

# THE NECESSARY COMPONENT OF THE FORMATION OF COMMUNICATIVE COMPETENCE OF STUDENTS OF MEDICAL EDUCATION

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<https://doi.org/10.5281/zenodo.11080948>

**Abstract.** *This article covers the fact that the professional skills of future medical personnel are provided by the means of his successful professional career. The communicative abilities mentioned here, on the other hand, exist precisely in the system of professional abilities and are sufficiently important in the formation of communicative competence of future medical personnel.*

**Keywords:** *ORAC, mental trauma and indiscriminate losses, authoritarian (tacit submission).*

There is no doubt that the role of communicative competence in preparing future medical personnel for professional activities is important. One of the main factors of communicative competence is the implementation of regular collection, analysis and regulation of specified data. It is important for prospective medical personnel to use verbal and nonverbal communication techniques to engage in dialogue. Effective communication, however, implies that in any case people are able to understand each other in an interpersonal relationship. At the same time the idea of the importance of communication for the full-fledged formation of people not only as a person, but also as a subject of activity. It was conceived by Gpimakda: “another reason for people to become a person is that from birth he is intensely treated with those like him, to be in a constant relationship with people – the conditions that must be carried out in a full-fledged development of the individual help to maintain the mental balance of communication, smooth out emerging conflicts and conflicts, [42, 3 p.].

It is so difficult to distinguish between the concepts of “communication” and “attitude” that the researcher V.M. Kupbatov reflecting on this, gives his following two definitions: “communication is a relational process, the connection of two and more individs, the conveyance of information by one person to another. In a narrower sense -the process of sending information from the sender to the recipient(from the communicator to the recipient), but we are happy to agree to this definition [77, 47p.].

“Attitude”, on the other hand, is a process of human interaction and cooperation in which reciprocity occurs with the result of activity, information, emotion, skills, competence, work [77,145 p]. Indeed, communication is sufficiently complementary.

Today, it is proposed to talk about a series of social roles, which each individual plays almost every day for the rest of his life. Social roles may not necessarily be connected with each other, and they do not even have to go after each other, nevertheless they can exist closely together at the same time, even in one communicative-domestic situation. In the ORAC of the main roles, the role for all or the behavior to be displayed stands out; the role for the group, including the professional and the role for oneself, which is sharply different from the previous two [16, 186 p.] etc.

The process of formation of communicative competence of future medical personnel can be carried out through the educational process, which necessarily covers:

- subjects defined in the educational process such as speech culture and fundamentals of proceedings, pedagogy and psychology, professional pedagogy and Professional Psychology;
- in the process of mastering the educational subjects of students
- forming Professional (professional) competencies;
- the development of the communicative competence of the student through the role of the student in his professional activities.

All this represents a specific complex, through which the personality of future medical personnel is formed and developed, but in this way, let it be possible to master its further development and methods of maturation, and this is manifested in the fact that future medical personnel ensure more effective functioning as a professional subject in the system of “human – society - universe”.

The professionalism of future medical workers should be provided by the means of his successful professional activity, it will not be without some specific abilities, communicative qualities of an individual, which depend on both the activity itself and the important guidelines in decision-making, the professional character and the environment of living in a way that suits society. The communicative abilities remembered here, on the other hand, are present precisely in the system of professional abilities and will be of sufficient importance in shaping the communicative competence of future medical personnel, in which it can even be the basis of his professional activity. “Communicative abilities can be clearly seen as characteristics or qualities that ensure the success of individ activities, that is, individual qualities that distinguish one person from another and appear in successful activities” [166, 42 p]. It should be noted that the communicative component can be developed especially for the reasons of the individual’s establishment to each other: material; social; professional; spiritual-moral; situational-problematic; personal or personal.

It is necessary to improve the development of the communicative abilities of the individual through communicative skill, which is the basis for the development of professional activity. Disorganized development of communicative skills often leads to an authoritarian (tacit submission) style of character, the appearance of frequent conflict situations, the emergence of tensions in the relationship of educators and educators, a decrease in the desire to master and study, mental trauma and indiscriminate losses in place in moral and spiritual education, and often to asocial behavior of students [133p ].

We have already considered the pedagogical assumptions of the formation of communicative competence above, communicative competence can also be understood as a complex description in future doctors, it covers communicative competencies, mental-pedagogical competencies, mental states that are visible in the interaction of an individual with other people – all this is manifested in the communicative behavior of a person. It is communicative behavior that covers the individual mental competencies necessary for attitude. But nevertheless, the leading place here in general belongs to communicative values, which are responsible for identifying and justifying the relationship of the doctor and the patient, including his need to communicate.

Communicative competence is also considered as a separate system of internal capabilities of an individual in scientific and pedagogical literature, necessary for qualitative and samapal Organization of communicative actions in certain situations, and the perfect acquisition of

communicative competence means “readiness to enter into a process of attitude in accordance with the real emergent communicative situation” [127,127 p.] understand Bran. It is worth noting that the main indicator of the formation of this competence can be the skill of a fluent, holistic and logically consistent statement of feedback, using the rich expressiveness of the relational language, as well as the ability to understand any type of communicative activity of partners on a specific attitude and respond appropriately. The study of the special place of communicative competence in the professional activities of future medical personnel makes it possible to conclude that communicative competence can also be seen as a prerequisite in the relationship between people and, through this, perform educational, educational and worldview tasks.

Mastering the necessary communicative experience for the growing, younger generation is necessary not only in the processes of direct interaction with other people, but also in order to effectively organize professional activities. The tools that each person needs to obtain information about the character of communicative situations that he needs: (social processes can be narrowed up from the omavian media, literature within a different field of expertise). Therefore, of course, it is also necessary to talk about integrative communicative competency in the professional activities of each prospective physician, with the exception of some special cases, this process can be strongly influenced by special, specialist education.

Referring to communicative competence, it is worth noting that it goes through two stages in its development as some kind of dynamic education: the above-mentioned, the professional and general, which coexist from a certain stage of personality development, as well as being able to develop from level to level. This occurs through the disorganized, stichicized acquisition of the “communicative” " language, as well as through the medium of education. In this case, it is more effective if it goes about the profession, then this process is associated with specially organized study and certain conditions are met.

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