Abstract. The article deals with interpretation of terminological concepts of medical specialists’ communicative culture in the context of foreign language communication. The essence of speech culture is clarified, which is an important component of the professional profile of a future healthcare worker. It is emphasized that the formation of foreign language competence of a medical student is an integral aspect of professionally oriented education in medical institutions of higher education and is carried out by mastering the features of communicative culture. Emphasis is placed on the need to analyze various methods and approaches to the formation of communicative culture in students with different levels of knowledge and skills. The issues of content and efficiency of the process of foreign language communicative competence formation, selection of educational material, development of communicative component in the process of students’ mastering the basics of communication culture, modeling of foreign language communication phenomena, analysis of speech situations are examined. The basic skills necessary for valuable professional activity are characterized; the principles of formation of future specialists’ communicative culture during studying of foreign languages are considered (humanization, individualization and differentiation, variability, emotional expressiveness, competence, coherence and continuity); the need to learn vocabulary for the correct formulation of the statement is emphasized; the main dominants of communicative culture (emotional, cognitive and behavioral components) are outlined. It is proposed to structure the formation of students’ speech culture in directions that involve the development of emotional, cognitive and behavioural components. It was found that the terminological vocabulary of the communicative culture of the future specialist covers the concepts of individual-personal component, motivational-volitional, social-communicative and speech activities, which complement each other in professional activity.

Key words: communicative culture; foreign language competence; professional and communicative skills; communication.

Анотація. Стаття присвячена обґрунтуванню термінологічних концептів комунікативної культури фахівців медичного профілю в контексті іншомовної комунікації. З’ясовано суть мовленнєвої культури, що є важливою складовою професіограми майбутнього працівника охорони здоров’я. Наголошується, що формування іншомовної компетентності студента-медика є невід’ємним аспектом професійно орієнтованого навчання у медичному ВНЗ і здійснюється шляхом опанування особливостей комунікативної культури. Увага акцентується на необхідності аналізу різноманітних методик і підходів щодо формування комунікативної культури у студентів із різним рівнем знань та навичок. Розглядаються питання змістового наповнення та ефективності процесу формування іншомовної комунікативної компетентності, відбір навчального матеріалу, розвиток комунікативного компонента в процесі оволодіння студентом основами культури спілкування, моделювання феноменів іншомовної комунікації, аналіз мовленнєвих ситуацій. Охарактеризовано основні вміння, необхідні для повної функціональної діяльності, розглянуто принципи формування комунікативної культури майбутніх фахівців під час вивчення іноземних мов (гуманізації, індивідуалізації та диференціації, варіативності, емоційної виразності, компетентності, неперервності й наступності); на- голошено на необхідності засвоєння лексики для правильного оформлення висловлювань; окреслено основні домінанти комунікативної культури (емоційний, когнітивний та поведінковий компоненти). Запропоновано структурувати формування мовленнєвої культури студентів за напрямками, що передбачають розвиток емоційного, когнітивного та поведінкового компонентів. З’ясовано, що термінологічний вокабуляр структури комунікативної культури майбутнього фахівця охоплює концепти індивідуально-особистісної складової, мотиваційно-вольової, соціально-комунікативної та мовленнєвої активності, що взаємно доповнюються у професійній діяльності.

Ключові слова: комунікативна культура; іншомовна компетентність; професійно-комунікативні вміння; спілкування.
Introduction. Current trends in the development of medicine and medical education require effective training of future doctors. The medical sphere in Ukraine needs well-trained specialists with an appropriate level of readiness for professional communication. According to the Concept for the Development of Higher Medical Education in Ukraine, one of the current priorities is the development of international cooperation of higher medical educational institutions of Ukraine with international, intergovernmental and non-governmental organizations, foundations and programs (EU, WHO); support for the participation of students and young scientists in international conferences, seminars and symposia; increasing the admission of foreign citizens to universities and creating of information exchange with foreign countries. Therefore, the task of modern higher medical educational institutions is the formation of a person capable of foreign language communication in various life and professional situations.

An important feature of future doctors’ training is to focus students’ knowledge on the norms of intercultural, professionally-oriented foreign language communication, which is an important condition for establishment of international business contacts, students’ mobility to gain experience and organize research in medicine; acquaintance with foreign language medical literature, as well as news in the field of foreign medicine. Possession of skills and abilities of foreign language professional communication is considered as a compulsory component of professional training of modern doctors, as it contributes to the more effective formation of their professional competence [8].

The aim. The purpose of teaching a foreign language in higher educational institutions is to master a foreign language as a means of communication, as well as to acquire professionally oriented foreign language competence for successful further professional activity, which in turn requires outlining different methods and approaches to formation of communicative culture in students with different levels of knowledge and skills.

Theoretical framework. The problem of formation of communicative culture in the process of learning foreign languages has become the object of study of many scientists (M. Bayram, Ye. Vereshchagin, G. Ivanishyn, R. Milrud, Yu. Orel-Khalik, Ye. Passov, N. Tarasyuk, Yu. Yusef ). The following scientists consider foreign language competence as a multifaceted phenomenon and highlight its essence and structure (A. Andrienko, G. Arkhipova, N. Gez, S. Kozak, O. Pavlenko, N. Prudnikova, Yu. Fedorenko), professional orientation (E. Klymenko, L. Kovalchuk, O. Pavlenko, M. Pradivlyannyi, N. Prudnikova), the peculiarities of acquiring foreign language competence in linguistics and non-linguistic universities (Ye. Passova, S. Ter-Minasova, L. Shcherba, E. Shubin).

In studies, foreign language communicative competence is interpreted as a necessary level of human experience and interpersonal interaction to function successfully in society taking into consideration own abilities and social status [3, p. 13]. This problem is especially important for the process of foreign language communication formation in the context of society globalization.

Foreign language communicative competence as an important component of communicative culture is an integral part of the university students’ training [12]. Professional culture, which includes creative mastering and development of personal knowledge, doing work and possessing strategy in performing tasks and professional intuition, is an essential element of personal culture as a society member [13, p. 118].

As a result of Ukraine’s integration into the European and world educational space and the spreading of international, economic and cultural relations, a new vision of the main goal has emerged. Furthermore, there is a need to identify effective methods of learning and teaching foreign languages in higher educational institutions, which also represents the need to train future qualified professionals for consolidated intercultural communication [2, p. 177]. Training of highly professional specialists should be carried out taking into account the acquired domestic and foreign experience, using effective modern innovative technologies [11, p. 12].

The result of long-lived and persistent work of different scholars under the leadership of the Council of Europe was the linguodidactic principles of European languages studying in the context of a communicative-oriented approach to teaching foreign languages in higher educational institutions. The introduction of the basic principles in the practice of teaching foreign languages was carried out in order to preserve and enrich the linguistic and cultural heritage of different people for the intensive exchange of scientific and technical information, cultural achievements, increasing human mobility. The determinative principle of this approach is the focus on mastering the language as a means of communication in real life situations [5, p. 32].

Foreign language communication is possible when individuals of foreign language communication speak a language as a means of communication. The
level of efficiency of the communicative process is determined by the level of formation of foreign language communicative competence of individuals. Competence is a stable readiness and ability of a person to any activity “with knowledge of the matter”. In our case, such activity is foreign language communication of students in the process of learning a foreign language. Hence, the definition of foreign language communicative competence as an integrative formation of personality, which has a complex structure and acts as an interaction and interpenetration of linguistic, sociocultural and communicative competencies. The level of formation allows future professionals to speak foreign language effectively and associate intercultural and interpersonal communication.

It should be noted that foreign language competence provides a certain cultural level of oral and written speech and non-verbal speech behaviour. At the present stage of development of the world community, the formation of foreign language communicative competence in students of higher educational institutions should be considered as a significant component of general professional training. To ensure the effectiveness of the process of foreign language communicative competence formation, it is necessary to develop new methodological approaches and determine the pedagogical conditions for their implementation.

The training of future doctors for foreign language professional communication takes place during the study of foreign languages. According to L. Krysak, knowledge of a foreign language allows a modern specialist to carry out professional foreign language communication in specific professional, business, scientific fields and situations. The scientist claims that professionally oriented training of future doctors for foreign language communication will be successful if we create conditions for the practical use of a foreign language as a means of professional activities, including medical, preventive, diagnostic, rehabilitative, psychological, pedagogical, organizational, managerial, scientific and experimental functions. It is possible to achieve a high foreign language communicative level of the future doctor using the introduction of game modeling in the classroom, organizing discussion classes that significantly enhance speech actions, focus on professionalization and interdisciplinary integration, the use of information and communication technologies; development of a set of exercises that reflects the specifics and dynamics of the development of professionally oriented communication skills of future doctors [7, p. 189-190].

It should be noted that during the training of students in higher educational institutions, such activities as information work and research work are also directly related to the communicative training of future doctors. Therefore, another feature of preparing future doctors for professional foreign language communication is the use of innovative forms and methods of teaching, including business, role-playing games, seminars, discussions, situational exercises (cases), interactive forms and methods of training based on the interaction of dialogues and polylogues (educational trainings, didactic games, debates, discussions, etc.), as well as spreading of experience in using modern teaching methods.

Modeling the phenomena of professional foreign language communication and analysis of communicative situations are essential parts in the process of students’ education. Therefore, the professional and communicative skills of medical students necessary for their valuable professional activity in the future career are the following:

- ability to establish psychological contact with people, to provide relationships necessary for combined activities in treatment;
- speech skills (ability to use common vocabulary, special terminology and professional words effectively and ensure the success of the speech act, which is characterized by content, accessibility, clarity, relevance, diversity, expressiveness, and aesthetics) [9].

Analysis of the scientific literature shows that the formation of communicative culture of students in the study of foreign languages requires the following principles’ compliance: humanization, individualization and differentiation, variability, emotional expression, competence, coherence and continuity [10].

The principle of humanization involves the strengthening of man as the highest value, focused on respect for the individual, cooperation in relations between students, as well as between them and the teacher. The humanization of relations between the participants of the pedagogical process is ensured due to the positive attitude of the teacher to the student’s personality, giving the students freedom of action and assistance if necessary, as well as reducing the dominant influence of the teacher in the classroom.

The principle of individualization and differentiation indicates the need to focus on a specific, individual level of the future specialist’s culture, the choice of content, forms and methods of work of the teacher in connection with the characteristics of real and nominal groups of students, which is achieved by diagnosing
the levels of development of communicative culture.

The principle of variability involves the choice and diversification of forms, methods and types of work not only for the teacher but also for the student in order to enhance his/her cognitive activity.

The principle of the professional orientation of the language material indicates its choice, as well as the authenticity of the educational material. If the pseudo-real content of educational material becomes the subject of communication, it is not more authentic. It is better to talk in a foreign language about the human body than to think about a disease that does not exist [6].

The principle of competence involves the development of communicative competence, which includes sociocultural competence – the experience of creative activity and the ability to learn; methodological competence – mastering the correct techniques of activity allows you to learn the material easily; intercultural competence – the study of the culture of different people. The special and methodological competence of the teacher also plays an important role in pedagogical interaction with students.

The principle of continuity and succession of communicative training is based on the idea of continuing professional education. The integration of the discipline “Foreign Language” with other humanities and medical disciplines provides communicative training of students at the initial stage of study at a medical university and provides for its continuity when undergraduates start direct practical interaction with patients. Succession and continuity of communicative training is provided by group forms of work, which create a communicative environment in the classroom and are supported by individual forms of work, and originality and professional orientation of tasks and projects encourage students to bring their personal attitude, participation in the process of doing them [6].

In her research, S. Herasymenko determined that the following components of the communicative culture of the future medical specialist are formed in the process of learning a foreign language:

- emotional component (development of empathic abilities and formation of ethical attitude of the future profession);
- cognitive component (improvement of reflexive skills during foreign language communication, development of ability and willingness to compromise in resolving conflict situations, expanding the horizons and interests of the student);
- communicative competence – mastering the correct techniques of foreign language communication involves mastering the techniques of active (reflexive) listening, the technique of formulating questions; transmission and search of subject, factual information in a foreign language (determination of the necessary information, provision of information, corrections, questions, answers); speech structuring (beginning, word search, self-correction, sequence, addition, example, selection, generalization, conclusions, conversation interruption, conversation etc.). Since interpersonal perception is one of the aspects of communication, we believe that the active participation of the subject of perception is of particular importance, as well as the role of expectations, desires, intentions, past experience of individual as a specific determinant of perceptual situation. All this must be taken into account when the knowledge of another person is considered as a basis not only for understanding the

S. Herasymenko claims that these dominants are gaining practical implementation through specific areas of the process organization of a foreign language learning, specially created conditions and communicative situations [4].

Therefore, we believe that the process of learning a foreign language in higher medical educational institutions in order to form a communicative culture of students should be structured in the following areas: the development of emotional, cognitive and behavioural components.

Development of the emotional component of students’ communicative culture is realized by mastering the techniques of empathic listening (literal repetition, paraphrasing, verbalization of feelings); observation of non-verbal reactions of the communication partner; expressive assessment of the impact of text, picture, music; active use of language means which transfer emotional relationships (pleasure, sympathy, surprise, hope, disappointment, fear, etc.) and, accordingly, verbalization of feelings (categorization of feelings, description of states and desires). In order to become a competent communicator, a student needs to have a variety of feedback, listening styles, and skillful use of them in appropriate circumstances. And this can be successfully implemented in foreign language classes while creating conditions for empathic interaction.

Development of the cognitive component of students’ communicative culture in the process of foreign language communication involves mastering the techniques of active (reflexive) listening, the technique of formulating questions; transmission and search of subject, factual information in a foreign language (determination of the necessary information, provision of information, corrections, questions, answers); speech structuring (beginning, word search, self-correction, sequence, addition, example, selection, generalization, conclusions, conversation interruption, conversation etc.). Since interpersonal perception is one of the aspects of communication, we believe that the active participation of the subject of perception is of particular importance, as well as the role of expectations, desires, intentions, past experience of individual as a specific determinant of perceptual situation. All this must be taken into account when the knowledge of another person is considered as a basis not only for understanding the
partner, but also for establishing concerted actions and special relationships with him/her [1, p. 121]. This means that each participant is obliged to be aware not only of his/her own goals and objectives, but also the means, goals, and psychological characteristics of the interlocutor. Reflexive listening is feedback of the listener to the speaker. The listener not only listens attentively, but also informs the speaker of his/her comprehension. Reflexive listening is harder than speaking, so it is the most difficult part of the conversation. It requires patience, concentration, discipline, and analytical thinking. Therefore, an important feature of a professional doctor is his/her ability to listen well.

The development of the behavioural component of students’ communicative culture is realized through: enrichment of the experience of interrupted communication (a signal of misunderstanding, a request to repeat what was said, a request for clarification of a word or phrase, a request for clarification, explanation, in other words a request for help in language, a request to speak more slowly, etc.); language etiquette (attracting attention, greetings, acquaintances, farewells, apologies, thanks, compliments, courtesies, congratulations, etc.); involving students in business and role-playing games. Particular importance for language communication and learning a foreign language is the interaction, which is an oral or written exchange of information between two or more people, during which the processes of perception and generation of information may alternate. Interlocutors often speak and listen to each other at the same time, and even if they strictly adhere to the sequence of statements, the listener usually tries to guess the general meaning of the statement addressed to him/her and formulate his/her answer.

Conclusions and Prospects for Research. Thus, the formation of a foreign language communicative culture of students of higher medical educational institutions is realized by language users in various types of speech activities related to perception, generation and interactive actions.

Based on the results of native and foreign research, we can conclude that communicative culture is an attribute of its carrier, which allows him/her to reproduce the mastered knowledge, values, moral and ethical norms, to achieve congruent communication, as well as representation of his/her own thoughts, effective perception, understanding of communication partners and their interaction, using verbal and nonverbal communication skills.

We consider that the communicative culture of the student is formed on the basis of personal and motivational components, the manifestation of the general culture of the individual during different types of communication, as well as communicative knowledge, formed speech skills and abilities. Modern student acts as a person who is a carrier of a certain culture; he/she has certain temperament, character, abilities, features of the intellectual-cognitive sphere (feelings, perceptions, memory, attention, thinking, imagination, etc.), as a result of which he/she acquires knowledge, skills and abilities which are necessary for the chosen profession.

Thus, the structure of the communicative culture of the future specialist contains the following components: “individual-personal component”, which includes personal characteristics of a man (temperament, character, abilities, intellectual and cognitive sphere, etc.) and his/her lifelong achievements (ideals, attitudes, values, moral qualities, ethical norms); “motivational-volitional component”, which is formed by the need-motivational constituents (needs for cognition and self-knowledge, evaluation of other people, communication, self-improvement, self-expression; motivation to succeed and avoid failures; focus of an individual on his/her “I”) and “emotional-volitional component” (self-control, emotional stability, culture of emotion, ability to avoid conflict and get out of it effectively); “socio-communicative component”, which includes a socio-psychological constituent (empathy, perception, the ability to be needed, reflexivity, awareness of the social role and manner of behaviour) and “individual-communicative component” (interconnection, mutual understanding; the ability to establish and maintain contact, feedback, language competence, culture of thinking and speaking, speech activity, communicative knowledge, skills and abilities). These components complement each other and affect the quality of communicative culture of a person. To achieve success in the professional field, every qualified specialist must follow a communicative culture.

The peculiarities of communicative culture of students in the paradigm of foreign language competence formation described in the article do not cover all the problems concerning the efficiency of training professional foreign language communication, and that creates perspective for further scientific research.
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