DOI: https://doi.org/10.32626/2309-9763.2021-31-398-408 UDC 378.147.016-057.875:61]:811

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MODEL OF THE FORMATION OF INTERCULTURAL COMPETENCE OF MEDICAL STUDENTS IN FOREIGN LANGUAGE CLASSES BY MEANS OF ACTIVE LEARNING TECHNOLOGIES

Abstract. It has been substantiated that a number of economic and geopolitical factors as the current humanitarian situation, the spread of infections beyond the borders of a single country, the growth of exports of medical services and medical tourism in Ukraine pose a specific task, namely, training of a specialist who doesn't have only a high level of professional training but is also ready for fruitful activity in the conditions of a multicultural world space. The formation of this kind of professionalism of future doctors is becoming one of the primary tasks of a modern medical university. In this regard, a foreign language lesson is an integral part in the general theoretical model of the formation of intercultural competence. It is proposed that the intercultural competence of medical students should be considered as the ability to apply knowledge, skills, and abilities for fruitful professional activity, in order to achieve effective interaction with colleagues and patients of other cultures based on the principles of mutual respect and understanding. It has been established that the theoretical model of the formation of intercultural competence of students of a medical university in foreign language classes by means of active learning technologies contains the following blocks: target (focused on a social order, namely, on the need for medical specialists capable of working in a multicultural environment); content-organizational (content of competence, main directions of pedagogical activity and methodological principles of formation of intercultural competence); technological (pedagogical technologies for the formation of intercultural competence of students in a foreign language lesson, namely, active learning technologies; technologies for organizing students' independent work; technologies for conducting extracurricular thematic activities), evaluative (diagnostic criteria for the formation of the components of intercultural competence) and corrective (the result of modelling is exposed to analysis, which allows its correction in the process of pedagogical activity).

Keywords: professional training; intercultural competence; active learning technologies; methodological principles.

1. INTRODUCTION

Rapid progressive changes in the socio-cultural space of a modern person entail changes in the educational environment and stimulate teachers to continuous improvement and development. Nevertheless, keeping up with the times, it is important not to lose those value orientations that have been laid for centuries as the basis of educational policy in our country. Both in the field of training medical specialists and in all other spheres of professional activity, the formation of cultural, socio-cultural and intercultural competences should remain one of the priority areas of education.

It should be mentioned that the formation of intercultural competence of students in foreign language classes at a medical university is a complex multi-level process. It is important that the development of a theoretical model for the formation of intercultural competence of students of a medical university in foreign language classes by means of active learning technologies is focused, first of all, on the final product of pedagogical activity, which in this case is a highly qualified medical specialist. At the same time, the global processes of integration and globalization, which have slowed down in modern society in various areas of life, in the medical field, on the contrary, are accelerating and, thereby, are causing an increase in the need for medical specialists who are not only fluent in foreign languages but are able to carry out professional activities in a foreign language.

The study of a foreign language and, as a result, a lesson in a foreign language, in particular, English, offers the most favorable environment and opportunities for the formation of intercultural competence of students of a medical university. At the moment, English falls into a special sociolinguistic category and is used as a lingua franca, that is, as a means of interethnic communication in certain areas of interaction. From a functional point of view, the use of English in medical practice is the key to constant professional growth and not only due to expanded access to information. Therefore, we can say that knowledge of the English language, combined with possession of intercultural competence, significantly increases the effectiveness of medical practice in conditions a multicultural society, doubles the competitiveness of a medical specialist in the labor market and provides an opportunity for the most complete implementation. An analysis of the labor market, carried out by the Agency for Strategic Initiatives commissioned by the government, shows that such overprofessional skills as multilingualism and multiculturalism will become necessary for most specialties in the field of medicine, which confirms the existence of a social order and the need for further theoretical and practical developments in the field of intercultural competence.

Research overview. Such scientists as V. Afanasyev, V. Bespalko, A. Verbitsky, K. Godel, V.Gert, A.Dakhin, A.Novikov studied the problems of pedagogical modelling. According to their views, with creation of a model makes it possible to display a holistic picture of the process being modeled, to present its purpose, objectives, content, subjects and objects, as well as the conditions, principles, forms and technologies of organizing the educational process required to achieve a certain result» [2]. In fact, an artificially created object can act as a model, for example, in the form of a diagram, which reproduces the structure, properties and relationships between the elements of the object or phenomenon under study. In pedagogical practice, the creation of a model can cover different levels of the educational system, while theoretical models of the organization of the educational process are of great

importance, which include the theoretical «model of the formation of intercultural competence of medical students by means of active technologies» [2]. «Pedagogical modeling of the educational process helps to establish educational pedagogical interaction, to find new ways of enhancing educational and cognitive activity and means of implementing the personal-activity approach to the organization of training» [3, p. 140].

Pedagogical modeling fell into the sphere of interests of such researchers as L.Grebenkina, E.Gusinsky, G.Selevko, etc. In their works, they point to such an important characteristic of the model as flexibility, implying the possibility of its adjustment and improvement. However, one should also take into account the principle of uncertainty in the interaction of social and humanitarian systems, which is described in his works by E. Gusinsky. The researcher argues that «the development of the social and humanitarian system cannot be predicted in detail» [1].

2. AIM AND TASKS

Purpose of our study is to develop, substantiate a model for the formation of intercultural competence of students of a medical university in foreign language classes on the basis of principles on which the educational process will be built within the framework of the developed model.

The **main task** is tohighlight specific principles of the formation of intercultural competence of students of a medical university as the methodological basis of this theoretical model.

3. RESEARCH METHODOLOGY

The methodological basis of the research was: philosophical and psychological-pedagogical provisions on the influence of social and social processes on the formation of theoretical and methodological foundations of professional training of medical specialists (I. Zimnyaya, N. Kuzmina, O. Lebedev, M. Lukyanova, A. Markova, J. Raven, O. Trinitatskaya, G. Trofimova, N. Khomsky, A. Khutorskoy, V. Yakunin and others).

The theoretical basis of the research was: scientific works on the theory of multicultural education (N. Almazova, R. Archakova, N. Baryshnikov, O. Leontovich, M.Bayram, M.Barrett, D.Diardoff, K.Knapp and others); research on the theory of intercultural communication (L. Porter, A. Sadokhin, A.Samovar, N.Yankina, M.Bennett and others); theoretical developments in the field of methods of teaching foreign languages (I. Bim, N. Galskova, I. Zimnyaya, R. Milrud, etc.); works on the socio-cultural and linguisti and cultural foundations of teaching foreign languages (E. Vereshchagin, V. Kostomarov, M. Fleming, etc.); research on the theory of the formation of intercultural competence (V. Apalkov, M. Garaeva, E. Malkova, M.Barrett and others); development of methods for assessing intercultural competence (B. Ruben, A. Fantini, D. Norris, etc.); developments in the field of application of active learning technologies (V. Bespalko, V. Guzeev, G. Selevko and etc.).

4. RESEARCH FINDINGS

Having analyzed the experience of pedagogical modeling, as well as based on the need to form the selected components of the intercultural competence of students of a medical university (axiological, affective, cognitive, communicative), we determine the principles on which the educational process will be built within the framework of the developed model. It is known that there are general didactic principles on which the teaching of a foreign language in a modern university is traditionally built (the principle of upbringing education, the principle of linking education with professional activity, the principle of conscious learning, the principle of creative activity, the principle of scientific character, etc.). However, one should also highlight specific principles of the formation of intercultural competence of students of a medical university, based on methodological research approaches:

- the principle of subjectivity (the formation of intercultural competence of a medical specialist as part of the systemic qualities of a person that determine the specificity of a person's external behavior, his attitude to the activities he performs, activity in the performance of activities, the desire to become a subject of activity, determination of ways to achieve it [4, p.95]);
- the principle of independent thinking (development of the ability to independently solve problems in different types of activity, training in the process of forming intercultural competence of students of a medical university should be aimed at developing thinking and cognitive perception, independence in interpreting the received medical professional information and the formation of self-improvement skills);
- the principle of identifying the levels of competence formation (the assessment of educational results is based on the analysis of the level of education achieved at a certain stage, so within the framework of the model for the formation of intercultural competence of students of a medical university, high, medium, low levels of competence are highlighted);
- the principle of recognizing the equality of people (within the framework of the axiological approach, in the development of technologies for the formation of intercultural competence, as well as in the selection of textual material;
- the principle of recognition of the equality of people should be taken into account;
 when implementing active and interactive technologies in the classroom, compliance with this principle is a prerequisite);
- the principle of pragmatism instead of disputes about the foundations of values, recognition of the equivalence of traditions and creativity, the equality of all philosophical views within the framework of a single humanistic system of values;
- the principle of dialogue instead of indifference and denial of each other (understanding that the key to resolving any conflict, any disputable situation is dialogue is the key to successful intercultural communication; the formation of appropriate views of a medical specialist is especially important);

- the principle of the value of knowledge for the practical activity of a specialist, in particular, a doctor (the formation of the axiological component of the intercultural competence of a student of a medical university is impossible without realizing the need to expand knowledge in various areas of professional activity, in particular, in the field of intercultural interaction);
- the principle of moral enrichment of the types of activity used as a means of activity (a lesson in a foreign language within the framework of the model of the formation of intercultural competence should not only expand the scientific picture of the world but also serve as a source of moral and personal enrichment, helping, through the formation of the student's values;
- the principle of cooperation in organizing and managing various types of activities (implementation of a foreign language lesson using active and interactive technologies implies teaching cooperation, the ability to work in a team, in large and small groups, which is also the key to effective communication);
- the principle of high motivation for any type of activity (the formation of intercultural competence of students of a medical university should be based on the possibility of updating the acquired knowledge of skills and abilities by mobilizing the creative and research activity of students and creating conditions close to the real act of intercultural interaction, as well as in the presence of interest and motivation students);
- the principle of mandatory effectiveness of each type of activity (each lesson in a foreign language using active learning technologies should be aimed at achieving a certain result, in particular, at the formation of intercultural interaction skills with patients of different cultural backgrounds;
- the principle of designing, constructing and creating a situation of formative activity (ensuring the effective organization of the process of forming intercultural competence of students of a medical university, identifying and developing active learning technologies for the formation of intercultural competence);
- the principle of the functionality of the educational environment (the educational environment should have such characteristics as variability, multifunctionality, focus on the needs of the student and promote the activation of cognitive activity);
- the principle of consistency (according to this principle, the formation of a student's system of knowledge, skills and abilities by establishing a relationship between the elements of the studied material is implied, which is achieved, for example, during the analysis of the proposed material or in the process of reflective activity when creating drawings and diagrams);
- the principle of self-development and adjustment («the possibility of diagnosing the functioning of the theoretical model of the formation of intercultural competence of medical students in foreign language classes, the possibility of correcting the components of the theoretical model within the framework of the goal, taking into account the empirical data obtained» [2, p. 172].

It should be noted that intercultural competence of a medical specialist is closely related to the reproduction of a value-oriented personality, capable and ready to apply their knowledge and skills in practical medical practice. Accordingly, the competence-based, axiological, personality-active, environmental and technological approaches were chosen as the methodological basis of this theoretical model. The theoretical model of the formation of

intercultural competence of students of a medical university in foreign language classes by means of active learning technologies includes (Fig.1, p. 8):

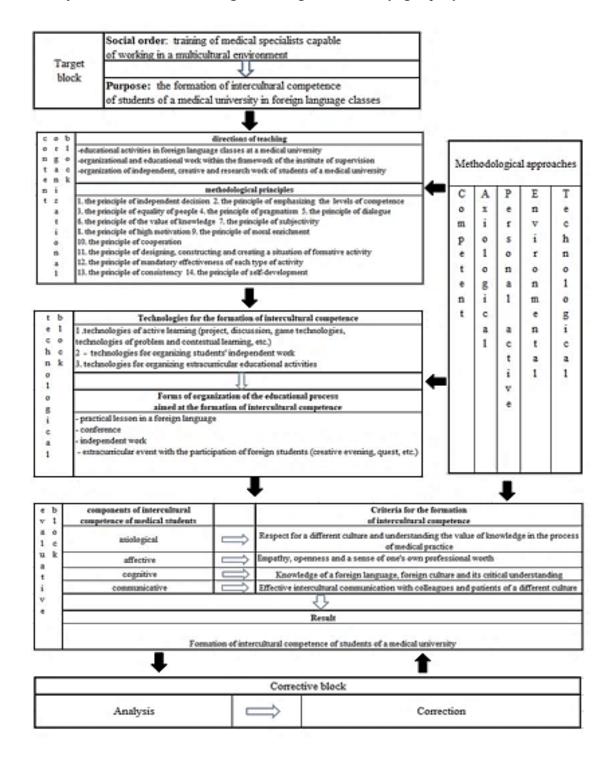


Fig. 1. Theoretical model of the formation of intercultural competence of medical students in foreign language classes by means of active learning technologies

1) target block; 2) content and organizational block; 3) technological block; 4) evaluative block; 5) corrective block. The social order for medical specialists who are ready and able to carry out effective professional activities in a multicultural society is displayed in the target block. The purpose of developing a theoretical model is the formation of intercultural competence of students of a medical university in foreign language classes by means of active learning technologies. The intercultural competence of a medical student reflects the totality of socio-cultural, professional and communication skills of intercultural interaction in the process of his professional medical activity.

The content-organizational block of the theoretical model being developed reflects the main directions of pedagogical activity on the formation of intercultural competence of medical students in foreign language classes. Highlighting the main directions of pedagogical activity, it is important to understand that, as many scientists note, ordinary classroom lessons are hardly prepared for work in conditions of real intercultural communication. P.Sysoev notes that the relationship between cultures in the modern world, in addition to «dialogue» is also characterized by «non-dialogue of cultures», the modern multicultural world is not distinguished by tolerance and cultural ethno-relativism, so it is not advisable to prepare students for communication in «greenhouse conditions» [1, p. 140]. N.Baryshnikov and V.Bernstein draw attention to the fact that «in order to establish a real productive intercultural dialogue, it is necessary: to recognize the foreignness of the interaction partner's culture; to perceive your partner not according to standard stereotypes but according to his personal characteristics; have an adequate understanding of the perception and attitude of the foreign partner to the culture of their country; to show readiness for intercultural interaction, despite the varying degrees of imperfection in the language of his potential foreign partner» [1, p. 142].

Consequently, the main directions of pedagogical activity in the formation of intercultural competence of medical students in foreign language classes are not only the educational process at the university but also organizational and educational work within the framework of the institution of supervision, which implies the involvement of students in extracurricular educational activities in order to implement real intercultural contacts, as well as the organization of independent, creative and research work of students using a foreign language. The intellectual and creative environment is the key to the successful functioning of our theoretical model, since it becomes a factor in increasing the interest and motivation of students in the process of cognitive activity in foreign language classes at a medical university. In turn, the creation of conditions for the actualization of intercultural competence is necessary so that a future doctor can «taste» what he is worth, test his skills and abilities in the process of intercultural communication, which is possible, for example, when preparing joint creative events with foreign students.

The technological block is focused on the process of forming the intercultural competence of medical students in foreign language classes and describes the forms and technologies of active learning used in the organization of the educational process, based on the close relationship of pedagogical, organizational and educational activities. «Effective

pedagogical educational technologies for the formation of intercultural competence of medical students are pedagogical technologies of active learning aimed at intensifying the creative, cognitive, research and communication activities of students» [5], such as design technologies, discussion technologies (round table, mini-debates, BarCamp), problem technologies (POPS-formula, «decision tree», SWOT analysis), game technologies (business game, role modeling, online quiz), CLIL technologies, contextual learning technologies, etc. In addition, the model includes technologies for organizing independent work of students, technologies for conducting extracurricular thematic events, since they provide additional opportunities for the formation of the necessary skills and abilities. These technologies imply the following forms of organization of the educational process: a practical lesson in a foreign language, conference, independent work, a creative event in English with the participation of foreign students.

The content of the process of forming the intercultural competence of future doctors is based on the study of the discipline «Foreign language», with the integration of the content of teaching this discipline at the interdisciplinary level, as well as on the use of educational technologies. In addition, the organization and conduct of role and business games, round tables, the implementation of projects and other types of active learning technologies effectively contributes to the formation of axiological, affective, cognitive and communicative components of the intercultural competence of medical students. Accordingly, the methods of teaching and upbringing within the framework of the theoretical model of the formation of intercultural competence of students of a medical university should be considered: communicative, interactive, creative, self-development, research, collective-group. Means of teaching and upbringing that underlie the formation of intercultural competence: teaching, upbringing, diagnostic, verbal, audiovisual, telecommunication, computer.

The evaluative block is naturally the next part of the presented theoretical model. The most important task in the process of implementing the model is to evaluate the result, namely, the formation intercultural competence of students of a medical university according to the selected components (axiological, affective, cognitive, communicative). Accordingly, the diagnostic criteria for the formation of the intercultural competence of students of a medical university are highlighted: respect for a different culture and understanding of the value of knowledge in the process of medical practice, empathy, openness and a sense of one's own professional significance, knowledge of a foreign language, foreign language culture and its critical understanding, effective intercultural communication with colleagues and patients of a different culture.

The corrective block of the proposed theoretical model is singled out as«a separate link, since the result of any modeling should be analyzed and corrected in the process of pedagogical activity. According to the principle of uncertainty in the functioning and interaction of humanitarian systems, it can be assumed that when determining the degree of formation of the intercultural competence of a medical student deviations are possible»[6]. A retrospective analysis of the process described in the model will allow us to find imperfections, possible errors and consistently correct them.

5. CONCLUSIONSAND PROSPECTS FOR FURTHER RESEARCH

It is substantiated that a number of economic and geopolitical factors pose a specific task, namely, the training of a specialist who has not only a high level of professional training but is also ready for fruitful activity in a multicultural world space. The formation of this kind of professionalism of future doctors is becoming one of the primary tasks of a modern medical university. In this regard, a foreign language lesson is an integral part in the general theoretical model of the formation of intercultural competence. Moreover, the teacher is faced with an important task - to find or develop the most productive pedagogical technologies that can keep pace with the times, in order to increase the effectiveness of training future specialists in the field of medicine, which means, in fact, to be an innovator and discoverer.

It is proposed that the intercultural competence of medical students should be considered as the ability to apply knowledge, skills, and abilities for fruitful professional activity, in order to achieve effective interaction with colleagues and patients of other cultures based on the principles of mutual respect and understanding. It was revealed that the main components of the intercultural competence of medical students should be considered axiological, affective, cognitive, communicative.

It has been established that the theoretical model of the formation of intercultural competence of medical students in foreign language classes by means of active learning technologies contains the following blocks: target, content-organizational, technological, evaluative and corrective.

Thus, having modeled the main structural blocks of the process of forming intercultural competence and having analyzed the modern pedagogical literature on the issues of pedagogical technologies, we consider it possible to devote further research to checking the effectiveness of the developed theoretical model and the development of pedagogical technologies for the formation of intercultural competence of students of a medical university in foreign language classes.

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МОДЕЛЬ ФОРМУВАННЯ МІЖКУЛЬТУРНОЇ КОМПЕТЕНТНОСТІ СТУДЕНТІВ-МЕДИКІВ НА ЗАНЯТТЯХ З ІНОЗЕМНОЇ МОВИ ЗАСОБАМИ АКТИВНИХ ТЕХНОЛОГІЙ НАВЧАННЯ

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> Анотація. Автором статті обґрунтовано, що низка економічних та геополітичних чинників, як нинішня гуманітарна ситуація, поширення інфекцій за кордони окремої країни, зростання експорту медичних послуг та медичного туризму в Україні, ставлять перед собою конкретне завдання, а саме - навчання фахівця, який має не тільки високий рівень професійної підготовки, але й готовий до плідної діяльності в умовах багатокультурного світового простору. Формування такого роду професіоналізму майбутніх лікарів стає одним із першочергових завдань сучасного медичного університету. У зв'язку з цим, заняття з іноземної мови є невід'ємною частиною загальнотеоретичної моделі формування міжкультурної компетентності. Запропоновано, що міжкультурну компетентність студентівмедиків слід розглядати як здатність застосовувати знання, навички та вміння для плідної професійної діяльності з метою досягнення ефективної взаємодії з колегами та пацієнтами інших культур на основі принципів взаємоповаги та розуміння. Встановлено, що теоретична модель формування міжкультурної компетентності студентів медичного університету на заняттях з іноземної мови за допомогою технологій активного навчання містить такі блоки: цільовий (орієнтований на соціальний лад, а саме на потребу медичного фахівця, здатного працювати в полікультурному середовищі); змістово-організаційний (зміст компетентності, основні напрями педагогічної діяльності та методологічні формування міжкультурної компетентності); технологічний принципи (педагогічні технології формування міжкультурної компетентності студентів, а саме, технології активного навчання; технології організації самостійної роботи; проведення позакласної тематичної технології діяльності), продуктивний (діагностичні критерії формування складових міжкультурної

компетентності) та корекційний (результат моделювання піддається аналізу, що дає можливість його корекції в процесі педагогічної діяльності).

Ключові слова: професійна підготовка; міжкультурна компетентність; технології активного навчання; методологічні принципи.

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