

THE FORMATION LEVEL ANALYSIS OF MEDICAL STUDENTS' INTERCULTURAL COMPETENCY

Halchun Nataliia,

the head of the educational and methodical
office of Municipal Institution of Higher Education «Volyn Medical Institute»
of the Volyn Oblast Council,
Graduate Student of Social Work and High School Education Department
of Lesya Ukrainka Volyn National University

Introduction. Modern globalization, integration, and migration processes both in the world and in Ukraine pose new, previously unknown challenges to specialists in various fields. The measure of development and well-being of society has always been the health care system. A key figure in the process of transformational changes is traditionally a specialist in the medical field. Our country's being in war conditions for two years has become a test for the medical system and requires high professionalism from its employees, which includes not only the ability to provide professional medical care, but also the ability to establish communication, provide support, and show respect in communication with people-representatives of different nationalities, cultures, regions, religions, values, beliefs, often in a multicultural society. A medical specialist, possessing clinical thinking, the skills providing competent care, the ability performing the most complex medical manipulations, must be interculturally competent in order to provide assistance to a multicultural patient, integrate into the global medical community, be able to study and master world-leading medical practices, share his professional achievements, participate in international scientific symposia and conferences, work with non-Ukrainian-language scientific literature. Just these factors have become necessary for the mastering of intercultural competency by future specialists of the health care system.

Main part. Many representatives of the Ukrainian and foreign scientific community devoted their scientific research to the problems of intercultural competency. Intercultural competency was studied at different times by M. Avdeeva, T. Astafurova, N. Bagramova, M. Bennett, M. Byram, V. Gudykunst, V. Kabakchi, A. Knapp-Potthof, S. Kramsh, V. Safronova and others [2, p. 109].

S. Aleksandrova, O. Baibakova, L. Vorotniak, O. Danyshenko, N. Kalashnik, T. Pylyp, O. Rembrach, M. Starodub are representatives of the Ukrainian scientific school on the intercultural competency issues [2, p. 109].

Research on the professional competency of a medical specialist was carried out by S. Buhalska, O. Golik, Ya. Kulbashna, M. Mruga, I. Radziewska, K. Khomenko, A. Shcherbakova [2, p. 109].

The scientific and pedagogical literature analysis showed that for the vast majority of professions, intercultural competency belongs to general competences. However, the content of a medical professional's transcultural competency is broader than that

of representatives of other fields [5, p. 4], therefore it is worth to classify it as a professional competency.

Having studied the structuring of the cross-cultural competency of medical specialists by various authors and analyzed the classification of its components, we chose 5 components identified by T. Pylyp: cognitive, intrapersonal, sociolinguistic, affective and procedural [3, p. 45].

In order to study the medical students' readiness for professional activities in a multicultural environment, we developed a questionnaire based on T. Pylyp's classification and conducted research. The respondents were 100 students of the first (bachelor) level of higher education in the field of knowledge 22 Health Care of the Volyn Medical Institute and 60 medical students of the Volyn National University named after Lesya Ukrainka. Let's analyze some indicators.

The cognitive component is based on culturally specific knowledge. This is the basis for the proper deciphering of the communicative behavior of representatives of other cultures, for the prevention of misunderstandings and the design of one's own communicative behavior [3, p. 45].

A significant part of the respondents (95.7%) correctly understand the concept of «intercultural competence», 89.4% are interested in the culture, customs and traditions of other nationalities, 72.3% believe that culture plays an important role. However, the area of turbulence turned out to be the understanding of the concepts «nation», «ethnic consciousness» (19.1%, 55.3% - respectively). According to only 21.3% of respondents, education is a means of attracting an individual to culture. Democracy is the power of the people (68.1% of correct answers), and the ballads about Robin Hood are a monument of English literature of the 17th century (63.8%).

The internal state of the personality, its development and self-determination, the state of psychological readiness for communication, the attitude towards representatives of other cultures is described by the intrapersonal parameter [3, p. 45]. For 95.7% of education seekers, it is important that they are Ukrainians. For 97.9% of respondents, family traditions are decisive in choosing nationality. The attitude towards representatives of different races is ambiguous. 78.7% have a positive attitude towards their roommate, only 44.7% towards their future husband or wife. 87.2% of respondents approve of a friend's intention to marry someone of another nationality. 61.7% - it is not annoying if representatives of another nationality in the team communicate in their own language, 29.8% - are ready to learn the language of their husband or wife if he/she is a representative of another culture, 97.7% - believe that future children should speak both languages.

The sociolinguistic component includes awareness of one's own and foreign cultures, a proper understanding of the peculiarities of another society, the ability to adapt to the behavior of communication partners, and as a result - the ability for multicultural dialogue, a correct understanding of the communicative behavior of representatives of another culture [3, p. 45]. 83.3% of education seekers are motivated to learn a foreign language only by a positive evaluation. 80.9% of respondents consider it expedient to understand the essence of misunderstandings in multicultural communication. 68.1% of respondents correctly answered questions about unwanted

topics (money, politics, religion, death, gossip) in intercultural dialogue. Almost everyone (97.9%) knows about the allowed topics (weather, art, recreation, hobbies, travel). However, only 31.9% know some gestures of non-verbal communication of the English-speaking world. About the fact that «Hiya!» is an abbreviated form of «How are you!» only 31.9% of the study participants know. «Howdy!» is «How do you do!» 57.4% are aware.

Tolerance is the key to any communication, especially poly-cultural one. It is the affective component of cross-cultural competency that includes tolerance, as it constitutes the psychological basis of productive multicultural interaction and is characterized by resistance to frustration and stress, reflection, self-confidence, lack of prejudice, frankness, openness, respect for foreign culture, readiness to study it, intercultural adaptation [3, p. 45]. 76.6% of respondents understand the concept of «tolerance», but only 17% know what «intolerance» is. 72.3% of respondents consider themselves to be tolerant towards representatives of other cultures, 85.1% expressed the need to be tolerant.

The answers to the questions about the future professional activities of the education seekers were interesting. Unfortunately, only 29.5% of them see themselves ready to tolerate excessive irritability and unfair reproaches of the patient, even if they last for years, and see it as their duty. 46.8% are ready for this «to a certain extent». 23.4% say "no", and they «don't have nerves of steel». It is good that 83% of the respondents believe that it is possible to help patients with a kind word. 14.9% of respondents are convinced that this is the task of a medical psychologist.

The procedural parameter of intercultural competency constitutes strategies for establishing transcultural contacts and ensuring their positive course. These technologies encourage language activity, search, promote readiness for understanding and identification of possible misunderstandings, use of acquired experience, enrich knowledge about another culture and the originality of the communication partner [3, p. 46]. 91.5% of survey participants are convinced that a smile is the most effective form of communication in all cultures.

Only a small part of the interviewees knows about the peculiarities of Western communicative culture. 36.2% of respondents know about the principle of building a communication strategy "first - answer, then - motivation". 53.2% know that shaking hands with Americans is a sign of gratitude. Only 6.4% are aware of the American aggressive style of behavior in negotiations and the frequent use of pressure on the interlocutor.

23.4% of respondents know about the etiquette rule regarding conducting a business conversation no closer than 60 cm from the interlocutor, which is followed by Germans. 91% of the research participants are convinced that it is necessary to understand the adopted rules, to observe people's behavior while in the company of foreigners. Observing the interlocutor's body language, avoiding unclear and ambiguous words when communicating in a foreign language is absolutely necessary, according to 74.5% of students. However, 68.1% of respondents have unformed active listening skills.

Conclusions.

Thus, the results of the survey demonstrated a significant lack of awareness of medical education students with issues of intercultural competency, which are most relevant to cognitive, procedural and interpersonal aspects. Therefore, the formation of cross-cultural competency of future medical specialists is extremely necessary and timely. Transcultural competency becomes a necessary component of their competitiveness, promotes productive multicultural cooperation, acts as an effective means of harmonizing relations with representatives of different cultures and interpersonal relationships in a poly-cultural professional environment [1, p. 20].

On the other hand, productive intercultural communication is unlikely in the absence of transcultural competency among its participants, which contributes to their competitiveness in the global labor market [4].

Висновки. Таким чином, результати опитування продемонстрували значну необізнаність здобувачів медичної освіти з питаннями міжкультурної компетентності, які найбільше стосуються когнітивних, процесуальних та міжособистісних аспектів. Тому, формування інтеркультурної компетентності майбутніх фахівців-медиків є вкрай необхідним та на часі. Транскультурна компетентність постає необхідною складовою їх конкурентоспроможності, сприяє продуктивній полікультурній співпраці, виступає дієвим засобом гармонізації стосунків з представниками різних культур та міжособистісних зв'язків у багатокультурному професійному середовищі [1, с. 20].

З іншого боку – продуктивна міжкультурна комунікація малоімовірна за відсутності в її учасників транскультурної компетентності, яка сприяє їх конкурентоспроможності на світовому ринку праці [4].

References:

1. Branitska, T. R. (2019). Mizhkulturna kompetentnist yak vazhlyvyi chynnyk profesiinoi diialnosti fakhivtsiv sotsialnoi sfery [Intercultural Competency as an Important Factor in the Professional Activity of Social Sphere Specialists]. *Scientific Bulletin of Uzhhorod University. Series «Pedagogy. Social work»*. Issue 1 (44) Available at: <http://orcid.org/0000-0003-4503-3140> [in Ukrainian]

2. Halchun, N. P. (2023). Doslidzhennia komponentiv mizhkulturnoi kompetentnosti medychnoho pratsivnyka: analiz, vysnovky, perspektyvy [Research of medical specialist's intercultural competency components: analysis, conclusions, perspectives]. *Volodymyr Vinnichenko Central Ukrainian State University Proceedings. Series: «Pedagogical sciences»*. Kropyvnytskyi. Issue 211. pp. 107-113. Available at: <https://orcid.org/0000-0003-0431-638X> [in Ukrainian]

3. Pylyp, T. Ya. (2015). Henezys poniattia «mizhkulturna kompetentnist» [The genesis of the Concept of «Intercultural Competency»]. *Professional Education: Problems and Prospects*. Issue 8. pp. 42-47 Available at: <http://surl.li/mrubh> [in Ukrainian]

4. Rezunova, O. S. (2021). Mizhkulturna kompetentnist yak neobkhidna skladova profesiinoi kompetentnosti suchasnoho fakhivtsia [Intercultural Competency as a Necessary Component of the Professional Competence of a Modern Specialist].

Scientific Review. Nr 1 (73). Available at: <https://orcid.org/0000-0003-3315-0294> [in Ukrainian]

5. Shcherbakova, A. V. (2015). Formuvannia polikulturnoi kompetentnosti u studentiv-medykiv u navchalno-vykhovnomu protsesi vyshchoho medychnoho navchalnoho zakladu [Formation of Multicultural Competency in Medical Students in the Educational Process of a Higher Medical Educational Institution]. Thesis ... Candidate Ped. Sciences: 13.00.08, Luhansk. T. Shevchenko National University. Starobilsk. 357 p. [in Ukrainian]