

SPECIFIC CHARACTERISTICS OF PREPARING THE FUTURE MEDICAL WORKER FOR PROFESSIONAL COMMUNICATION

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Abstract

The development of professional competence is a relevant pedagogical issue in the conditions of Uzbekistan education system modernization. This article explains the role and peculiarities of professional communication between a medical worker and a patient and, the hypothesis and the objectives of the research are also formulated.

Keywords: communication, professional communication, identification, empathy, reflection, nonverbal means of communication.

INTRODUCTION

Every year, modern society's need for highly cultured specialists with professional communication skills, high flexibility and professional mobility is increasing. Unfortunately, doctors learn communication skills "on their own", which comes with years and experience. Especially in secondary schools, it is not taught in practice. It is very sad to see that the doctor ignores the conversation with the patient and becomes a blind pawn of laboratory and instrumental diagnostics or an unwilling executor of treatment schemes and instructions sent from above. The art of talking with a patient, the ability to talk with a patient requires not only the desire of the doctor, but also a certain level of talent. The doctor should not only listen, but also hear the patient.

LITERATURE ANALYSIS

D. O. Himmataliev, Z. Sh. Tokhtaeva, A. A. Khasanov, F. R. Valieva and other scientists studied the issues of training in professional education and improving the quality of professional training of future specialists, preparing them for professional communication. Countries of the Commonwealth of Independent States M.V. Yedrenkina, I.I. Kuznesov, O.B. In the works of Zayseva and others, the problem of formation of knowledge, skills and qualifications of students was considered on the basis of ensuring the integration of science, education and production in the educational process.

For the millennia that medicine has existed, the art of communication between doctor and patient is still important, if not the most important. Therefore, we believe that teaching professional communication should cover the entire educational process during all school years. This fact is explained by the importance of communication in people's lives. The need for communication is fundamental for humans. Communication is an integral element of human existence and the most important condition for the full formation and development of a person [1]. Even the great physician and thinker of the Middle Ages, Ibn Sina, spoke about three ways to help a sick person - knife, grass and words, thereby emphasizing the importance of the human word and actually the psychology of communication. recovery from illness [7]. Researchers offer different interpretations of the concept of

"communication". In particular, some scientists consider communication as one of the types of human activity, others - the background of the development of activity, its condition.

RESEARCH METHODOLOGY

Communication as a communicative activity has its own characteristics. In our opinion, communication and activity should be considered as an integral unit. Many professions require knowledge of communication skills to be successful; For some, this knowledge is secondary, but for professions such as HR manager, psychologist and medical worker, it is the main one. Interpersonal communication, often dialogue, is an integral part of professional medical activity. It mainly defines the relationship that develops between the doctor and his patient from the beginning, helping to establish a much-needed trusting relationship between them. N. I. Pirogov remembered how the appearance, reputation and communication style of the well-known therapist E. O. Mukhin left an indelible impression on him. It is better if the communication between the doctor and the patient continues within the sincere and benevolent interests of both parties and is aimed at achieving a common goal - maintaining health. An important psychological and pedagogical aspect of communication is the doctor's behavior. Common sense, courtesy, the ability to listen to the patient's thoughts and guide them in the right direction - these and other qualities have always been characteristic of the best local doctors. Contemporaries noted S. S. Yudin's subtle communication style. During the conversation with the patient, he was able to pay attention to the interlocutor's speech and behavior, and most importantly, to read what the patient wanted to say from his eyes. At the same time, S. S. Yudin's speech had a confidential character, he continued in a soft tone and created an atmosphere of sympathy. Taking the patient's hand in his palm, the surgeon "poured" the patient his energy of love for life, instilled confidence in the success of the upcoming operation.

From the very beginning of contact with the surgical patient, he tried to make him his ally, he did not promise an impossible, instant cure, he clearly understood that medicine is not capable of everything and that each person is sick in his own way. The goal, the essence of any doctor's work is to treat the patient. The doctor's duty is to put the interests of the patient, the injured person above his own interests. When he comes to the doctor, the patient trusts him, shares with him his, sometimes deeply sincere, inner thoughts, he does not trust anyone else, even his closest ones. This should always be remembered, understood and appreciated. In order to be absorbed by the experiences of other people and to be sensitive to them, the doctor must have great spiritual strength [7]. And S. P. Botkin was right, he believed that taking into account the mental world of the patient is no less important than knowing anatomy and physiology. It is correct to say that three components are required in the formation of a doctor: firstly, medical knowledge, secondly, having skills, many medical actions and methods, and thirdly, a specific medical characteristic, thinking style, communication. and behavior, the ability to communicate with the patient, is an important factor in this treatment: the doctor must become a person who deserves special trust, which can be achieved only when three components are formed. Communication is a complex and multifaceted process of establishing and developing relationships and connections between people [2-3]. "It's no secret," writes the Polish psychologist S. Melibruda, "for us, interpersonal relationships are no less important than the air we breathe" [4].

The endless attractiveness of communication for a person is well expressed in the famous words of the French writer A. de Saint-Exupery: "The only real luxury is the luxury of human communication" [5]. A doctor is often called a teacher and a teacher. No other profession has as many aspects related to human

destiny as medicine. Undoubtedly, this specificity should be taken into account, and a culture of behavior should be formed in the pre- and post-graduate period of the formation of a doctor as a specialist. In our opinion, the communication of the future healthcare worker is a complex process of interaction between the doctor and the patient, which plays a very important role in the provision of medical care, in the treatment of people with existing or potential health disorders, which should be directed to a specific target. positive outcome of treatment. Good communication is not easy, so the future doctor must learn it if he wants to be successful in communicating with other people. Knowledge of the laws of communication psychology, combined with professional skills, leads to successfully overcoming all the difficulties that arise in the process of medical diagnosis and allows to provide successful assistance to patients even in the most difficult situations.

ANALYSIS AND RESULTS

In the process of medical activity, the ability to listen to the patient plays an important role, which seems to be necessary for the formation of a relationship between him and a medical worker, in particular, a doctor. The ability to listen to the patient not only helps to identify and diagnose the disease to which he may be prone, but the listening process itself has a favorable effect on the psychological relationship between the doctor and the patient. In our opinion, in addition to verbal and non-verbal means of communication, the main mechanisms for ensuring mutual understanding are identification, empathy and reflection. Identity has several meanings in social psychology.

In the communication problem, identification is the mental process of imitating oneself with the communication partner in order to know and understand his thoughts and ideas. Empathy is also understood as the mental process of pretending to be another person, but with the goal of "understanding" the known person's experiences and feelings. To understand that this is the most important aspect of the work of a medical worker, to be close to the patient, to understand his feelings and experiences. The word "understanding" is used here figuratively: empathy is affective "understanding." As you can see from the definitions, identification and empathy are very close in terms of content, and often in psychological literature, the term "empathy" has an expanded interpretation - it includes the processes of understanding the feelings and thoughts of a communication partner. At the same time, when talking about the process of empathy, it is necessary to keep in mind a positive attitude towards the partner's personality. This means the presence of: a) honest acceptance of the personality of this person; b) specific emotional neutrality, lack of valuable thoughts about it [6].

Reflecting the problem of mutual understanding is a person's understanding of how he is perceived and understood by the communication partner. Reasoning in the process of mutual reasoning of the participants of the decision is a kind of feedback that helps to form the strategy of the actions of the subjects of communication and correct their understanding of the characteristics of each other's inner world. Another mechanism of understanding in health worker communication is interpersonal involvement. Attraction is the process of forming a person's attractiveness for the perceiver, the result of which is the formation of interpersonal relations. Currently, the expanded interpretation of the attraction process is being formed as a type of social relationship with the formation of emotional and evaluative ideas about each other, their interpersonal relations (positive and negative), the dominance of the emotional evaluation component. . In addition, he should have a unique human, professional communication, which is based on a humane, respectful, tolerant and compassionate attitude towards people [8].

The first impressions of the patient when meeting him are important for the manifestation of trust in the medical worker. At the same time, the medical worker's real facial expressions, gestures, tone of voice, facial expressions that are not intended for the patient, use of slang turns of speech, as well as his appearance, in particular, oral and oral Non-verbal means of communication are important for humans. When working with patients, it is important for the health worker to pay attention to important factors in communication, such as the volume, speed, rhythm and pause of speech. Loud speech, and at an even higher rate, is perceived as the first sign of conflict and creates mutual aggression, which is very important for the health worker to know and always remember. In order to get out of such a situation, there is a rule that the respondent's speech should be half-voiced.

The speed of speech itself also reflects the emotional mood of a person, the higher it is, the higher the speed of speech and vice versa. Features of speech: tone, tempo, volume, rhythm, pauses and their duration, vocabulary used (poor speech, simplified expressions, slang, false professional terms), character traits, education and culture level, the patient's well-being and his many other personality traits. Simplicity of communication means brevity and completeness of phrases containing understandable words that are very important for the patient, that is, simplicity of communication. With regard to non-verbal communication, we believe that the health care provider must be able to "read the non-verbal language of communication." The ability to understand non-verbal communication cues and non-verbal cues that reflect the patient's condition and well-being is essential in patient monitoring.

Non-verbal behavior includes interpersonal distance (the distance that interlocutors try to maintain while talking), postures, gestures, facial expressions, looks and movements accompanying speech - sighs, groans, yawns, etc. You have to learn to pay attention. cough, that is, the sounds that a person makes. A special factor is the "living space" or interpersonal distance. Each person has their own "living space" - an area that they protect from the intrusion of others. In the process of communication, interlocutors regulate this interpersonal distance. The closer the warm relationship between people, the smaller the distance between them in the process of communication, and on the contrary, the more cold, formal, formal the relationship is, the greater the psychological distance between the participants in the psychological process of communication.

The nurse can use knowledge of communication distance because reducing the distance creates a feeling of more trusting communication. When communicating with the patient, the use of gestures, facial expressions, unusual tone and speed of speech should be minimal. Throughout his life and practice, life sometimes makes serious demands on the doctor, but at the same time, it makes his work a real feat. The writer and doctor A.P. Chekhov, who is not prone to sad exaggerations, did not accidentally emphasize this feature: "Medical profession is courage. This requires dedication, purity of heart and greatness of thoughts. Not everyone is capable of this."

CONCLUSIONS

In our opinion, from the point of view of modern times, the last phrase should be understood in a slightly different sense: he is capable, constantly studies the art of medicine, professional communication, educates and improves all the qualities necessary for a modern doctor. [2–3]. To solve this problem, the purpose of our research creates the need to develop a theoretically based and experimentally tested model of teaching professionally oriented communication among students of general education schools as a condition for the formation of readiness of medical college students for professional communication.

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