APPROACHES AND METHODS FOR TEACHING SPECIAL TERMINOLOGY IN ENGLISH CLASSES AT MEDICAL UNIVERSITIES

Quziyev Sarvarbek Ilmiddinovich
PhD, Teacher of the Department of the English Philology,
Fergana State University
Email: sarvarkuziev1988@gmail.com
https://doi.org/10.5281/zenodo.20756809

Abstract: The continuous rise of English as the primary global medium of communication highlights the critical need for efficient language teaching methodologies, particularly in professional domains like medicine. This article explores the application of the communicative system-activity approach and communicative methodologies in teaching medical terminology at medical universities. Given that cognitive capacities for language acquisition are highly productive during early and young adulthood, incorporating specialized language training during this period is essential. The paper reviews the historical development of the communicative approach within the European educational framework (including the Common European Framework of Reference levels like Waystage and Threshold) and discusses its contemporary integration into the Uzbek higher education system. The author emphasizes that a communicative framework enhances linguistic, sociolinguistic, and strategic competencies, ensuring pragmatic adequacy in professional medical discourse.

Keywords: *communicative methodology, system-activity approach, medical terminology, medical universities, language competence, interactive teaching.*

1. Introduction

The status of the English language as the primary global medium of communication remains undisputed, with no visible signs of deceleration in its expansion. In the context of globalized healthcare, the mastery of specialized medical English and clinical terminology has become an indispensable requirement for future medical professionals.

Cognitive studies indicate that the human brain exhibits its highest plasticity and capacity for language acquisition and knowledge retention during the first half of life. Consequently, optimizing this productive phase by implementing robust ESP (English for Specific Purposes) methodologies in higher education is crucial. This article analyzes the communicative system-activity approach as one of the most viable and progressive models for instructing medical university students in specialized terminology.

2. The Communicative System-Activity Approach in ESP

The implementation of a communicative system-activity approach implies that the English language is not taught in isolation as an abstract set of grammatical rules, but as an organized, systematic, and interconnected medium of professional communication. This approach models real-world speech activities within the classroom, making language acquisition an organic component of the students' broader pedagogical and professional objectives.

Within this framework, the interactions between various learning components are fully optimized. These components include:

- The structural system of the English language.
- A comparative analysis between the students' native language and English.
- Core cognitive speech mechanisms (speech production, perception, and interaction).
- Textual analysis as a structured system of professional communication.

Ultimately, this systematic instruction leads to the development of comprehensive language proficiency where medical terminology is seamlessly integrated into functional domains, communicative situations, and professional interactions.

3. Historical Development of the Communicative Methodology

The foundations of modern communicative language teaching (CLT) trace back to the initiatives taken by the European Commission in the 1960s and 1970s. In 1971, a panel of experts initiated research to create a cohesive framework for teaching modern languages to adult learners and students, focusing primarily on enhancing real-world communicative abilities. This effort led to the conceptualization of specific proficiency thresholds, which were later adapted for higher education institutions.

By the 1980s and 1990s, extensive research projects (such as Project No. 12, *"Learning and Teaching Modern Languages for Communication"*) helped systemize the communicative approach across Western Europe—notably in the UK, France, Germany, and Spain. These developments established three initial stages of language authority:

1. **Survival Stage**
2. **Waystage**
3. **Threshold Stage**

In the English educational model developed by researchers J. van Ek and J. Trim, these proficiency tiers are categorized into major functional components that are highly applicable to medical discourse:

Table 1: Structural Components of Communicative Competence

Component	Description & Application in Medical English
Phonetic & Linguistic	Mastery of linguistic material to construct accurate professional speech utterances.
Sociolinguistic	The ability to select appropriate language units depending on the communicative situation (e.g., doctor-to-patient vs. doctor-to-doctor).
Discourse Competence	Achieving coherence and cohesion in the production and perception of complex medical texts.
Strategic Competence	Utilizing verbal and non-verbal compensation strategies when facing language gaps.
Socio-cultural & Social	Understanding the institutional culture of healthcare and displaying readiness to collaborate.

4. Operational Components of the Communicative Framework

According to the established framework, teaching specialized terminology through a communicative lens requires focusing on several vital operational parameters:

- **Contextualized Communication Situations:** Simulating professional encounters, such as interactions with hospital administrative staff, public health communication, academic medical conferences, and peer-to-peer consultations.
- **Language Functions:** Developing skills for specific tasks like gathering patient history, explaining clinical diagnoses, expressing medical doubts, and reporting laboratory outcomes.
- **Thematic Grouping of Meanings:** Systematizing vocabulary into specialized categories (e.g., anatomy, physiology, healthcare systems, pharmacology, and patient care).

- **Interactive Media and Source Material:** Utilizing authentic medical journals, case studies, auditory clinical simulations, and digital multi-media materials to act as accurate sources of professional information.

The evaluation of student progress within this model is guided by two main criteria: **pragmatic adequacy** (the alignment of communicative intentions between professional partners) and **communicative efficiency** (the ultimate success of the interaction).

5. Conclusion and Local Implementation

In recent years, the Uzbek higher education landscape has witnessed promising shifts toward integrating communicative methodologies into the national language instruction curriculum. Although this integration is still evolving and not yet fully universal, the results from pilot programs in medical and technical universities demonstrate substantial potential.

Adopting a communicative system-activity approach for teaching medical terminology shifts the focus from passive memorization to active, professional language utilization. This pedagogical transition is essential for preparing globally competent medical specialists in Uzbekistan who can confidently participate in international healthcare discourse.

Adabiyotlar, References, Литературы:

1.Numonjohnovna, E. N., Ugli, B. B. B., & Ilmiddinovich, K. S. (2019). Problems in developing speaking skills of students of technical higher educational institutions. *Проблемы современной науки и образования*, (12-1 (145)), 95-96.

2. Ilmiddinovich, K. S. (2020). Methods Of Teaching English To Young Learners. *The American Journal of Social Science and Education Innovations*, 2(11), 65-69.

3. Ilmiddinovich, K. S. (2021). The methodologies of learning english vocabulary among foreign language learners. *ACADEMICIA: An International Multidisciplinary Research Journal*, 11(4), 501-505.

4. Ilmiddinovich, K. S. (2020). Online evaluating the language learners on the platforms of the social networking services and delivery people. *International Journal of Research in Economics and Social Sciences (IJRESS)*, 10(11).

5. Кузиев, С. И. (2020). Общение между врачами и медицинскими работниками: роль и ранг медицинской терминологии в хирургии, здравоохранении и истории медицины. *Вестник науки и образования*, (13-3 (91)), 29-31.