TEACHING CLINICAL DISCIPLINES TO FOREIGN STUDENTS: BILINGUAL TRAINING IN MEDICAL UNIVERSITIES

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DOI: 10.24411/2500-1000-2020-10801

Abstract. The article discusses principal issues of teaching basic and clinical disciplines to foreign students in medical universities of Russia. Currently, in almost all Russian universities foreign students English is the mediun of classroom instruction. The export of medical education to foreign countries is acquiring a promising direction of development in the field of providing medical education in the educational services market. However, methodological and material support, training of teachers who speak a foreign language as an intermediary, as well as the difficulty of communicating in clinical departments with direct communication with patients, contribute to the learning process. In addition, there are certain differences in the approaches and principles of teaching various disciplines between domestic and foreign schools, which requires the release of textbooks and teaching aids in English at a medical university.

Keywords: teaching, medical university, foreign students, bilingual education, clinical departments.

Currently, the development of higher education in the multicultural global community is a field of activity and services that can be attributed to the number of the most popular [1]. Moreover, it should be noted that there exists a serious competition in the educational services market, not only at the internal, but also at the international level. Access to medical education is of high interest to foreign students and is highly demanded nowadays. Besides, the ability to communicate in a foreign language has become an integral part of professional competence of medical practitioners [2], who are involved in teaching international students in Russian medical universities using English as a medium of instruction.

Interest of foreign students in studying at universities in the Russian Federation has a long history and dates back to the 50-60s of the 20th century, when the USSR universities were very attractive for students from Eastern Europe, Asia, Africa, Latin America. The export of educational services in the 21st century is one of the important priorities of the state policy of both - the leading countries of the European Union and the United States and China, as well. This is primarily due to a dual challenge: economic benefit and realization of the geopolitical interests of these countries, and an incentive of these countries to improve quality of education providing training for graduates who will be involved into the global economy and turning national universities into international scientific and educational complexes [1]. Educational institutions in the USA, Great Britain, Germany and France take leading places among the global universities in the number of foreign students [3].

In Russia, export of educational services is also one of the promising areas for the development of foreign economic relations at present days. The development of this process is facilitated by the entry of the Russian Federation into the Bologna process (in September 2003), which involves gradual integration with the educational global systems. This resulted in a phased unification of State educational standards, educational programs, training curricula, which in recent years has prompted the active introduction of changes and the emergence of training requirements for the staff teaching foreign students in English [4].

Discussion. The prestige of the university nowadays is determined by a number of parameters, the rank of the university in the rating systems of both Russian and international levels is among them. Moreover, transition of the university to bilingual education of foreign students is becoming of great significance [5]. English as a highly demanded language among bilinguals and multilinguals usually acts as a lingua franca. In this regard, it is necessary to focus on the quality management system and the possibility of medical graduates' integration into the European educational space. Teaching basic and later clinical subjects for international students is built into a successfully applied two-stage system that involves separation of students and educational process into two directions - teaching in Russian and teaching in English. However, a number of problems arises along this path. Firstly, language training is a very important and complex component of general training for the educational process. A medical instructor must have the level of English knowledge sufficient for qualified lectures and practical classes, as well as for everyday communication with students. Improvement of the language proficiency level should stimulate a medical instructor to pass to a whole new level of his professional activity: possibility of foreign internships, communication with foreign colleagues, reading special literature and preparing their own publications in English in the peer-reviewed journals. However, the most challenging issue regarding teaching in English in medical universities is the fact that English is a foreign language for both subjects of educational process - a medical educator and a student. That is why, it is very important not only to involve medical educators with a certified level of language into the educational process but also to perform preliminary certification of future applicants for their knowledge of English. A foreign language level of the staff should meet the following requirements: speech should be extremely intelligible, each phrase should be clearly understandable, a medical instructor should have an intermediate/ advanced level of English, which is equivalent to the B2 - C1 [5]. At the present stage,

the majority of foreign students use English as a lingua franca.

It is necessary to point out that the process of teaching various disciplines at the faculties of a medical university has a number of features for foreign students with both Russian and English languages. However, it is obvious that teaching subjects in clinical environment and obtaining professional competencies is more difficult for students studying in a foreign language, since the curriculum includes communication with patients, data collection for a medical history, patients' examination. Direct contact with a patient without a teacher-mediator causes difficulties for this group of students. Difficulties can also arise during clinical practice, as physicians do not always have necessary level of a foreign language satisfactory for the needs of practical training. This problem can be solved, firstly, if a medical instructor teaching clinical disciplines constantly participates in the students' clinical practice; secondly, if the process of patients' examination involves patients who have sufficient knowledge of this foreign language; this should be regulated by the instructor.

It should be noted, however, that there are positive aspects of teaching medical disciplines in English for foreign students: the final grades in disciplines are higher in groups of foreign students studying in English after their third year of study than in groups of foreign students who switch to Russian-language study of clinical subjects after their third year of study.

Educational literature that meets the requirements of state educational standards, academic curricula, training plans appears to be another challenge. Successful teaching of various medical disciplines requires appropriate methodological support. Foremost, this refers to textbooks.

Available textbooks in English do not fully meet the existing needs and Russian state standards of higher medical education. The structure of textbooks published in the Western countries, America and in India is consistent with the teaching system in Western and American universities. For example, pathological anatomy is not taught as a separate discipline, and the curriculum contains the subject "pathology" which is a combination primarily of two subjects: pathological anatomy and pathological physiology, as well as genetics and immunology. In this case, pathological physiology prevails: according to the content of the textbooks, mechanisms for the development of pathological processes are given more fully, morphology is presented to a lesser extent [6, 7].

Another problem is the mismatch of terms, when the same processes are called differently. Frequently, definitions of concepts and classification do not partially overlap. In addition, it is necessary to note that there is sometimes an insufficient amount of material, and even complete absence of some sections in foreign textbooks in comparison with similar editions in Russian. For example, there are practically no textbooks in English, where human anatomy is presented at the systemic level. This subject is given in foreign publications along with topographic anatomy, and most of the content of these textbooks is devoted to the topographic aspect. On the other hand, there aresituations when literal translation of Russian-language textbooks does not fully satisfy educational needs of foreign students; and, at the same time, presentation of the material given in English-language textbooks does not fully satisfy and reflects the amount of necessary information.

Conclusion. To sum up, obviously, compliance with positive trends in the global educational environment has positive consequences for the national system of higher medical education. In this regard, international integration should be developed, while preserving national achievements, traditions and the best of our own experience. All this, ultimately, leads to an increase in the quality of education in accordance with the needs of society and the individual, as well as established norms, requirements and standards.

Therefore, it is necessary to achieve a compromise between two approaches, a certain synthesis in which there will be no serious disagreement between the English and Russian variants of the educational material supply; this, at the same time, must meet the requirements and standards of the university providing the educational process. Achievement of this compromise is considered to be the biggest methodological problem. The main task in this case is an accessible, intelligible explanation of the educational material, as it is mastered, in order a student after graduation will be able to successfully prepare and pass the exam to confirm the diploma in his homeland, using English-language literature.

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ВОПРОСЫ ПРЕПОДАВАНИЯ КЛИНИЧЕСКИХ ДИСЦИПЛИН ИНОСТРАННЫМ СТУДЕНТАМ ПРИ БИЛИНГВАЛЬНОМ ОБУЧЕНИИ В МЕДИЦИНСКИХ ВУЗАХ

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Аннотация. Данная статья посвящена вопросам преподавания базовых и клинических дисциплин иностранным студентам в медицинских ВУЗах России. В нашей стране в настоящее время практически во всех медицинских ВУЗах преподавание иностранным студентам ведется на английском языке. Экспорт медицинского образования в зарубежные страны приобретает перспективное направление развития в сфере предоставления медицинского образования на рынке образовательных услуг. Однако методическое и материальное обеспечение, подготовка преподавателей, владеющих иностранным языкомпосредником, а также сложности общения как на клинических кафедрах, так и проблемы непосредственного общения с пациентами вносят свои особенности в процесс обучения. Кроме того, имеются определенные расхождения в подходах и принципах преподавания различных дисциплин между отечественной и зарубежной школами, что требует выпуск учебников и учебных пособий на английском языке в медицинском ВУЗе.

Ключевые слова: преподавание, медицинский вуз, иностранные студенты, билингвальное обучение, клинические кафедры.