Проаналізовано поняття "компетентний фахівець". Виявлено ключові компетенції, необхідні у сфері медичної комунікації.

Визначено що пацієнтоорієнтований підхід дає більше контролю над власним здоров'ям. Встановлено, що якісне формування комунікативних вмінь та навичок майбутніх лікарів є необхідною ланкою їхньої професійної підготовки

під час навчання у закладах вищої медичної освіти. Описано вплив інтонації та культури мовлення лікаря на стан пацієнта під час лікування і відновлення. Виокремлено основні причини зростання попиту та розглянуто роль телемедицини на сучасному етапі розвитку суспільства. Зроблено висновок, що комунікативні навички не варто використовувати ізольовано, а потрібно реалізовувати під час консультації пацієнта відповідно до мети. Адже вдала комунікація з пацієнтом стосовно його стану здоров'я є первинним кроком до ефективного лікування. Саме тому лікарі мають навчатися, розвивати та підтримувати комунікативні навички протягом усієї професійної діяльності.

Ключові слова: медична комунікація; ефективні підходи комунікації; пацієнт; компетенція; мовленням; майбутні лікарі; вищі медичні навчальні заклади.

ntroduction. The aim of humanization of higher education marks the comprehensive development of future doctors' personality and involves not only the formation of such moral and ethical qualities as honesty, politeness, sociability, responsibility, humanity, kindness, professionalism, integrity, self-interest, but attaches special importance to the role of professional communication in the minds of global integration processes which exist in modern society. In the branch standard of higher education of Ukraine, the priority of professional education of specialists indicates the formation of communicative knowledge, skills and abilities. In medical practise, professional communication is very important because it ensures the effective transmission of information, cooperation with the team and the formation of trust with the patient, which is necessary for effective and rapid delivery of care. Mastering professional communication skills while studying at higher medical education institutions is important for the successful professional activity of future doctors [3].

Professional communication skills help a lot in the professional activity and interaction of the doctor with the authorities, team, victims and their relatives, etc. Thus, the Polish scientist Borowczyk defines the concept of "medical communication" as the process of communication between medical workers (doctors, paramedics, physical therapists, nurses, etc.) and patients or victims (and their relatives), as well as communication between medical workers (in medical teams) that occurs within the framework of medical relations, that is, medical or preventive procedures [9, 4].

The primary goal of medical communication is to act for the benefit of the patient, that is, to support him and ensure the process of treatment (in case of disease) and prevention (maintaining health and preventing diseases through vaccination and proper lifestyle). The use of communicative competencies by the doctor are considered as building relationships and conducting conversations applying basic communication skills. On the one hand, they are motivated, by relevant, generally recognized medical knowledge, on the other hand, by respect for the subjectivity of the victim [10, 45].

Review of sources. Medical communication in the doctor's profession is the subject of research of many scientists. The main problems of medical communication were studied by I. Borovyk, N. Korylchuk and V. Tvorko. The main protocols of doctor-patient communication were investigated by V. Marichereda, O. Ro-

hachevsky, Ye. Opria, Yu. Belozertseva-Baranova. The psychological aspect in doctor-patient communication has a fundamental role and Yu. Kolisnyk-Humeniuk investigated it. The communicative culture of future physician was the topic of research of O. Kolodnytska. Such scientists as O. Shanina and O. Sikorska mention about communicative barriers, which exist in doctorpatient communication.

The purpose of the article is a comprehensive analysis of the concept of "medical communication", the definition of effective methods and approaches of communication with patients.

Presentation of the material. Knowledge and research methodology derived from the social sciences and humanities are integral elements of medical communication. Such disciplines as "English for Specific Purposes", "Sociology", "Pedagogy", "Philosophy", "Psychology" etc., enrich medical communication with knowledge about a human as a person, essence (with all emotions, motivations, beliefs, needs, ideas, ways of thinking and features of speech), as well as part of the society in which it functions. Social sciences provide knowledge to future doctors about the interaction between individuals and groups, attitudes towards health, health-preserving competencies that are observed among members of a certain social group, and even wider – society [10].

Research on the practice of teaching medical communication requires a strategy that is beyond disciplinary divisions. Therefore, it is necessary to develop an integral approach to the patient, the aim of which is effective treatment and rehabilitation. As in other areas of medical practice, good communication requires the doctor, on the one hand, to go beyond detailed knowledge of a specific clinical case and on the other hand, to have a sincere interest and empathy for the patient. The same behavior of the doctor in relations with different patients, at different stages of treatment or at different moments in their lives can affect patients differently depending on their perception. The doctor's willingness to recognize this technique (the patient's reaction) and the ability to understand each other requires sensitivity and the art of communication. This approach to work needs to be formed and maintained during higher education.

Exploring the features of professional speech, O. Krsek identifies the following basic categories of this concept: professional communication (interpersonal, group); dialogue, monologue, polylog, communi-

cation, speech activity (specialized use of speech in the processes of interaction between people); speech act (purposeful speech action); illocutive force (the embodiment in the statement, which occurs in the process of the speech act, of a certain communicative goal, giving the statement a specific direction); performative (statement, equivalent to action, act); ascertained (type of message stating the fact of objective reality); language deviation (type of communication failure caused by insufficient language competence of participants) [7, 47].

As for the varieties of medical professional language, the following are distinguished: the language of medicine, medical spoken language, the language of medical documentation, the language of medical advertising. The basis of the language of medicine is medical terminology, general scientific terms that are used mainly for the design of scientific text are used in written and oral communication (textbook, medical dictionary, scientific article which describes one of the medical topic, patent, instructions for the medical use of the drug, scientific report, lecture, scientific discussion on a medical topic, etc. The language of medicine is used in intraprofessional and interprofessional written and oral communication. Medical colloquial language is an official, complete, standard medical terms, "semi-official" terms (abbreviated terms, additional, non-standard terms), "unofficial" terms (professionalism, professional jargon, etc.). The language of medical records is a codified variety of the professional language of medical specialists serving the medical industry. The use of special medical terminology in documents (medical examination protocol, outpatient patient card, advisory opinion, prescription, medical certificate, etc.) is characteristic. The language of medical advertising is a secondary type of medical professional language, refers to intraprofessional communication, and is used to inform society about the development of the medical industry [6, 187].

The activity of a specialist, in particular mastering of professional qualities, consists of specific actions and operations. Performing these actions, reflecting on their implementation, realizing their necessity and assessing their importance for themselves or society, the specialist thereby develops competence in a particular life sphere. So, competence (lat. competentia – consistency, proportionality of parts of the whole) is understood by teachers as specially structured (organized) sets of knowledge, skills, practices and attitudes acquired in the learning process. They allow a person to determine, that is, identify and solve, regardless of the context (situation), problems characteristic of a certain field of activity [5, 17].

A competent specialist, in particular a doctor, applies in his work exactly those strategies that seem to be the most productive in the process of fulfilling the tasks. According to the "New Explanatory Dictionary

of the Ukrainian Language", the term "competent" is defined as having sufficient knowledge in any field; with something well aware; intelligent; which is based on knowledge; qualified. Interpretation of this term shows the qualities of a person, the basis of which is knowledge, awareness, experience of social and professional activity, possession of a certain competence. Therefore, competence is explained as a certain norm, the achievement of which allows you to solve the task effectively, and competence – as an assessment of the achievement or failure to achieve this norm [1, 250].

The European medical community identifies a number of key competencies that are necessary in the field of medical communications. Thus, communication skills contribute not only to positively conduct and complete communication, but also to cope with emotions, make joint decisions, prove themselves, etc.

In modern military realities, the Ukrainian health care system focuses on the doctor-patient relationship. Under constant stress, communicative competence is one of the basic skills that a doctor should possess along with professionalism, scientific activity and health promotion.

It is worth noting that the emotional background that accompanies the patient in the process of consultation and treatment contributes to the speed of recovery and affects the patient's satisfaction with medical services. Nowadays the patient is an active recipient who is able to object to the doctor and defend his own views on treatment. Therefore, the excellent communication skills that the doctor uses during the consultation allows the patient to feel like a participant in the discussion regarding his own health and also contributes to compliance with all the recommendations of the specialist.

Scientist A. Serdiuk describes the communicative competence of a doctor as presence of the following basic communicative skills or abilities:

- to establish contact with the interlocutor;
- to keep up the conversation;
- to build statements in different styles and genres of speech;
 - to convince, prove, capture ideas, plans;
 - to conduct a conversation, describe;
 - to know medical terminology;
- to carry out professional communication using appropriate verbal and non-verbal language means [8].

In doctor-patient communication, a patient-centered approach is often used, based on research in medical sociology and psychology of patient's awareness and acceptance of the disease. The use of an empathetic approach covers medical advice and medical support for the patient. An effective approach is also considered to be a consultative approach, where the patient's freedom of choice is ensured at all stages of communication and the greatest interest is shown in an objective assessment of the patient's health status.

Therefore, high-quality training of future doctors for professional and communicative interaction at universities is a necessary link to their occupational training. An important aspect of preparing future doctors for professional communication is focused on the formation of students' culture of communication during communicative interaction, because this is an integral part of the professional activity of the doctor: the more accomplished culture of professional communication the future doctor has the higher is the level of his qualification.

The culture of speech is the basis on which the doctor's behavior is formed. All the efforts of medical specialist to help the patient, can be negated by the dishonest, familiar greeting, inattention, tactlessness during the survey and communication. The patient can be pushed away, even the intonation, tempo and pitch of the voice can scare. Intonation can change the meaning of the same word: it can either encourage or cross out all expectations. Moreover, the intonation of the doctor's speech should be consistent with his facial expression and gestures. For the patient, all this is a source of information, which then is analyzed and concluded (trust the doctor or not). The principle "do no harm" requires the doctor to be especially careful and tactful in choosing words as the patient expects tact, compassion and understanding from the doctor, because he is searching for qualified help and consultation [4, 13].

So, we consider the peculiarities of preparing future doctors for professional communication are:

- the purposeful formation of communicative skills and abilities;
- focus on the formation of students' speech culture during communicative interaction;
- students' focus on mastering the norms of professionally-oriented communication;
- communicative-oriented knowledge of a foreign language in professionally significant situations of intercultural professional communication;
- use of innovative forms and methods of training during classes.

The development of engineering and technical sciences, primarily informatics and telecommunications, as well as biomedical engineering to a certain extent affects medical communication. The fact that new communication channels are being created and new tools (e.g. collaboration platforms and automation via chatbots, video conferencing) are being used to communicate with patients means that medical practices supported by technological advances need to be adapted to new communication realities. Important reasons for the growth in demand for telemedicine include:

- increasing the number of patients requiring ongoing online health monitoring;

- insufficient number of medical personnel due to the martial law of Ukraine;
- consulting a family doctor by phone, which helps to save money, etc.

It should be noted that in addition to applications and messengers in the field of health care, the use of artificial intelligence is of great importance. Thus, digital technologies open up new opportunities in future medicine where high technologies, professionalism and patient orientation take place. This will serve as new effective channels of communication.

Conclusion. Further research requires the search for effective methods of teaching professional and communicative skills and knowledge of future doctors while studying various disciplines, both communicatively oriented and professional. When studying the latter, it is important to consider ethical aspects related to the purpose of using professional medical communication, which includes responsibility and respect for the patient. Successful communication with the patient regarding his state of health is the primary step towards effective treatment.

We perceive prospects for further research in considering models of medical communication involving nurses and rehabilitation specialists.

REFERENCES

- 1. Velykyi tlumachnyi slovnyk ukrainskoi movy [Big explanatory dictionary of the Ukrainian language]. Compiler and editor-in-chief V.T. Busel. Kyiv, 2005. 1728 p. [in Ukrainian].
- 2. Honcharenko, S. (1997). Ukrainskyi pedahohichnyi slovnyk [Ukrainian pedagogical dictionary]. Kyiv, 376 p. [in Ukrainian].
- 3. Skladovi haluzevykh standartiv vyshchoi osvity napriamu pidhotovky 1101 Medytsyna osvitno-kvalifikatsiinoho rivnia Spetsialist za spetsialnostiamy 7.1101.01 Likuvalna sprava, 7.1101.04 Pediatriia, 7.1101.05 Medyko-profilaktychna sprava [Components of the standards of higher education in the field of 1101 Medicine of the educational and qualification level Specialist of 7.1101.01 Medical care, 7.1101.04 Pediatrics, 7.1101.05 Medical and preventive care specialties]. Kyiv, 405 p. [in Ukrainian].
- 4. Zolotukhin, H.O., Lytvynenko, N.P. & Misnyk, N.V. (2002). Fakhova mova medyka [Professional language of doctor]. *Textbook*. Kyiv, 392 p. [in Ukrainian].
- 5. Ovcharuk, O.V. (2004) Kompetentnisnyi pidkhid u suchasnii osviti: svitovyi dosvid ta ukrainski perspektyvy [Competency-based approach in modern education: world experience and Ukrainian perspectives]. Kyiv, 112 p. [in Ukrainian].
- 6. Kosenko, Yu.V. (2011). Osnovy teorii movnoi komunikatsii [Fundamentals of the theory of linguistic communication]. *Textbook*. Sumy, 187 p. [in Ukrainian].
- 7. Krsek, O.Ye. (2006). Formuvannia profesiinoi movlennievoi kultury u studentiv medychnykh universytetiv yak komponenty yikh dukhovnosti [Formation of professional speech culture among medical university students as a component of their spirituality]. *Candidate's thesis*. Volodymyr

СУЧАСНИЙ СТАН ВИКЛАДАННЯ ПРОФЕСІЙНО-ОРІЄНТОВАНОЇ ІНОЗЕМНОЇ МОВИ НА ВЕТЕРИНАРНИХ ПРОГРАМАХ У КРАЇНАХ АЗІЇ, АФРИКИ ТА ОКЕАНІЇ

Dahl East Ukrainian National University. Luhansk, 243 p. [in Ukrainian].

- 8. Serdiuk, A.M. & Mintser, O.P. (2007). Vyznachennia kompetentsii v otsintsi yakosti pidhotovky fakhivtsiv u systemi bezperervnoho profesiinoho rozvytku likariv [Defining competence in assessing the quality of specialist training in the system of continuous professional development of doctors]. Ukraine. Health of the Nation. No. 1. pp. 118–123. [in Ukrainian].
- 9. Borowczyk, M., Chojnacka-Kuraś, M., Doroszewska, A., Jankowska, A.K., Kowalski, Z., Libura, M., Małecki, Ł., Stalmach-Przygoda, A. (2021). Rekomendacje Polskiego Towarzystwa Komunikacji Medycznej dotyczące kształcenia kompetencji komunikacyjnych na kierunkach lekarskim i

lekarsko-dentystycznym [Recommendations of the Polish Society of Medical Communication on the Development of Communication Competencies in the Medical and Dental Fields]. Available at: https://komunikacjamedyczna.pl/rekomendacje-polskiego-towarzystwa-komunikacji-medycznej-dot-ksztalcenia-kompetencji-komunikacyjnych/ (Accessed 20 Dec. 2023). pp. 4–10. [in Polish].

10. Doroszewska, A., Kołodziejek, A. (2021). Motywowanie pacjentów do przestrzegania zaleceń [Motivation of patients to follow recommendations]. *Komunikowanie się lekarza i pacjenta w medycynie rodzinnej*. Wrocław, pp. 167–176. [in Polish].

Стаття надійшла до редакції 23.12.2024

УДК 378.147:81.243:619

DOI: https://doi.org/10.24919/2308-4634.2024.320568

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СУЧАСНИЙ СТАН ВИКЛАДАННЯ ПРОФЕСІЙНО-ОРІЄНТОВАНОЇ ІНОЗЕМНОЇ МОВИ НА ВЕТЕРИНАРНИХ ПРОГРАМАХ У КРАЇНАХ АЗІЇ, АФРИКИ ТА ОКЕАНІЇ

В умовах сучасного світу, де ветеринарна медицина активно розвивається і стає все більш міжнародною, знання іноземної мови для ветеринарів набуває надзвичайної важливості. Спеціалісти цієї галузі стикаються з необхідністю читання наукових публікацій, участі у міжнародних конференціях, спілкування з колегами з інших країн та використання сучасних технологій, що часто представлені лише англійською або іншими мовами. Ветеринарна медицина в Азії та Африці відіграє критично важливу роль у забезпеченні здоров'я тварин, охороні екосистем і підтримці продовольчої безпеки. Стаття є продовженням дослідження, опублікованого у журналі "Молодь і ринок" № 11/231 (2024). З цією метою ми створили Гугл форму із запитаннями стосовно способів та методів викладання іноземних мов на ветеринарних програмах, технічних і онлайн засобів, які викладачі використовують у навчанні. Цю форму ми запропонували викладачам, студентам та випускникам ветеринарних факультетів, які її заповнивши, надсилали нам відповіді. Результати дослідження висвітлено у статті.

Ключові слова: професійно-орієнтована іноземна мова; ветеринарні програми; освітній процес; навчально-методичний комплекс; ветеринарний факультет.

Табл. 1. Літ. 37.

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THE CURRENT STATE OF PROFESSIONALLY ORIENTED FOREIGN LANGUAGE TEACHING IN VETERINARY PROGRAMS IN THE COUNTRIES OF ASIA, AFRICA AND OCEANIA

In the modern world, where veterinary medicine is actively developing and becoming more and more international, knowledge of a foreign language for veterinarians is extremely important. Specialists in this field need to read scientific publications, participate in international conferences, communicate with colleagues from other countries, and use modern technologies often presented only in English or other languages. Veterinary medicine in Asia and Africa is critical in ensuring animal health, protecting ecosystems, and maintaining food security. The article is a continuation of the research published in the journal "Youth and market" No. 11/231 (2024). For this purpose, we created a Google form with questions about how and methods of teaching foreign languages in veterinary programs and technical and online tools teachers use in education. We sent this form to teachers, students, and graduates of veterinary faculties, who filled it out and sent us their answers. The source base of our research consists of curricula of veterinary faculties, results of a survey of teachers, results of a survey of students and graduates, and information on the websites of universities, faculties, and departments. A specialist in veterinary medicine and any other specialty must know the professional vocabulary and skillfully use a foreign language. The modern professions market requires such competencies from graduates of higher education institutions. That is why more knowledge and skills are required from