LANGUAGE PORTFOLIO - A TOOL FOR SELF-REALIZATION OF PROFESSIONAL-LANGUAGE COMPETENCIES OF A STUDENT

Abstract: The language portfolio is considered as an instrument of self-realization, self-esteem, self-perfection. An excerpt of a practical lesson in the discipline “Russian language” with gaming technologies and a table to test the acquired skills of students with a professional orientation based on the results of the lesson are given. The article presents a short fragment on studying modern methods of teaching Russian as a foreign language. A brief review of the European language portfolio is presented as a technology for determining the level of proficiency in Russian as a foreign language and determining the professional competence of students.

Key words: language portfolio, professional competence, language competence, self-control, self-perfection.

Language: English


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Introduction
The modern labor market requires a specialist to have a competent approach in various areas of his professional activity, including all kinds of communication situations. In this case, the concept of specialist competence implies a focus on professional self-development in the field of medicine. To accomplish the tasks set for the teacher, which contributes to the implementation of the educational process for students to master the necessary professional and language competencies in teaching the Russian language, it is necessary to put into practice an appropriate set of training tools and methods, which should be aimed at developing not only speech skills, but also professionally significant qualities of the personality of the future physician. Their formation can be facilitated by the individualization of the professional training of a medical student.

LITERATURE REVIEW:
According to I. E. Unt, individualization is “taking into account in the learning process the individual characteristics of students in all its forms and methods, regardless of what features and to what extent are taken into account”. Studying scientific research in the field of teaching Russian as a foreign language, one can encounter interesting and practically significant factors that, when experimented, gave good results. Since the contingent of students is of different levels of social strata and with different individual abilities, it is difficult for the teacher to implement the standard educational material of the university in a group form. To determine the degree of formation of professional competencies, first we had to find out the level of linguistic, sociocultural and psychological criteria in first-year students were from the lowest to the highest level. Measurement of professional criteria also did not give the desired results, but it is worth noting that the experiment was conducted in the first course. Since the formation of professional competencies can only be discussed in the last courses. But the primary task of higher education is to serve the foundation for
the formation of professional competencies, and it is over, this must be done already from the first year of study of students at the university. After analyzing the results of testing to determine the initial level of linguistic knowledge and communicative skills in Russian as a second language, we can conclude that medical students have linguistic knowledge, but make many lexical, phonetic and grammatical errors. As for communicative skills, it should be noted among medical students their presence at the household level and their absence at the professional level. In order to determine the presence or absence of social communication experience, as well as the initial level of formation of socio-value orientations among first-year medical students, he was offered a questionnaire developed on the basis of the methodology of “Value Orientations” by M. Rokich. In order to achieve adequacy in the questionnaire when determining socio-cultural criteria for first-year medical students, the methodology of M. Rokich was translated into Uzbek and proposed by him in Russian and in Uzbek. Students were asked to answer the following questions: “Why did you choose the profession of a doctor?”, “What, in your opinion, does the phrase “good doctor” mean? Write some qualities of the ideal doctor”, “Write some values that are important for the real doctor”, medical students should also determine the role of the doctor in modern society, noting his most important activities.

**DISCUSSION:**

It is known that the following activities of a medical specialist are most important for society: diagnostic, preventive, rehabilitation, psychological and pedagogical, medical, organizational and managerial, research. The concept of a qualified doctor and a true specialist includes - with a humanistic worldview, in which not material values, but altruistic values are dominant. The future doctor must have an established system of values. The desire to help people, love and respect for patients, a sense of responsibility, dedication should prevail over the personal interests of the doctor. That is, a formed system of competencies is a necessary condition for a highly qualified medical specialist. Having examined the value orientations of freshmen, we saw more similarities than differences. After analyzing students' answers to questions, they came to the conclusion that most students chose the profession of a doctor because they want to be respected people, have a high social status and material security. But I think that one should not be surprised and not satisfied with the results of the questionnaire, since the task of the university, and the teacher itself, is to direct the student in the right direction, identify errors in teaching the specialty language, and provide the necessary educational and educational material. The traditional approach to teaching the Russian language as non-native medical students does not always take into account the characteristics of the individualization on the educational process. Individual-creative methods of professional activity in subjects are not developed, since the same methods and teaching methods are used in teaching medical students. The individual educational trajectory of a medical student does not develop, since linguistic, sociocultural and psychological criteria suffer, and as a result, professional. In order to increase the efficiency of professional training of medical students in their study of the Russian language as non-native, it is necessary to use the technology of individualized training aimed at individualizing professional training. The individualization of the educational process includes three types: individual, subjective and personalization, as each student represents a personality. As an individual, a student has certain properties: individual abilities and linguistic abilities. As a subject of educational activity, he possesses or does not possess the ability to carry out tasks of different difficulty levels. As a person, certain properties are inherent in him: the presence of a context of activity, personal experience, worldview, feelings and emotions, interests and desires, status in the team. A complex learning process is taking shape, where it is difficult for the teacher to navigate in the choice of the method of organizing the educational process. But if you familiarize yourself with the specifics of the European language portfolio in detail, it is precisely in this situation that this technology can give good results in the context of individualization of training at a university. The task of modern higher professional education is the quality training of competitive, competent and mobile specialists who are able to find solutions to professional problems in the changing conditions of social development in the era of globalization. Particular attention to the competencies listed above is given in the normative documents of international organizations of UNESCO, the Council of Europe and the European Union. The language portfolio, adopted by the Council of Europe in 1996 in Strasbourg, describes the levels of foreign language proficiency in accordance with existing international standards and meets the requirements of innovative educational technologies, as well as modern integration requirements in the educational process of universities, where the emphasis is on research and practical oriented professional activity of each student. In an educational environment where the teacher, in order to organize his pedagogical activity, encounters difficulties in choosing methods for testing the student’s existing competencies and in stimulating the formation and development of missing linguistic or professional competencies, the language portfolio can serve as an excellent tool. The language portfolio can be implemented for testing, self-testing of a Russian language teacher, where the work of the teacher is facilitated by itself, and the student himself can clearly
see his incompetence in some language and professional aspects, and also start working on himself under the guidance of the teacher. The European Language Portfolio (ELP) is called upon to promote the formation of a single educational space, the preservation of linguistic and cultural diversity, the strengthening of the student’s role in the educational process, the enhancement of his motivation, autonomy, the development of self-esteem skills, and the formation of reflective skills in the process of learning / learning Russian as a foreign language. The ELP is a document in which the most diverse experience of language learning and intercultural communication can be recorded. Through the European language portfolio, you can determine the goals and objectives of learning, help in choosing a teaching methodology, regulate and standardize the scale of levels of foreign language proficiency, normalize the ratio of the subjective self-esteem of a student and an objective assessment of his or her level of knowledge of a foreign language. Working with a language portfolio (LP), a student can determine the level of his language competence, as well as demonstrate his language abilities, with the help of LP, teaching the Russian language becomes transparent for the student and helps him develop his mental abilities and self-esteem. Also, when the teacher provides the program and the recommendations for mastering professional competencies, the student has the opportunity to independently realize the competencies that do not fall within him. Since the concept of the language portfolio makes it possible to expand the scope of the educational process by including in the system of assessing the achievements of students in authentic intercultural direct and indirect learning. “Portfolio” increases the student’s motivation, his responsibility for the results of the educational process, contributes to the development of a conscious attitude to the learning process and its results.

To unify the requirements for knowledge of a foreign language, the European Council has developed a single standard of the Common European Framework, with the following levels:

A1 (Breakthrough, Basic User) assumes the presence of basic knowledge of the language and the ability of its owner to understand simple questions and answer them.

A2 (Waystage, Basic User). A student who knows the language at this level can communicate on simple topics, asks questions and understands typical phrases of everyday life situations, such as checking into a hotel, purchasing tickets at the box office, etc.

B1 (Threshold, Independent User). The ability to maintain a dialogue and form a statement on a wide range of topics, the presence of many errors even in basic structures, an insufficient level of speed.

B2 (Vantage, Independent User). A person can communicate on a wide range of topics and problems, has an adequate vocabulary, but he does not speak fluently and does not always accurately express his thoughts.

C1 (Effectiveness, Proficient User). The ability to actively communicate on almost any topic using wide language capabilities, the presence of a small number of minor lexical and grammatical errors.

C2 (Mastery, Proficient User) Excellent knowledge of the subtleties of the language, fluent speech, almost complete absence of errors and inaccuracies.

From the description of the requirements of these levels it is clearly seen that the fundamental skills for mastering a language at any level are the ability to understand speech, speak and extract information from texts.

If you equip the student with the requirements for knowledge of the Russian language and explain to him the principle of working with LP, he will try to master the levels that he sees in a visual way and set goals for himself to achieve the required level of competencies. Consider a fragment of a lesson in the discipline "Russian language" on the lexical topic "Respiratory system", where such methods are actively used along with lexical and grammatical tasks to form professional competence, as situational tasks, role-playing games that can increase students' motivation, their interest in the Russian language. Initially, students read a short text on the topic, accompanied by visual material for a better understanding of medical terminology.

Work on the text consists of the following steps:

1. Reading text with the obligatory selection of new vocabulary.

2. Translation of the text with a record in the terminological dictionary of new concepts: respiratory system, nasal cavity, nasopharynx, larynx, trachea, bronchioles, lungs, etc. When fixing new words and concepts, the correct pronunciation of the terms must be indicated.

3. Consolidation of the pronunciation of new terms using illustrations 1, 2 located in a multimedia presentation. Then, to consolidate the new vocabulary and apply it in speech practice, students are invited to work on the dialogue “In the hospital”. Students need to read the dialogue, and then work it out in pairs to form the professional competence of the future doctor. -Hello! - Hello! - Tell me exactly where your pain is concentrated? - I have chest pains. - Do you have a fever? - Yes, I have a temperature. - Do you have blood when coughing? - Yes sometimes. - You may have tuberculosis, you need to take a picture.
Impact Factor:

ISRA (India) = 4.971
ISI (Dubai, UAE) = 0.829
GIF (Australia) = 0.564
JIF = 1.500

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IBI (India) = 4.260

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After completing the assignment, students are invited to work with illustrative material “What hurts?”. Students are given a presentation with illustrations of pains of various kinds, they need to make sentences with the design “The patient hurts ...”:
- What is the patient’s temperature?
- The patient has a high fever.

At the end of the lesson, students should independently make a dialogue in pairs “Doctor - a patient with ORVI”, “Doctor - a patient with asthma”, “Doctor - a patient with pneumonia”, "Doctor - a patient with bronchitis.” For example:
- Good afternoon.
- Hello.
- What worries you?
- I have a strong cough and fever.
- How many days do you get sick?
- Three days.
- Now I will listen to your lungs and measure the temperature. Your lungs are clean, there is no inflammation. The temperature is high 38.7 C. You may have bronchitis. You need to take a picture. Come back tomorrow to take a shot.
- Good. Thank you bye.

Dialoge of a doctor with a patient with symptoms of bronchitis.

Table 1. Diagnostics

<table>
<thead>
<tr>
<th>Doctor's questions</th>
<th>Patient Answers</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. General complaints.</td>
<td>- I have a fever, it makes a noise in my ears. It also shakes me. Yesterday I was in a fever all night, tickled in my throat. And today it became painful to swallow, the nose was stuffy, the cough started.</td>
</tr>
<tr>
<td>- What worries you?</td>
<td>-“What are you complaining about?”</td>
</tr>
<tr>
<td>-“What are you complaining about?”</td>
<td></td>
</tr>
<tr>
<td>2. Character of cough:</td>
<td>- Cough with sputum.</td>
</tr>
<tr>
<td>a) the presence / absence of sputum</td>
<td>- Dry. Sputum does not clear a throat.</td>
</tr>
<tr>
<td>- What is your cough: dry or with sputum?</td>
<td>- Not very strong. \ Very cough.</td>
</tr>
<tr>
<td>b) intensity</td>
<td></td>
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<tr>
<td>- What is your cough: small or strong?</td>
<td></td>
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</tbody>
</table>

Record in the medical history.
Dialogue with the patient and a sample record in the information security.

Table 2. Clinical map

<table>
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<tr>
<th>Questioning plan, doctor's questions</th>
<th>Patient Answers</th>
<th>Medical record</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. General complaints</td>
<td>- My heart hurts.</td>
<td>The patient complains of (the patient is disturbed) attacks of intense pain in the region of the heart and behind the sternum (or: intense paroxysmal pain) of a compressive, pressing nature, radiating to the left arm, shoulder, neck. Pain occurs during physical exertion. last from 2 to 20 minutes, are repeated up to 5-10 times a day. Attacks of pain are accompanied by the appearance of general weakness, palpitations, with intense night pain - a feeling of fear of death. It is stopped by sublingual administration of nitroglycerin.</td>
</tr>
<tr>
<td>- What worries you?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“What are you complaining about?”</td>
<td></td>
<td></td>
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<tr>
<td>2. The nature of the pain</td>
<td>- The heart compresses, presses on the chest.</td>
<td></td>
</tr>
<tr>
<td>- What pains bother you: squeezing, stitching, cutting?</td>
<td></td>
<td></td>
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<tr>
<td>3. The intensity of pain</td>
<td>- Attacks happen and it hurts very much.</td>
<td></td>
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<tr>
<td>- What pains do you have: strong or weak?</td>
<td></td>
<td></td>
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<tr>
<td>- Do you have constant pain or bouts?</td>
<td></td>
<td></td>
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<tr>
<td>4. Localization of pain - Where does it hurt? Which place? Show!</td>
<td>“Here, in the chest, in the middle, and here on the left.”</td>
<td></td>
</tr>
</tbody>
</table>

Philadelphia, USA
Impact Factor:

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5. Radiation of pain. Does pain give off somewhere? Where exactly?
- Yes, in the left hand, in the left shoulder and in the neck.

6. Duration
- How long does the pain usually last?
  - A couple of minutes.
  - Sometimes 2-3 minutes, sometimes up to 20 minutes
- How long does the attack last?

7. Repeatability of pain - How often do seizures recur during the day?
It happens that 5 and even 10 per day

- When pain occurs: at rest, with physical exertion?
  - It starts to hurt when I carry something heavy or work in the garden.

**CONCLUSION:**
The teacher, in the next lesson, having checked the student’s homework, points out the grammatical, syntactic and stylistic mistakes made, thereby correcting language competencies and provides an incentive for the formation of student professional competencies. Thus, in the Russian language classes in the Uzbek audience, they are guided primarily by the principle of the formation of communicative skills in the field of professional communication. The most effective from this point of view are the use of visual teaching aids (drawings, videos), situational tasks that contribute to the activation of communication skills and the use of the studied material in speech practice. At the end of the lesson, you can offer students the completion of their curriculum vitae in the form of a table “Diagonistics” and “Clinical map”, to determine the level of learning material at the language and professional level (the student can fill out this table on their own as homework).

**References:**

2. Kuzovlev, V.P. (1986). Methodological characteristics of the class as a means of individualizing the process of teaching foreign language communication. *Foreign languages at school, No. 1*.