

THE EXPERIENCE OF EMERGENCY REMOTE TEACHING ENGLISH FOR MULTICULTURAL APPLICANTS

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INTRODUCTION

The aim of this research is to present the experience of teaching a course of English for international applicants of the Russian medical university, in conditions of remote digital learning. This course was first introduced in 2010, when the first applicants from Brazil arrived to study at Kursk State Medical University (KSMU). Before that, international applicants did not study English prior to entering the University. The author also taught the same course of English for Brazilian applicants in 2017 and 2018 and in the multinational academic groups in 2019. The focus of the course expands from the language of medicine to the adaptation of students to their new conditions of living in Russia.

In 2020, there was an urgent need to change the format of learning to that of online. The analysis of the experience of online teaching and learning has facilitated the identification of the problems and challenges a teacher faces during online foreign language training.

BACKGROUND OF THE COURSE

Being the first University in Russia to teach foreign students in English, Kursk State Medical University admits students from different countries in the world. The first international students of KSMU were from Syria and India and came to study in 1992. The International Medical Institute, a new division of KSMU, officially began its work on February 13, 2020. It is based on many years of experience at the University in international activities and traditions established in the 1990s. Now applicants that enter KSMU take a pre-university course at the International Medical Institute. It is a compulsory pre-university training in different subjects, including English. To some extent, it is the first stage of the students' lifelong learning (pre-university training – undergraduate education – postgraduate training).

DESIGN OF THE COURSE

Before emergency online learning, this course of English was taught face-to-face. The course duration is 8 weeks, with one 3 hour weekly class. The applicants aim to acquire the following competences:

- Professional language competence;
- Professional communicative competence;
- Cross-cultural competence.

Professional language competence is of great necessity for student applicants. They are introduced to the professional language of medicine, as they will be trained in Medical Sciences in English, in the process of undergraduate education. Studying English for Medical Purposes includes the formation of not only language competence, but also the basics of professional communicative competence.

A doctor's communicative competence is of special importance nowadays as understanding and communication come to the foreground in Medical Care. The increased interest in this respect over the last decades is related to the concept of the patient being seen as a partner in Health and Medical Care, and therefore to a change in the previous approach of simply treating an ill person (Tomova, 2018). In order to form this competence, many pedagogical technologies have been adapted to the conditions of use for medical students or designed by the author on the basis on Reflective and Creative Approach. These include imitation and business games, problem cases, didactic dramas, etc. They are presented in the author's textbook, published at KSMU (Razdorskaya, 2018) and used in the classes of English.

The last, but not least, element is the cross-cultural competence. Each language is closely connected with its culture, it indicates the culture, is an obligatory precondition for the development of the culture in general. Traditionally, Russian specialists in didactics view English as a tool for getting to know the culture of the English-speaking countries. In our environment, it has become a tool for integrating the international students within a local community and for getting to know Russian culture and the history of Kursk and Kursk region, the part of Russia where the students will be studying for 6 years. It is necessary to adapt the applicants to the new living conditions and learning environment. The applicants get information concerning Russia and its culture, about local history and culture of Kursk Region, about KSMU and its history. Thus, a tolerant attitude is formed to both Russian culture and the native cultures the students represent. Moreover, the applicants adapt to the multicultural community of the students of KSMU. Although Russian students study in the Russian-speaking academic groups, the international and Russian students can meet each other during extracurricular activities (sport, scientific conferences for the students, cultural events, etc.). Consequently, communication with the international students motivates the Russian students to study English (also a compulsory subject) at the University.

In fact, the course of English for the foreign applicants has become blended, because it started in February 2020 in face-to-face format and from March until July 2020 it was offered in online format (Moodle and Zoom). It has become necessary to adapt the technologies used for the formation of the competences mentioned above.

PRACTICAL EXPERIENCE OF TEACHING THE APPLICANTS

Only three classes in February, 2020 were in face-to-face format, but it was a nice opportunity to see the students personally. There were 8 groups with 10 applicants in each. Teachers of the Department of Foreign Languages of KSMU were teaching students using the course designed by the author. In some groups there were applicants from only one country (for example, Malaysia), while the applicants from the other groups were from various countries in Asia, Africa and Latin America. The author taught two academic groups, with applicants from Brazil, India, Nigeria, Thailand and the Republic of South Africa. This multicultural contingent required the use of these cross-cultural education methods.

There is no doubt that cross-cultural interactions can give students a rich learning opportunity. In the classroom, they can exchange ideas about different issues (Bai, Larimer, & Riner, 2016). In our case, it was the exchange the ideas about doctor - patient communication in different countries.

During the first two classes in English the applicants were told about the importance of the communicative competence for a healthcare provider. The author initiated a discussion about the characteristic features of doctor - patient communication in the applicants' home countries. As these applicants will have practice in Russian hospitals during their 5th year of study (requiring that they also study Russian during pre-university and university training), they were informed of the patterns of doctor and patient communication in Russia.

During remote learning, because of the confinement and closure of face-to-face activities, the applicants received the task of writing an essay about the importance of communicative competence for a future doctor.

An applicant from Malaysia wrote:

"A good communication will provide respect. Patients will have more respect to you as a doctor that wants to treat them. With that, they will naturally follow the decisions you put for a better health care in different aspects for them. They will avoid from making arguments as they respect you. Patients reporting good communication with their doctor are more likely to be satisfied with their care. Finally, a good communication of a doctor will give an example for them on how they should talk or behave with you as a doctor."

An applicant from Brazil wrote:

"In Brazil, we don't have a lot of problems with doctor – patient communication. Brazilians are very charismatic people, so it is easy to form a good relation between them. But we have exceptions, because this is a concept for the majority of people, not every person who lives there. I think I need to learn how to communicate with the patients effectively. The informal language is not the best to be used. Some people can't start a good conversation with a doctor. So, it is very useful practical experience before I get practice with a real patient."

An applicant from Thailand wrote:

"Doctor-patient communication in Thailand has many different problems. One problem is when a patient thinks he knows more than the doctors and comes with his own diagnosis and ideas of his problems. This greatly hinders the process of the communication since the patient will be reluctant to listen to the doctor and be stubborn. Another problem is that there are some doctors who will look down at the patients and will not listen to them properly. There are also cases when the doctor will raise his voice against the patient or the patient will raise his voice against the doctor. These are the problems that are prevalent in Thailand, although it is improving day-by-day."

Having three-years' experience of teaching Bioethics for the international students, the author informed the applicants of the different models of doctor and patient communication, such as paternalism, technical model, informative model, etc. We discussed if all models are applicable to modern patients. Then the students received the problem cases with a brief description of a doctor's improper behaviour, while talking to patients. The students had to dramatize them and think of a patient's reaction to breaking the rules of professional ethics by the doctor. In some dramatization the patients were refusing the treatment, and there was an opportunity for instilling in applicants the principle of a patient's autonomy and his/her right to refuse the treatment. It was difficult to adapt these activities for online learning. Only the applicants who were living in the same hostel were making videos of their imitated doctor – patient communication in English.

During the third class the applicants visited the museum of the history of KSMU. The author acted as a guide and showed the students different exhibits, dating from 1935, the year of the foundation of the University. At the museum, there are also gifts from the various countries of student origin. Before remote learning, the applicants usually visited the museums and landmarks of Kursk, but in the spring term of the academic year 2020 – 2021 there became a necessity to find videos about Kursk, for showing to the applicants with comments by the author in English. The information about the history of Kursk and Kursk region from the local sites requires the translation into English, as these sites don't have an English version. The author will also be using a virtual tour of the museum of KSMU with the comments in English as it is also only available at the site in Russian.

DIVERSITY OF LANGUAGES AND ITS IMPACT ON THE TEACHER'S ACTIVITY

This academic year the course has required certain adaptation to the multinational contingent of the academic groups of applicants. There was a need to modify the course because of the diversity of the applicants. Usually, in the process of teaching foreign applicants from only one country (Brazil), the author initiates the comparative analysis of lexical and grammar phenomena of English and the students' first language (Portuguese) to prevent its interference. In this situation, the applicants become the active subjects of the educational process as they introduce the teacher to the peculiarities of their native language. The usage of comparative analysis contributes to the development of the applicants' cognitive skills and promotes their motivation for studying English.

In conditions of a multinational group, more time is spent on preparation for online classes and on initiation of the cooperation with the students whose first languages are Thai and Afrikaans. Traditionally, during offline learning Brazilian students received the assignments worked out by the author and based on the comparative analysis of the language of medicine in English and Portuguese. Now Internet was needed to find the examples of medical vocabulary in Thai and Afrikaans. These examples were shown in the presentation during the class in Zoom, and the applicants had to say out their English equivalents.

PEDAGOGICAL CHALLENGES

In the process of teaching this course online the author faced the problems of multitasking, limited technical support and, of course, lack of face-to-face interaction. Before that, there were no distance teaching and learning English at KSMU. In fact, the author was using Zoom for the first time, so it was necessary to modify the entire course of English from face-to-face to online mode, to derive tests for students in each class and to take into account the peculiarities of the multinational contingent of the applicants. Moreover, both the students and the teacher were facing problems of psychological character, as it was rather difficult to get used to online mode of teaching and learning. Besides, during emergency online education it was necessary to get used to online relationships and to humanize them. On the basis of this difficult, but challenging experience the author would like to point out the teachers' needs in their lifelong learning: they should be trained in the usage of modern technologies of digital teaching of English and on online interaction with students.

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