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**LITERARY TEXTS IN TEACHING BULGARIAN
TO MEDICAL STUDENTS**

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Introduction	7
Significance and relevance of the research	9
Theoretical framework of the study	11
Procedural and methodological characteristics of the study	15
General characteristics and structural parameters of the thesis	18
Chapter One	
Literary texts in the communicative organization of the Bulgarian language education of medical students	18
Chapter Two	
The theoretical and applied aspects of the use of literary texts in teaching Bulgarian language to medical students	28
Chapter Three	
Design of experimental pedagogical research. A model for the formation of communicative competencies in Bulgarian language teaching of medical students	39
Chapter Four	
Analysis of the results from the experimental study	60
Findings and Conclusions	83
Contributions of the dissertation	89
Publications on the topic of the dissertation	91

INTRODUCTION

The process of teaching Bulgarian to medical graduates from other countries raises several challenges for the students and the university teachers. To develop sustainable linguistic and communicative competencies - at the level expected in the curricula for mastering Bulgarian as a second language in the specialty "Medicine" - important conditions are: the development of a complex, interdisciplinary educational environment, the targeted selection of teaching content, the effective organization of the learning process and the implementation of appropriate tools for objective assessment of the results achieved.

In placing future health professionals in pedagogical situations that simulate interaction in real medical conditions through texts specific to language and style, students are expected to acquire knowledge of the language. This means acquiring sufficient vocabulary, permanently consolidating the introduced vocabulary and grammatical norms, acquiring communicative competence, and understanding and using the target language appropriately and creatively. The ultimate goal of university language training is for students, and future physicians, to interact fully and professionally with patients in a social and intercultural context.

From the perspective of clinical practice, communication is understood as communication through different types of oral and written related texts. To perceive and produce these, medical students must possess receptive and productive communication skills that, although formed relatively autonomously, are inseparable from one another in the process of interpersonal interaction.

The physician, a participant in the Poly subjective clinical dialogue, performs different social roles that reflect on his speech performances: that of a professional who builds trust in the patient to cooperate in obtaining information important for his health status; that of a medical professional who provides health care at crisis moments in the patient's life; that of an expert who, by his actions, intervenes in the patient's body; that of a counselor who influences the patient's psychological adaptation to the diagnosis and future treatment; that of a mediator who shows empathy, sympathy, and compassion. To

practice the medical profession, together with medical knowledge and skills, the health professional must possess a set of theoretical knowledge and practical skills for successful professional communication through different types of texts. A prerequisite for effective speech interaction is the development of communicative competence.

Connecting with the patient on a human and humanitarian level - to build a trusting relationship with him/her to provide objective and complete data on the history of his/her illness - makes verbal and non-verbal communication between the health professional and the patient an important element of the diagnostic and therapeutic process. A prerequisite for such an "encounter" is that both sides in the act of communication are fluent in the same language, its social conventions, and its cultural context. In this sense, communication with literary works in Bulgarian broadens the educational horizon of future medical students. At the same time, it adds to the knowledge of culture, history, traditions, patterns of behavior, cultural and spiritual values, and ways of expressing feelings, ideas, and thoughts through the language, influenced by the ethnic, cultural, and religious affiliation of its users. The reading and analysis of literary texts in which foreign language reality is reflected leads to the development of communicative competence in the target language. Its elements are the sociocultural, discourse, strategic, and other components of this theoretical concept. They support the mastery of the cultural-scientific minimum containing a certain number of frequent communicative constructions with a specific national accent. Mastering the entire set of language knowledge, skills, and experience ensures that messages will be understood correctly by participants in verbal communication.

In this perspective, the presented study - with a focus on linguistic issues - investigates the influence of fiction texts on the development of medical students' communicative competence for professional communication in health theory and practice in a broader aspect, influenced to a very large extent by humanistic rhetoric and transhumanism. These relatively new scholarly directions refer to the debate on human ethics-ontological interaction based on linguacultural knowledge and practical communication skills. The

research interest in the present dissertation on „**Literary texts in teaching Bulgarian to medical students**“ is directed towards unexplored areas in contemporary science - the study of the relationship between medical knowledge and the development of communicative competence in the teaching of Bulgarian language to medical personnel, and in particular - the interdisciplinary dialogue between medicine and literature - a mediator between culture and the acquisition of the target language - in the context of medical humanities.

SIGNIFICANCE AND RELEVANCE OF THE RESEARCH

The current situation of globalization of the world and migration processes caused by economic crises, military conflicts, and educational and labor mobility, determines the necessity of speaking several languages in everyday life and professional practice. In an environment of the increasing internationalization of medical universities within the European Higher Education Area (EHEA), competence to communicate in a foreign language is an important socio-cultural and lingua-didactic issue. As one of the key competencies in the European Framework of Reference, foreign language communicative competence is a mandatory element of the professional portfolio of the modern successful and competitive health professional.

The relevance and practical-applied value of the dissertation can be justified at different levels: about the need to form communicative competencies for professional interaction of future doctors, in the context of internationalization of higher medical education, and concerning the concept of specific conditions of language interaction in health care. The need for communicative skills is also confirmed in today's conditions when innovations and high-tech solutions mediate doctor-patient communication when the achievements of telemedicine, robotic, and minimally invasive surgery are transferred to education and clinical practice. Observations related to these processes show that medical devices cannot take over the role of healthcare professionals who must interact with patients daily. This raises several issues for medical education, the responsible and

balanced implementation of which requires that medical students must study both the natural sciences and the humanities in the basic medical course.

Effective processes of communication and the exchange of information and knowledge between people of different cultural and linguistic backgrounds are unthinkable without the use of a commonly understood medium of communication. Such a verbal code is the language. The process of learning the Bulgarian language for medical students has its specificity. It takes place in a multilingual classroom intending to acquire knowledge, skills, and strategies for polysubjective and intercultural human-ethical interaction in a Bulgarian-speaking healthcare environment. Talking about the disease, structuring diagnostic questions, perceiving the patient's responses, characterizing symptoms, announcing the diagnosis, prescribing therapy, and describing the subsequent progression of the disease are mediated by language. To decode its signs and derive their correct meaning in dialogue with its speakers, it is undeniable that, alongside linguistic knowledge and skills, medical students must possess the competencies to recognize and interpret appropriately the synonymous, metaphorical, and subtextual meanings of the utterances, often mediated by patients' emotions. Going beyond the accumulated transcendental linguistic knowledge of perceiving and producing texts, in their complexity these creative skills are crucial for empathic treatment of the patient and therapeutic communication in the medical-diagnostic process.

Having the communicative competencies to perceive, comprehend, and interpret the clinical situation, to provide a professional opinion, and to make a correct medical decision means that students have the ability not only to learn about the disease from the patient and to take care and measures to cure him or her but also to treat the patient's unique personality humanly and empathetically. For the achievement of the above aspects of communicative competence, fiction literature is essential. It contains, besides meaning and content, linguistic, aesthetic, and ethical information. The specific cultural codes in communicating with foreign language literature at the receptive level are acquired through the prism of the subjective perception,

emotionally experienced literary text, with the help of its ideological and aesthetic analysis, and at the productive level - through the creation of dialogical and monological texts of different genres following the communicative goal.

THEORETICAL FRAMEWORK OF THE STUDY

The integration of literary texts in medical education and the use of methods of literary analysis in the practice with different genres of literature contribute to shifting the diagnostic view from the characteristic manifestations and symptomatology of disease to the existential questions of human existence. The content of the texts reflects the author's notion of universal values and attitudes towards illness, pain, suffering, death and grief - eternal human topics. Their literary interpretation is far more abstract. In contrast, medicine, despite its use of modern scientific advances, is still based on the concrete sensations of physical pain, the emotional discomfort accompanying illness, and the choice of pragmatic therapeutic strategies. On the other side, the various medical texts are also interpretive rather than simply based on diagnostic facts. In this sense, expressions of empathy and compassion in diagnosis and treatment can be as important as scientific data and medical conclusions.

The emergence of empathy in the perception of another person's emotions in literature and in healthcare is quite similar - they take the form of empathy with the character on the one side and sympathy and emotional response to the patient's suffering on the other. Fictional texts in the language studied unfold reality within subjective perceptions. In a dialogue with the author, the reader becomes acquainted with the ethnic specifics, learns which are the accepted moral and ethical norms in society, and discovers the national stereotypes of behavior reflected in the language. As a result of literary analysis, medical students develop tolerance and the ability to accept intercultural differences. Awareness of otherness leads to the development of skills to understand and share the patient's feelings and experiences, and this ensures attentive and professional interaction with the patient and increases the effectiveness of communication. The integrated teaching of medicine and fiction

provides relevance to this dissertation. The research presented here would shed light on understanding moral dilemmas such as humane communication, sympathy, empathy, concern, and support, which are fundamental elements of professional communicative competence in medical practice. In a broad sense, this work brings deep meaning to literary education in a foreign language.

The current interest in the use of literary texts in the teaching of English to medical students is prompted by several specific arguments:

- The need to create a reliable and grounded pedagogical tool for the development of communicative competence using literary texts, which is feasible in the teaching of Bulgarian language to medical students. Its application aims to build skills for the appropriate use of language in specific medical communicative situations with its speakers, according to their ethnic, socio-cultural, and religious affiliation; to form effective speech patterns in the process of training for intercultural communication and related social conventions.

- In foreign language teaching systems for medical students, fiction texts are relatively rare. As a culturally based phenomenon, they could broaden learners' linguacultural horizons and ensure the development of empathic ability by creating conditions in which learners recognize moral-ethical dilemmas and draw important conclusions about the behavior of literary characters in solving medical cases.

- The last 20 years have seen dynamic processes of migration and relocation for educational and professional purposes from one part of the world to another. The ethnic-demographic transformation observed because of the steady increase in the number of foreign students in Bulgarian medical universities requires solving several moral-ethical (arising from academic-professional adaptation) and linguistic (arising from linguistic adaptation) problems.

- The European Union has made language learning an important priority in its language policy. In the spectrum of existing concepts of foreign language learning, functional multilingual education comes closest to the linguistic reality in the multilingual classrooms of higher medical schools in Bulgaria.

- The European Union's policy in the field of vocational education and training encourages participation in a variety of linguistic formats that create opportunities to enhance professional foreign language qualification.

- In the context of the internationalization of higher medical education, the development of professional communicative competence to communicate in the language of the host country (Bulgarian) in a multilingual and multicultural academic and working environment and in the context of linguistic diversification is a topical educational and socially significant issue in our country.

- Groups of international students in higher medical schools are linguistically heterogeneous - both as first language speakers and as competencies at a defined specific level of proficiency in the transfer language - English (according to the CEFR). This determines the necessity of applying an individual and differentiated approach to teaching, as well as a wider range of didactic resources.

- The criteria, forms, and means of academic and professional communication in Bulgarian health care are formulated following modern European and global standards and ethical norms. The teaching content, training methods, and control systems must be adapted to the specifics of the communicative goals - **to achieve the desired therapeutic result through the implementation of humanistic-empathic doctor-patient communication.**

The problem studied in the dissertation is **socially significant** since interpersonal communication in medical discourse is meaningful when it creates a therapeutic and **emotional-psychological relationship** between the doctor and the patient. The realization of successful verbal and non-verbal interaction, of mutual perception and understanding between the subjects in the communicative act (in the process of exchange of medical information) creates conditions in advance to achieve optimal **efficiency in the examination, diagnosis, consultation, and treatment.** Without denying the application of high-tech advances in medicine, it must be stressed that they take away some of the physician's valences and distance him from the idea of a **human-empathic relationship with the patient** as a human being. The danger of the dehumanization of medicine, of violating the

purely human attitude towards the patient, is great, and doctors are aware of it. In this sense, the medical profession requires not only academic education but also the pursuit of continuing training. Equally important is the inculcation of humanity, mercy, empathy for pain and suffering, and dedication in the performance of professional duty. Philosophically, all the **above moral values are expressions not only of ethical norms but are a mandatory element of treatment.**

The formation of these virtues in future physicians is accomplished by improving **their communicative competence.** It is manifested in the professional's ability and desire to avoid highly specialized terminology that would make it difficult for non-specialists. This means that the doctor should speak in an accessible, understandable way, using clear and precise language when presenting a diagnosis or prescribing therapy.

In teaching Bulgarian for medical purposes - in the context of humane communication between doctor and patient, **the role of literary texts** is invaluable. Unlike theoretical science, which imposes its theses directly, sometimes even didactically, fiction influences the learner indirectly - through images, pictures, emotions, and feelings.

In this way, the students become acquainted with the most valuable literary samples of our native literature and at the same time develop in themselves - under the guidance of the teacher - ethical virtues so necessary for the practice of the humane profession.

The scientific-applied and methodological significance of the study is determined by - **First**, the unexplored possibilities of the literary texts to influence the formation of communicative competence in foreign students, trained in medical fields, for humane, ethical-deontological and professional communication with patients in the Bulgarian-speaking clinical practice. **Second**, from the untapped potential of reading and analyzing selected fiction texts to further develop empathic ability. **Third**, from the need to enrich the pedagogical toolkit with a contemporary model that offers a reliable algorithm for optimizing learning activities in the discipline of "Bulgarian language" for medical students.

PROCEDURAL AND METHODOLOGICAL CHARACTERISTICS OF THE STUDY

The object of the present study is the Bulgarian language education of students, native speakers of other languages, studying in English and Bulgarian language master's programs in medicine at Medical University - Pleven (MU-Pleven). **The subject** of the study is the process of forming communicative competence through work with fiction texts in the Bulgarian language education of medical students.

The study aims to define, create, scientifically justify, and practically approbate an experimental pedagogical model, contributing to the formation and development of communicative competence for professional communication in medical students, which is applicable in the Bulgarian language training of health professionals from other countries.

The proposed optimized training model projects content-methodological and evaluation-reflexive parameters that bring out the building and further improvement of the communicative skills of medical students not only as a complex task in the Bulgarian language teaching process. At the same time, a solution is offered as to how personal communicative deficits can be overcome by performing various receptive and productive speech activities on literary texts/fragments of them. The theoretical and practical-applied foundations of the research are concretized in conceptual and pragmatic terms on the thesis that communicating with fictional texts in the teaching of Bulgarian as a foreign language in the non-philological master's degree program in Medicine is conducive to the achievement of educational goals and expected results and, accordingly, optimizes the development of communicative competence.

The hypothesis stated at the beginning of the dissertation is: The formation of communicative competence contributes to the application of pedagogical tools, including literary texts in the teaching of Bulgarian language to medical students from other countries, which increases the effectiveness and quality of professional communication in clinical practice.

Following the hypothesis and the main aim of the study, the following two groups of tasks are formulated:

Tasks of theoretical-research nature:

1. To study, systematize, and analyze scientific, program and normative sources, methodological concepts, original conceptions, and empirical developments in the field of working with fiction texts in foreign language teaching, on which the theoretical conceptualization, the justification of the research question and the author's decision for its in-depth study are based.
2. To study and analyze the key formulations in the field of working with fiction text; to specify the categorical-conceptual approach by clarifying the relevant characteristics of the basic concepts used in the different scientific concepts: communicative competence, foreign language competence, types of texts in medical discourse, professional communication in medical practice; to excerpt definitions, based on which to build working definitions of the concepts: communicative competence of the medic.
3. To study, compare, and analyze the curricula, goals, and objectives in the discipline “Bulgarian language” for foreign students at MU-Pleven; to draw out the possibilities for optimizing the teaching complexes in the context of the proposed meaning-aesthetic and methodological approaches of working with literary texts in the training of specialized Bulgarian language.
4. To analyze the current situation in Bulgarian language teaching in higher medical schools in our country and to justify the necessity of applying the proposed model in the specific communicative and educational context; to bring out the advantages of the pedagogical model based on justified criteria, parameters and indicators for diagnosis and evaluation of its effectiveness to further build and improve the communicative competence of medical students.

Tasks of practical-applied nature:

1. To study the opinion of medical students and patients on the level of Bulgarian language proficiency, preferences for the language of communication, and use of the target language; to highlight the difficulties in communication with native speakers; to elicit the skills of orientation in the communicative situation and extraction of

information from a related text; recognition of different functional styles; interaction with representatives of different linguocultural, ethnic and religious communities, difficulties related to different cultural markers in the host country; to identify the language of the target language; to summarize the limitations and to formulate recommendations for the optimization of the educational content in the direction of the purposeful development of communicative competence for professional communication in the Bulgarian-speaking clinical practice.

2. To present the specificity of professional communication in the field of health care and to analyze the factors determining the need to develop a system of meaning-aesthetic and methodological approaches to work with literary texts, which would compensate for the deficiencies in Bulgarian language training for medical students and increase the effectiveness in mastering communicative competence necessary for the realization of communicative needs in the Bulgarian language environment.

3. To create a diagnostic toolkit for establishing the level of formation of communicative competence of medical students, including a system of specific criteria, parameters, and indicators.

4. To organize and conduct experimental training with medical students in English and Bulgarian language programs; to summarize, compare, and analyze the obtained empirical data; to draw conclusions and outline parameters and perspectives for the development and improvement of communicative competence within the proposed model for its formation and upgrading.

5. To present the design of the research following the concept of the proposed didactic model and the objectives, tasks, levels, and modules of implementation contained therein, applied criteria of evaluation, and to appraise it in the conditions of specialized language training of graduate students in the specialty of "Medicine".

The research context is pragmatic. The research methodology is based on an interdisciplinary approach that includes the overall process of theoretical investigation and applied concretization. This ensures representativeness in the conceptualization and structuring of the didactic model of teaching Bulgarian to medical students. At the

theoretical level, the following **research method** was used: 1) Analytical-synthetic review of scientific literature, curricular and normative documents, and teaching documentation. **The research methods** (quantitative and qualitative) at the **empirical level** are: 1) Questionnaire survey to investigate the opinion of students and patients concerning the studied issues. 2) Didactic testing. 3) Pedagogical modeling. 4) Experiment. **Mathematical-statistical methods** were used to identify, process, analyze, compare, evaluate, and present the results of the surveys and tests.

The experimental pedagogical research was conducted in a real learning environment and included **four main stages**:

I. Preliminary stage - study of the opinion of foreign medical students and patients about the level of formation of CC, identification of problem areas, preparation of diagnostic tools, and planning of the experimental study.

II. Finding stage:

1. A preliminary study: Pre-test, formation of the four groups with which the study will be conducted - 2 control and 2 experimental in AEO and BEO.

2. A preliminary study: Pre-test, formation of the four groups with which the study will be conducted - 2 control and 2 experimental in AEO and Establishing the language level of the international students before conducting the experimental study.

III. Formative stage - conducting the experimental study.

IV. Final stage - analysis of the research data, summary of the results, distribution, and implementation in practice.

GENERAL CHARACTERISTICS AND STRUCTURAL PARAMETERS OF THE THESIS

The organization of the dissertation in a structural plan is determined by the theoretical-applied character of the study, realized in two parts: theoretical analysis and synthesis of scientific concepts and empirical-experimental research.

Chapter One: Literary Texts in the Communicative Organization of the Bulgarian Language Education of Medical Students

Chapter One lays the theoretical-conceptual foundations of the research, on which the empirical-experimental technology of working

with foreign language literary text in the specialized Bulgarian language course for medical students is empirically developed. The main research methods applied at this stage are the theoretical methods of selection, classification, and arrangement of scientific facts: survey research, theoretical analysis and synthesis, comparison, summary, and systematization of the specialized literature and information sources. The individual paragraphs of the chapter provide an evaluative review of various representative scientific conceptions and models of communicative competence in foreign language and Bulgarian literature, which have applications in specialized language teaching. As a result, the generalization is made that the acquisition of a wide range of competencies for the educational, professional, and social realization of healthcare professionals is defined as a primary task of modern medical education. The professional competence of the physician, on the one hand, is associated with the integration of profession-specific knowledge with practical-applied skills. On the other hand, it is a natural result of the union of personal-communicative skills and the ability to interact with other subjects in specific situations to solve health-medical problems in real-time. Key professional competencies are universal in nature and degree of applicability. They are formed within each subject, but at the same time, they are transversal and intersubjective. In this sense, the inclusion of academic content from applied and humanities disciplines in the training of specialized Bulgarian language, as well as the provision of intersubjective interactions between medicine and verbal art, such as literature, creates conditions for the formation of communicative competence (linguistic, sociolinguistic, sociocultural, strategic, discursal, etc. competence), which is an essential element of the professional competence of the intern.

In the context of the guiding thesis, new arguments are added to the content-theoretical base. Emphasis is placed on distinguishing and defining in general didactic and narrow methodological way key concepts for the research from other scientific fields of knowledge. The definitions of *competence*, *key competencies*, *communicative competence*, *foreign language communicative competence*, and *communicative competence of the medic* are presented, which are

necessary for the clarification of the research problem and the author's concept.

Particular attention in the first chapter is paid to the modern theoretical formulations, methods, and approaches in foreign language teaching, in particularly - to humanistic methods in medical humanistic and joint study of literature and medicine. In the scientific-applied aspect, some controversial methodological and practice-oriented postulations are covered, such as the inclusion of literary texts in specialized language teaching. An attempt is made to reconfirm the application of these concepts in the highly specialized, nationally specific conditions of teaching and learning Bulgarian as a second language in Bulgaria, not only for nonspecialized foreign language education but also for specialized education. The European dimensions of multilingualism and learning in multilingual medical school classrooms are presented, where Bulgarian as a second language is taught and learned. Communicative aspects of medical verbal practice are specified. Text, text features, and textual criteria are conceptualized in the context of medical narrative. The typological characteristics of different types of texts in medical discourse are outlined. The role and place of artistic texts in the process of mastering the Bulgarian language as a second language by medical graduate students is presented in terms of humanizing the relations between the subjects in medical dialogue through the specific linguacultural code of literary texts.

The importance of the topic for the development of the communicative competence of medical students requires some clarifications on the social significance of communication in medicine. It is determined by many complex factors, the most important of which are: compliance with European standards in health care, respect for patients' rights, humane and empathic communication with them and their relatives, obtaining informed consent for the performance of any medical activity, application of codes of ethics, as well as demanding legal responsibility from medical professionals.

The professional effect of communication with the patient is measured by the therapeutic outcome, which is highly dependent on the subject-subject interaction. The multilayered relationship with the patient, the

need for a correct assessment of the situation, the selection of adequate expressions and means to establish and maintain contact with him, as well as the control and reliance on non-verbal signals require medical professionals to constantly improve their personal communication skills. Therefore, the acquisition of communication competences in therapeutic practice poses serious challenges to the mastering of the Bulgarian language by medical students from other countries. The reason: during practical exercises and internship they have to communicate with patients who are native speakers of the target language.

Research in the first two decades of the 21st century in the field of medical communication has conclusively proven that ethical communication has a positive effect on health and humanizes patient care. An important consequence that successful communication skills of the medic bring out is the establishment of a therapeutic relationship with the patient. In its content and thematic and problem-solving scope, the study of this issue fits into the global debate on the multifaceted application of literature in specialized language teaching. To the above-mentioned arguments for the use of literary texts in medical curricula, we should add the specificity of professional roles, activities, relationships, and interactions between medical students and other subjects in the educational process. The practical levels of the formed skills are shown and evaluated in a real professional environment - in the framework of communication in the educational-clinical university bases.

In terms of humanistic pedagogy and communication, academic interaction between teachers and learners emerges as a leading factor in the realization of health goals for the benefit of a third subject - the patient. Higher medical school education has a different specificity precisely because of the presence of a third participant in communication. His or her health and life depend on the accurate exchange, good understanding, and correct interpretation of treatment-sensitive health information. Therefore, the health professional effect of doctor-patient communication is measured by diagnostic-therapeutic outcomes. Subject-subject communication is key to achieving these. It is mediated by the personal-professional

characteristics of the participants in the medical dialogue - their individual qualities, different cultures, professional experience, personal characteristics (character, temperament, ethnic and religious affiliation), social status, etc. To the patient's characteristics, we add his/her status of being ill, suffering, and his/her subjective state of health. The distinctive features of a medical student are influenced respectively by his background, family, and educational environment before entering the university, the culture of behavior (in work, daily life, communication with others), and language habits in the language of which he is a native speaker. To the key factors, we should add the pedagogical toolkit of the teacher. The above-mentioned factors significantly influence the use of means for encoding and decoding verbal information according to the communicative situation.

Thus, they outline the parameters of polysubjective medical dialogue, form patterns of speech behavior, and lead to the formation of a personal communicative style in medical students.

This process is in line with current research and new didactic perspectives on the development of multilingualism. The learning of the target language is accompanied by a comparison between different cultures - both those of the learner and the host country, and between the cultures of the countries of the other participants in the formal multilingual group. In the classroom, the new language is learned, but in parallel the cultural phenomena associated with it are revealed. These provoke comparison not only with the world of one's own culture but also with the culture in whose environment the foreign language being studied originates, develops and is used. Analyzed in this context, the literary texts included in the Medical Bulgarian course illuminate the socio-cultural aspects of the everyday life of the linguocultural community. In summary, the texts are used as: communicative units through which communication takes place; didactic materials for the acquisition and expansion of vocabulary knowledge; a source of vocabulary enrichment with similes, metaphors, synonyms, homonyms, words with figurative meanings, and other stylistic figures; a means of building communicative (receptive and productive) knowledge and skills for perceiving and producing texts of different kinds. Reading literary texts in the target

language ensures the movement from native traditions to the traditions of other countries, from monocultural communication to intercultural communication. In this sense, literary texts are a kind of architecture, a kind of collage that makes possible the journey between languages and cultures.

Situated at the intersection between the semantic fields of the concepts of “communication” and “competence”, communicative competence implicitly includes the content of two other concepts, “language” and “culture”, the relations between which are addressed in the conceptual analysis. Communicating in the target language, influenced by the specifics of one's own culture, and striving to achieve effective communicative behavior with an addressee patient, a representative of another culture, means that learners acquire information about specific language patterns and techniques and the skills to apply them in real communication. These markers are specific to the national culture and are also present in the intern's medical practice.

The foreign students come from different linguocultural and social backgrounds, and building an empathic relationship with the patient, a native speaker, to achieve a therapeutic effect at the end of treatment is fully achieved when these specific - different from each other cultural levels - meet. For such an 'encounter' to take place, both parties to the act of communication must be fluent in the same language. Only in this way does the subject receiving the information construct a sense/meaning that is identical to the sense/meaning embedded in the speaker. In this context, language is not only a communicative medium, but it is a transmitter of values, traditions, and norms. It harmonizes with the other cultural artistic forms most often identified with culturally based phenomena. These are the works of fine arts and of verbal art - the literature. In order to master a language, the learner needs to learn to know the culture of the people who speak it, to take into account the main characteristics of the sociocultural context, its use, and the social situation. In practice, this means having linguistic and sociocultural competence. The development of communicative competence in a foreign language, of which the above-mentioned components are elements, implies the mastery of a certain number of linguistic constructions that facilitate communication. They encode

norms of behavior and contain feelings and attitudes corresponding to the cultural model of which the respective language is the carrier. The work with selected literary texts, presenting directly or indirectly medical cases and the decision-making for their humane resolution from the doctor's position, provokes students' interest in Bulgarian literature as a phenomenon with rich cultural roots, which interprets important themes of common human values.

In this diachronic review of scientific sources, leading methodological conceptions and basic principles for the use of literary texts in language teaching are analyzed and compared, based on psychological (motivational) theories of language teaching, learning, and acquisition. The outlined contexts support the thesis that the further development of communicative competence is a prerequisite for the development of effective linguistic behavior in personal and professional aspects, for participation in interpersonal dialogue, and for the expression of expert opinion on the patient's health status. In the course of effective communication with native speakers, attention must be paid to several factors of the communicative environment in which speech acts unfold and take place, according to the parameters of the socio-cultural context and the existing variables: time, place, topic, and participants in the communication. In this sense, sociocultural competence in its dichotomy - as a synonym of sociolinguistic competence and as a component of communicative competence, is based on knowledge of culture, including health culture. In a broader sense, this competence reflects the mentality of a given linguocultural community and of the individuals within it. It is demonstrated in the selection and combination of appropriate lexical units, in the appropriate use of speech in certain situations, and the exercise of different communicative roles. In medical discourse, a higher level of formation of this competence is a leading factor in anamnesis taking, preparing a medical history, announcing a diagnosis, suggesting hospitalization, prescribing surgical intervention, etc.

Chapter one provides a theoretical overview of some classical concepts of the use of literary texts in language teaching. The justification for this is, foremost, the effort in the presented concepts to highlight the didactic advantages and limitations of their use in the

teaching of Bulgarian language to medical students. Secondly, there is an effort to support their presentation with concrete examples - including teaching topics from specialized training in the target language and indicating their place in specific forms of Bulgarian-language communication in healthcare practice. The focus of the analysis includes some influential theories of learning that consider the mechanisms of foreign language teaching and acquisition from a psychological perspective. The use of literary texts to which each of the characterized methodological concepts adheres in the teaching of the target language is presented tabularly (Table 1).

The research focuses on didactic and methodological studies in the field of medical humanities in recent decades, which have led to the development of new approaches. The inclusion of humanities disciplines, such as literature, in medical education has its historical, cultural, ethical, social, political, psychological, and clinical dimensions. Texts about epidemics, diseases, diagnoses, and treatments are present in various biblical, historical, and literary books and stories. to the formation of communication skills in medical students.

Table 1. Use of fiction texts in foreign language teaching in the methodological concepts discussed.

Traditional communicative approaches	Contemporary communicative language teaching	Text-based learning
Literary texts are used to introduce new grammatical structures.	Literary texts are used to introduce new grammatical structures..	Literary texts are used in relation to the sociocultural context of their use

To achieve its goal, medicine uses two different contexts of knowledge to explore and know human beings - knowledge of the natural and knowledge of the spiritual. Separately, they cannot provide opportunities for the comprehensive preparation and personality building of future professionals according to their needs and the set requirements for effective health communication.

On the one hand, medicine is an applied science and is based on the research and achievements of the general biological, and natural sciences that study the structure and function of the human organism,

diseases, symptoms, and their therapy. On the other hand, as a human science, defined as the noblest of all arts, it adds to the scientific discourse the knowledge of ethics and morality. The joint teaching of literature and medicine-which differ in their subject and scope-enriches the knowledge and methods of the scientific disciplines-molecular biology, human genetics, and bioengineering, traditionally used to diagnose, treat, and prevent disease and injury to specific individual human organs and systems-with the fictional interpretation and treatment of illness, suffering, death, and grief, topics often addressed and interpreted in literature. The inclusion of content from humanities disciplines in the English language course for medical students is logical and justified because each of them enriches the overall personality development of medical students, coming into contact with preclinical and clinical disciplines by way of cross-curricular connections.

Literature also belongs to these human sciences. Familiarity with literary texts in the language studied is important since in recent years the formation of literary competencies has become a subject of research again due to the establishment of the linguocultural approach in language teaching. The medical facet is added to it in the study. The reasons for including literary works in the teaching of the Bulgarian language for medical students described above are summarized in three main directions:

- improvement of receptive skills and acquisition of algorithms for the perception of the linguistic text both at the level of the whole text and at the level of its fragments: careful reflective listening, perception, processing, extraction of different meanings, understanding of the foreign point of view, information processing;
- improvement of productive communicative skills for analyzing and interpreting the text: reading, understanding, analyzing, reproducing, and creating the text;
- formation of critical thinking and development of empathic ability towards moral cases in the literary text, and hence - bringing up its expressions in therapeutic practice.

Simultaneously with the formation of the above skills, the following linguistic and communicative tasks are solved:

- introduction and consolidation of vocabulary and grammar knowledge;
- acquisition of label words, phrases, and linguistic expressions with high frequency of use in particular spheres of Bulgarian reality; formation of communication skills;
- building attitudes to communicate with examples of Bulgarian literature and culture by accumulating background knowledge from selected original texts;
- development of intercultural communicative competence for interaction with representatives of the linguocultural community;
- enriching aesthetic perception and experience, nurturing an emotional-value attitude towards the world and literature as a form of culture;
- deepening the motivation for learning Bulgarian for general and special purposes.

It is reasonable to say that the solution to each of the mentioned tasks is connected with the humanization of the overall personal-professional profile of the future medical specialist. The works of literature could be successfully used as a means of educating a system of moral, ethical, and aesthetic norms imposed in the society whose language medical students study.

This approach to learning about and in the language, as well as to improving communication practices in healthcare, is equally important in advancing understanding of the suffering of the patient because it is accompanied by humanity and empathy for the patient. The literature can provide ethical examples for medical students about what is good and what is evil, how to make the right decisions concerning the moral aspects of the situation, how to relate to the patient and his illness, how to adapt to the patient's characteristics and needs, and how to build trust in the patient to share feelings, thoughts, and sensitive information without embarrassment.

The affirmation of the place of literary texts in foreign language curricula has a long and controversial history. As a result of the analysis and subsequent referencing of scholarly sources on the topic, a variety of ambiguous opinions and a lack of consensus in the debate on the place and role of fiction texts in foreign language teaching have

been found. Existing specific arguments on the issue are highly polarized. We define as controversial and unreliable the reference to one and only one of the presented views on the issue.

Without denying the rationality in the concepts of each school, in the experimental study, we consider the use of literary texts in specialized Bulgarian language teaching not only for the purpose of textual-linguistic analysis for the development of literary competence but as a means of integrating cultural knowledge into the curricular content and building general communicative competence. The works act as mediators between speakers of different languages and contribute to the perception and understanding of national socio-cultural stereotypes. The methodological basis of the activities with the text is based on the integrative approach to learning Bulgarian, to which in this experimental study is added the facet of medical learning content - the focus is on communication in the field of medical practice in a Bulgarian-speaking environment.

Chapter Two: The Theoretical and applied aspects of the use of literary texts in teaching Bulgarian language to medical students

Chapter Two discusses the specifics of foreign language teaching in a university context. After the assertion of academic autonomy - as a guiding principle in the management of universities in Bulgaria in 1990 by the Law on the academic autonomy of Higher Educational institutions, they were allowed to conduct training of foreign students in the open language departments following their programs. The Bulgarian language began to be taught at medical universities in the professional fields of “Medicine”, “Dentistry” and “Pharmacy”. The deepening of educational mobility within the EHEA over the last three decades has opened up new prospects for training in these specialties in Bulgaria and highlighted the need to master Bulgarian for special purposes. As discussed in Chapter One, this has focused research attention on the study of highly specialized areas in medical education that have gained relevance in the course of globalization. An important issue for university practice in the higher education of medical schools is the learning of specialized Bulgarian. It is a compulsory subject and aims at the formation of communicative skills

in foreign students for professional communication in Bulgarian-speaking healthcare practice.

The vision for the development and consolidation of the place of the Bulgarian language in the training of medical students requires updating the existing teaching facilities. Satisfying the linguistic and communicative needs of students requires the introduction of modern and effective forms and methods of teaching, the focus of which is the skills for effective professional communication. Such arguments support the author's point of view on the research of the role of literary texts in the improvement of communicative competencies for interaction in medical practice. The above brings out the research problem as particularly significant in the context of linguistic diversity in Bulgarian medical universities. This actualizes the need for students to acquire three languages simultaneously, one of which is the language of the host country. The subject of analysis in this chapter is the content, goals, and objectives of the discipline.

After initiating English-speaking medical education in Bulgaria in 1997, MU-Pleven established medical programs entirely in English. In medical majors, foreign students who are native speakers of other Slavic languages are trained in a Bulgarian-language program. According to the National Statistical Institute (NSI), for the last five years, there has been an increasing trend in the number of foreign students studying at Bulgarian universities. The tendency for growth of the number of foreign applicants and admissions over the last 5 years is also valid for MU-Pleven, as the data are presented in Table 2 and Figure 1:

Table №2: Number of applicants and admitted foreign citizens from different countries at MU-Pleven for the period 2017 - 2022.

Year	Candidates	Accepted
2021/2022	712 from 80 countries	370 from 31 countries
2020/2021	515 from 58 countries	230 from 24 countries
2019/2020	514 from 46 countries	288 from 31 countries
2018/2019	369 from 40 countries	250 from 28 countries
2017/2018	771 from 41 countries	337 from 26 countries



Figure №1. Foreign citizens (English language education) applied and accepted at MU-Pleven in the last 5 years.

In the curriculum of the specialty “Medicine” in both language programs is included the discipline “Bulgarian language”. Satisfying the linguistic and communicative needs of students requires the introduction of modern and effective forms and methods of teaching, the focus of which is the acquisition of professional communication skills.

Along with the basic medical knowledge and skills to solve practical tasks during the examination, consultation, diagnosis, and treatment, the trainees must communicate in the target language with university lecturers, administrative staff, and fellow students. During practice and internship, the future doctor carries out intensive, continuous, and different content communication: with patients and their relatives, with the representatives of the medical staff - nurses, doctors, heads of medical institutions, etc. Academic progress largely depends on the ability to communicate effectively verbally and the ability to establish and develop ethical relationships in the context of patient-centered, humane treatment of the patient. Good psychological contact with the patient (in his/her first language) helps to take a more accurate history, to obtain a more complete and deeper picture of his/her health condition. This important information supports the diagnostic, therapeutic, and recovery processes. Thus, the practitioner becomes an active subject in poly-subjective health communication. This also

determines the importance of targeted training for the development of his communicative competence in Bulgarian language education. As a result of the pedagogical interaction in the educational process, medical students form and develop not only linguistic knowledge and skills but also the ability and attitudes to carry out successful interpersonal relationships in which social and moral components are necessarily present.

In the specialty “Medicine” (Bulgarian-language and English-language training) at MU-Pleven are trained native speakers of different first languages and representatives of diverse cultures and ethnicities. Not all students learn to read, write, and communicate at the required level (B1/B2 on the CEFR) in both languages - the target language and the mediator language. In this case, the transfer language is English, which is also the language of the English language program. For foreign students in the Bulgarian language program, English is considered an auxiliary language.

The teaching of the Bulgarian language to medical students is a pedagogical discipline situated within a narrowly profiled area of the Bulgarian language space - the acquisition of a specialized language and its use for the needs of medical communication. In this sense, the use of target language is limited because it is acquired to communicate with patients in specific situations of clinical practice.

The Bulgarian language course is designed for full-time study in English and Bulgarian-speaking programs, specialty “Medicine”, a master’s degree. It includes two three-hour exercises for semesters I, II, III, IV, and V and two two-hour exercises for semester VI per week for the English-speaking program (three years). In the Bulgarian-speaking program, the course is one year long, with two two-hour exercises per week. Each unit includes vocabulary and grammar knowledge and exercises, dialogues, and a related text. The material is selected and organized in a way that follows the grammatical, lexical, and communicative progression in modern Bulgarian. Terminological knowledge necessary for the study of medicine and communicative skills for communication in medical practice are gradually formed. Their development also follows the progression of mastering priority

linguistic knowledge needed at the next stage of foreign students' training, in which they carry out clinical communication.

In the Bulgarian language course in the English-speaking program, students receive language training to understand and adequately and fully participate in the learning process of the main clinical disciplines in the specialty. The language course is designed to build skills of analysis and evaluation, to form the ability to speak and write in clear and precise language, properly structured grammatically. The English language is organically linked to all other special subjects included in the curriculum.

Content of the Language Course:

The course content is structured according to the goal of the training-academic communication and professional interaction. The focus is on teaching the target language to students from other countries who do not speak Bulgarian. The language course is characterized by a design that meets the needs of the learners and includes educational content related to both general education and specialized knowledge in medical disciplines, covering specific medical vocabulary. The program includes:

Phonetics: the phonetic system of the modern literary Bulgarian language is studied: classification and compounding of sounds, modern phonetic laws, spelling, and orthographic principles, with continuity and development of what was studied in the previous courses at the different levels.

Grammar. Parts of speech, word structure, and word formation are presented in their practical orientation.

Syntax: Different types of word combinations, the word order of a simple sentence, and types of complex sentences are studied.

Scientific Style Topics: Adapted and non-adapted texts from pre-clinical and clinical specialties are studied. The focus is on the acquisition of receptive and productive language skills: reading, writing, listening, and speaking to teach English to future doctors.

Popular Science Texts: Topics covered include the history, geography, and traditions of Bulgaria. Through working on them, the knowledge of the language is supplemented and developed, the

vocabulary is expanded, and the skills of perceiving and creating speech messages on a certain topic are formed.

Substantially and normatively, the discipline “Bulgarian language” for medical students is regulated in several national and university documents. The programs include preclinical vocabulary, based on which the clinical language register is built. It is the starting point for the subsequent development and improvement of the communicative competence of students with a medical profile from other countries to communicate with patients. Specialized vocabulary from the pre-clinic and clinic is introduced through authentic speech materials from the doctor's offices. In the second year of study, the acquired phonetic, morphological, syntactic, and lexical knowledge of the language is upgraded through analysis of different types of texts. For medical Bulgarian language training, specially developed educational complexes are used at MU-Pleven. The orientation of the complexes is practical and the – approach pragmatic. Specialized medical terminology in Bulgarian is included. and their stylistic affiliation varies from strictly scientific, through popular science texts, to authentic dialogues in the doctor's office.

The inserted texts have different genres and style characteristics. The selection of content introduces the specificity of a variety of scientific and popular science texts from preclinical and clinical disciplines, with an emphasis on plans for history taking and the implementation of real dialogues in the doctor's office. Illustrative material has been added to the reading and listening texts to facilitate the searching, retrieval, processing, and use of information that builds perceptual and comprehension skills. Communication tasks are solved with language tools and medical text production tasks. The goal is to accomplish successful communication in oral and written form.

Another important accent in the second chapter of the dissertation is the analysis of the communicative aspects of medical texts as a dynamic structure manifested in the processes of creation and understanding by the participants in the communication. Special attention is paid to clarifying the axiomatic features of the text as a means of communication between health professionals and patients. The text-determined communicative orientation of language teaching,

first, implies the use of appropriate texts as the main unit of interaction. Secondly, it concerns the formation of communicative competence to ensure effective and efficient communication in medical discourse. Thirdly, it leads to the formation of skills in perceiving and producing various monological or dialogical texts through which the future doctor interacts with the patient.

The communicative act in the medical monologue or dialogue is carried out by the health professional through - 1) self-presentation; 2) asking professional questions to the patient. 3) perceiving and understanding the patient's answers; 4) expressing a personal opinion on a health case. **The coherence of the medical text** - as a condition for adequate perception and understanding in formal and communicative-pragmatic terms, must consider the relationship between words or phrases. Textual cohesion contains many components, among which are the repetition of words and phrases (lexical recurrence). In spontaneous speaking (which in most cases is realized in the contextual-situational conditions of clinical dialogue), this component allows students to have more time to plan their statements. The issue of the grammaticality of doctors' statements is discussed in the context of the acquisition of grammatical rules and their use. Structuring grammatically correct sentences is aligned with the communicative goal. The informativeness associated with the content of medical discourse is a particularly important criterion of its textuality. The medical professional has to communicate correct information to the patient because a patient who is informed about the diagnosis and therapeutic options is more relaxed and actively cooperates with the treatment. The patient is treated not only with knowledge and skills but also with words, which should convey accessible, understandable, and sufficient information. As criteria for textuality, intentionality, and acceptability refer to the views and perceptions of the users of the texts. If a narrative structure is cohesive and coherent, then its construction must be preceded by the emergence of communicative intentionality and planning, with the medic leading this process. The existing limitations of the communicative situation in terms of time and resources for processing the incoming

information to produce one's own text in the medical dialogue are analyzed.

Text acceptability is a communicative-pragmatic characteristic that relates to the recipient's ability to extract meaning. It largely depends on the appropriate linguistic forms used by the medical practitioner in the specific communicative situation of medical practice, which is socio-culturally colored. The attribute of comprehensiveness reflects the unity between the communicator's intention and the interpretation of the meaning of the linguistic structures used in the specific situation in which they are used. Related to the above signs is the sign of completeness. It indicates that the textual topic has been fully developed and that the message achieves the intended purpose. In health dialogue, this means the fulfillment of the communicative task of informing the patient in an accessible way about the diagnosis and the planned treatment.

Communication in medical discourse takes place through oral and written, dialogical and monological texts of different styles and genres: description, narration, reflection, and dialogical texts. Narrative (text with narrative functions) in health communication is used to present incidents, events and facts, biographical data, to indicate stages in the history of disease, occurring chronologically, patient epicrisis, etc. It serves to sequentially present actions and events, highlighting relationships of temporal proximity or distance when complaints and symptoms appeared, their cause-effect relationship, explanations of routine medical activities in their sequence, and more. It serves to expose actions and events in sequence, highlights relationships of temporal proximity or remoteness in the occurrence of complaints and symptoms, their causal relationship, explanation of routine medical activities in their sequence, etc. Description (text with descriptive functions) in medical communication is used to represent anatomical objects or various parts and organs of the human body with a focus on their qualities, properties, and signs. Through this type of connected text, a complete and accurate description of the appearance, structural characteristics, structure, and functions of parts of anatomical objects or parts of the human body; the way of occurrence of phenomena, situations, and

processes are created and presented. Depending on the subject, there are also descriptions of the factual situation, a phenomenon, a case, rules, the sequence and stages of treatment, medical manipulations and activities, of the appearance and state of health of a patient, of his mental status, of the goals of treatment, of the results of investigations, of reasonable therapeutic alternatives, of the expected results of treatment, of prognosis, etc. The argumentative text (text with argumentative functions) in medical communication is aimed at proving a specific statement. It aims to substantiate an idea or opinion, to express an evaluation of some fact as true or false. A variety of argumentative texts exist in medical discourse for the purpose of health communication. Dialogic texts have wide applications in medical practice. In student-patient dialogue, the most significant communication barriers to the achievement of diagnostic goals are manifested. For the effective realization of the medical dialogue, a good knowledge of the vocabulary, and proficiency in comprehensible Bulgarian synonyms of the specialized medical terms - used in the spoken language in the low and middle register is necessary. The acquired knowledge of understanding linguistic statements must be transformed into skills for listening comprehension, independent summarization, etc.

In the context of the research question and the specific characteristics of medical texts mentioned above, there are several concrete arguments for the necessity of including literary texts in Bulgarian language training for medical students. Literary texts provide a source of linguistic, substantive, and cultural-historical information; they possess aesthetic, communicative, pragmatic, and ethical functions, influence the reader's emotional sphere, stimulate mental activity, and serve as an illustration of how linguistic units function. Literary texts present examples of speech, including its structure, form, and genre, and can therefore be viewed as models for generating speech intentions, and messages, or achieving comprehensive verbal communication. Including them in the training, their reading, and literary analysis complement and further develop language knowledge, expand the active vocabulary by triggering associations, build skills for different interpretations and oral presentation on

specific topics, and form and develop specific communicative competence for subsequent academic use in medical theory and practice.

Analysis of the educational complexes and content for special purposes in Bulgarian language education shows that, in recent years, literary texts have rarely appeared in educational materials. As a result, their use is often spontaneous, largely unregulated, and depends on the specific case or the spontaneous decision of the instructor. It is important to emphasize that, according to contemporary methodological concepts, familiarization with the culture of the language being studied holds a central place in the educational process. Learning a target language always implies acquiring knowledge about its cultural codes. These codes relate to the cultural traditions of the people, material and spiritual boundaries, customs and practices, everyday social connections, living conditions, realities, history, modes of thinking (considering perceptions of space and time, emotional states), philosophical and figurative thinking, behavioral types, non-verbal communication, etc. Literary texts have a significant potential for integrating into foreign language cultures, enriching vocabulary, and developing communicative skills. Due to their role in the complex development of the above-mentioned key linguistic, social, and intercultural competencies, literary texts have an important place in the curriculum, and it is advisable to enrich it with works from Bulgarian literary classics and contemporary authors. When selecting the literary texts we were guided by their communicative characteristics - communicative orientation, informativeness, comprehensiveness, coherence, as well as vivid artistic imagery, the presence of universal humanistic ideas, and moral cases. The presence of these qualities gives the texts the character of rich and diverse teaching materials.

The inclusion of literary texts in Bulgarian language training is also considered from the perspective of finding effective ways to further develop communicative competence for interaction in medical practice. In professional communication, a physician is required to interact intensively and continuously not only with patients and their families but also with representatives of various groups within the

healthcare facility-such as nurses, other doctors, orderlies, and administrative staff. In this sense, communicative competence is a crucial quality of the specialist, derived from the context of the main approaches to determining the causal relationship between communication and treatment: exchange of health information, subject-to-subject interaction, mutual perception, and understanding. Successful communication is based on the normatively correct mastered linguistic skills and their appropriate and communicatively purposeful use in different life and professional communication conditions - to understand and create statements (texts). In the specialized scientific sources, the mastery of the mentioned skills is defined as textual competence and is an element of the physician's professional communicative competence.

It is no coincidence that many experienced doctors explain the history of the disease in detail, and introduce the planned treatment, steps, methods, and procedures. After the doctor's narration, his perception, and processing of the health information contained therein, the patient begins to interact effectively with the specialist and assist in his recovery. In this way, physicians exert a therapeutic influence on the patient's individual "psychosomatic programming." By establishing a relationship of mutual respect and trust, they reduce the intensity of the patient's negative emotions and experiences. This is why the manifestations of kindness, concern, sympathy, empathy, and humanity fill the Latin maxim that medicine is the noblest of all arts with profound meaning. By sharing the patient's feelings, even when he cannot cure him, the doctor seeks calm and full communication to alleviate his situation. Twenty-first-century medicine seeks a more human aspect in all its manifestations to the patient, whom it accepts not as an object of treatment but as an active participant in it. The humane treatment of the sick is a fundamental principle enshrined in the Hippocratic Oath: "Treat not the disease, but the patient". In recent years, medicine has increasingly become high-tech and the contact between doctor and patient is being lost. The danger of losing this relationship is very great and doctors understand and realize it because they are closest to the patient. Contact with the patient is very important, it is an important part of treatment, as the ancients say -

half of treatment is trust between the doctor and the patient, and this is built in the process of communication. In other words, in human communication with the patient, the doctor must use logical, clearly constructed, unambiguous, and clear language, appropriate to the specific communicative situation and meet the requirements of the relevant medical language register. The enhancement of these competencies requires the development of skills in listening, asking questions, perceiving, and interpreting statements, which are represented in oral speech by connected texts. This necessitates both the application of effective strategies in teaching and learning Bulgarian as a foreign language for medical purposes and their specific implementation in the overall process of mastering and learning the language. As a result of the research and analysis of the applicability of literary texts for shaping and developing communicative competence in medical Bulgarian language training, a didactic model has been created. This model serves as a theoretical foundation for developing an empirical model tested during the experimental research (Figure №2).

Chapter Three: Design of experimental pedagogical research. A model for the formation of communicative competencies in Bulgarian language teaching of medical students

Contemporary research in linguodidactics, particularly in teaching Bulgarian for specific purposes and its application in healthcare communication, highlights the need for an additional module that includes literary texts in specialized Bulgarian language training for medical students. Its realization synchronizes the development of communicative competence in students with the approaches and activities in the medical profile for effective professional communication in healthcare practice.

Supplementing and expanding the teaching content with selected literary texts, as well as linking the academic training with the subjects' needs for communication in the linguistic reality of the medical sphere are carried out within the framework of the holistic approach to treatment. This modern perspective sets the basic modality of the pedagogical model for the development of communi-

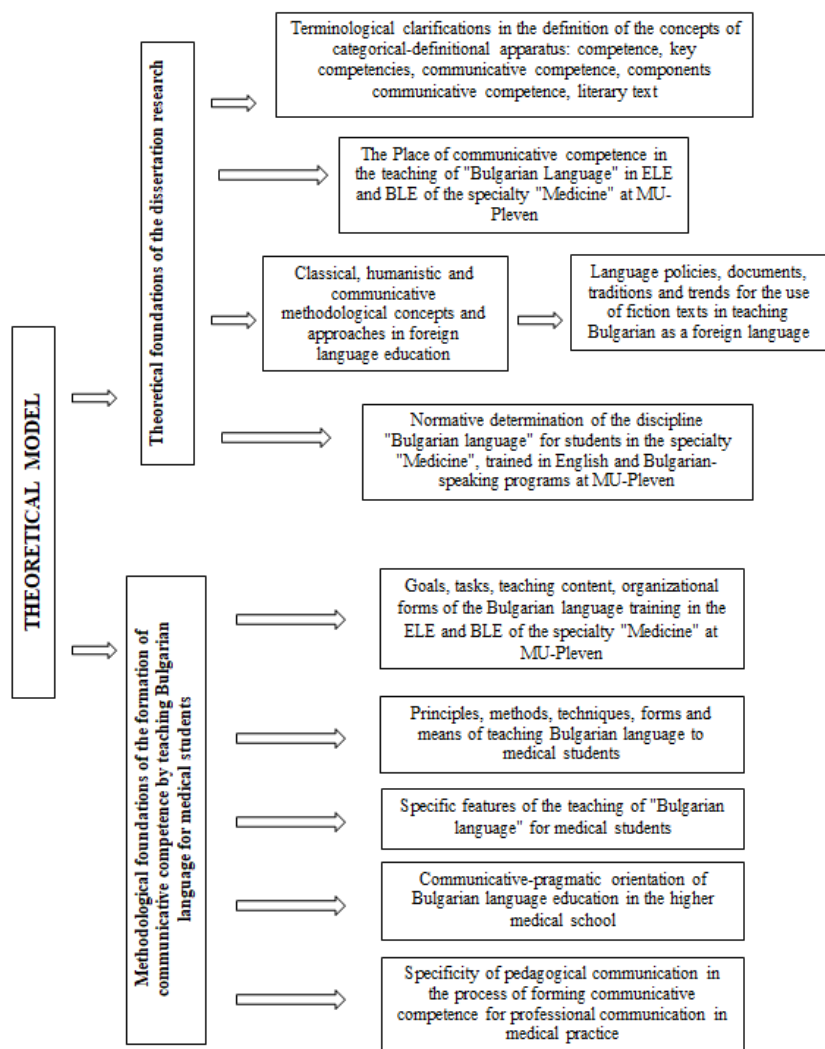


Figure №2: Theoretical model for the formation and development of communicative competencies in Bulgarian language teaching of medical students.

cative competence proposed in this dissertation research. The assumption is that such a model is adequate to the communicative

orientation of the "Bulgarian language" course for medical students, meets the current theories of integrating the study of literature and medicine, and is an effective tool for building communicative competencies through which the doctor can influence the patient, make him feel better, and establish a therapeutic relationship where the conveyed empathy itself becomes a form of therapy. Chapter Three focuses on the organization and methodology of the experimental section of the study. It presents the design of empirical research, with particular attention given to the procedure for collecting reliable information. A methodology for experimenting is proposed, including a general plan of the study. The custom tools used in the research were specifically developed for this study and include - survey questionnaires, didactic tests, and evaluation cards based on specific criteria and indicators. The surveys include demographic indicators that outline the profile of the subjects, which consist of students enrolled in both English and Bulgarian language master's programs in Medicine, as well as hospitalized patients in the university clinical facilities.

In the period 01.03.2020-01.06.2022, an experimental study was conducted at MU-Pleven. It aims to approbate the constructed empirical model and to justify the effective use of literary texts in the Bulgarian language education of medical students for the formation of communicative competence for humane-ethical and empathetic professional communication with patients, according to the specificity of Bulgarian-language sociocultural communication in health care.

For the study of the problem of the use of artistic texts in the training of specialized Bulgarian language and proving/refuting the main thesis in the dissertation a complex methodology was chosen. Quantitative and qualitative research methods were used, which correspond to the aim, objectives, hypothesis, and specificity of the research. They can be separated into the following **categories**:

— Methods for gathering, clarifying, and systematizing the scientific facts: survey research, theoretical analysis and synthesis, comparison, and synthesis of specialized literature and information sources;

— methods for establishing empirical results - sociological methods: survey research; didactic testing; method of consecutive intervals,

method of pairwise comparison (dual scaling), method of ranking; empirical analysis - descriptive and causal;

— mathematical and statistical methods for empirical data processing: statistical software IBM SPSS, version 26.0; data analysis and visualization tool STATISTICA 12.5; Cronbach's alpha, Stewart's t-test, Mann-Whitney test, etc.

— graphical methods for visual presentation of the results obtained: figures, charts, diagrams, and tables to visualize the data obtained and the resulting conclusions.

The structure of the experimental study includes four stages: preliminary, finding, formative, and final.

During the preliminary stage (February/March 2020 for students in the English language program; September/October 2020 for students in the Bulgarian language program and patients) two surveys were conducted to investigate the opinion of medical students, native speakers of other languages, and students at the Medical University - Pleven, and hospitalized patients on the issues of formation of the studied competence:

- level of foreign students' preliminary attitudes to using the language studied in communication with native speakers of different target groups;

- The degree of communicative competence among students enrolled in the English-language and Bulgarian-language programs in the “Medicine” specialty, master’s degree level.

- Effectiveness of the educational process (innovative methods, techniques, means, forms of organization of training in specialized Bulgarian language);

- Degree of acceptance between different ethnocultural and religious groups;

- Degree of the beneficial influence of communicative competence of foreign students on the diagnostic-therapeutic process.

Based on the results obtained from the two surveys, several problem areas were identified, and a pedagogical toolkit was constructed to overcome the deficits in teaching Bulgarian as a second language to medical students.

The ascertainment stage of the study was conducted from September 2020 to February 2021. The duration exceeded the initially planned timeline due to pandemic conditions and the author's commitment to conducting it to implement it only in a face-to-face format, as outlined in the conceptual model.

During this stage, a pre-test was conducted on four groups (2 groups in the ELE and 2 groups in the BLE) at the Medical University of Pleven. The test was used as a tool to assess the level of language and communicative competencies of medical students, focusing specifically on their knowledge of basic grammatical categories and their reading comprehension skills. As an additional diagnostic toolkit, comprehension tasks for short written texts and a creative task (constructing a dialogue for taking a medical history) were used. Criteria and indicators were defined to measure the competence under study.

The formative stage of the experimental study was conducted during the 2021-2022 academic year. Observations were made on Bulgarian language exercises conducted in the experimental groups, based on predetermined criteria. Alongside this, an analysis was conducted on the students' ongoing academic performance, including their grades for the winter and summer semesters, as well as the results of the annual exams in the subject.

The formative stage of the experimental study was implemented under two forms of education (face-to-face and distance education, partially implemented during the summer semester from February to May 2020/2021 academic year due to the COVID-19 pandemic).

The final stage took place between February 2021 and December 2022, involving students from both the ELE and the BLE. During this stage, the change in the level of communicative competence was assessed using the following tools: a post-test, analysis of the specific stylistic functions of comparisons and metaphors, evaluation of the frequency and stability (logical consistency) of comparisons, and differentiation of medical registers. The empirical data obtained were summarized and analyzed, leading to conclusions and recommendations.

Figure №3 is provided to illustrate the stages of the experimental pedagogical study.

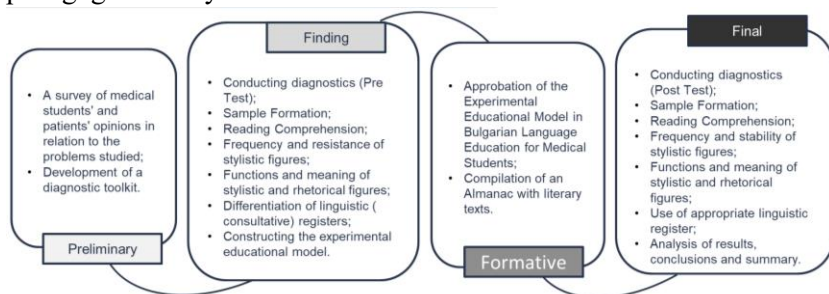


Figure №3. *Stages of experimental pedagogical research.*

The developed tools comply with the predefined goal, tasks, and hypothesis of the research. It is aimed at enhancing the effectiveness of the teacher's methodological approaches and achieving higher levels of communicative competence in students. Both proven effective methods, techniques, means, and forms of organization, as well as original semantic-aesthetic and methodological approaches are applied.

The experimental model for its formation as a professionally significant competence in medical students is carried out based on work with literary texts/fragments of texts even at lower levels of language learning, providing through appropriate tasks and activities the exercise of the communicative roles of reader, listener, hearer, speaker.

The pedagogical impact is directional: enrichment of the active vocabulary and consolidation of vocabulary knowledge; further development of the skills of perception and comprehension (reading and listening), including the use of literary expressions; understanding and comprehension of the messages in the work; improving the ability to formulate statements aligned with communicative goals; enhancing empathetic abilities through perceiving, understanding, and empathizing with the emotional states of literary characters; and promoting interdisciplinary transfer of knowledge and skills.

The proposed model is fully compliant with the current normative documents and current curricula in the Bulgarian language for medical

students at MU-Pleven. It has the potential to meet the learners' needs for knowledge, communicative abilities, skills, and habits of communication in a Bulgarian-speaking environment without claiming to be universal. The system of semantic-aesthetic and methodological approaches for the development of communicative competence using literary texts in Bulgarian language education is open and can be supplemented and updated depending on the dynamically changing interests and needs of medical students, who are found to need improvement in the following areas:

- Mastering a set of skills for acquiring lexical knowledge in thematic areas necessary for solving communicative tasks in the fields of students' educational and professional needs;
- Acquiring grammar that includes basic linguistic units aiding clinical communication: prepositions, adverbs, participles, pronouns, non-finite verb forms, impersonal sentences, passive constructions, synonyms, antonyms, paronyms, simple and complex imperative forms, types of sentences;
- Engaging in diverse text-related activities: perceiving, extracting information, understanding, interpreting, analyzing, reproducing, and producing;
- Productively mastering communicative skills: reading, writing, listening, and speaking in Bulgarian for the purposes of academic medical education and communication in clinical practice;
- Acquiring knowledge, skills, and habits related to multicultural communication based on established universal human values, empathy, and humane treatment.

Thematically, the literary texts are conditionally grouped into three educational modules. In many respects, they are subordinated to specific goals and are linked to future professional realization. From a content-planning perspective, they are integrated vertically and horizontally to achieve the expected results. Vertical integration entails the implementation of lexical-thematic and grammatical progression to achieve the levels of language competence (A1 – A2 – B1.2 according to CEFR) set out in the curriculum for each year. Within the context of the hierarchical inter-subject relationships between the course content, various types of receptive and productive tasks and

exercises with the text are carried out, related to the different stages of its perception, understanding, interpretation, and subsequent independent text production. Horizontally, harmonized with the course content from the preclinical and clinical cycle disciplines, integration ensures the mastery of key general and terminological knowledge and communicative competence necessary for future professional communication. The interdisciplinary exchange explains the transitions from the literary reality, in which students exist during text communication, to verbal messages and the perception of written medical case records. In other words, there is a transition from the abstract to reality and back.

1. The first module is based on reading and analyzing medical cases presented in literary texts, aimed at identifying similarities in the behavioral and emotional reactions of literary characters to the experiences of others and demonstrating empathy toward the patient as part of therapy.

2. The second module is built on reading and analyzing literary texts that discuss specific moral-ethical personal qualities of the characters. The pedagogical impact is focused on cultivating moral values in students necessary for the humane and ethical practice of the profession.

3. The third module is designed for reading and analyzing literary texts to develop communicative competence, which is practiced at three levels in professional communication with patients: perceptual (perception and understanding), communicative (exchange of information), and interactive (subject-subject interaction).

The content of the modular system is illustrated in Figure №4.

The developed and tested empirical model in a real educational environment operates at **three levels**: before, during, and after working with literary texts and/or selected fragments from them. These levels are graphically represented in Figure №5.

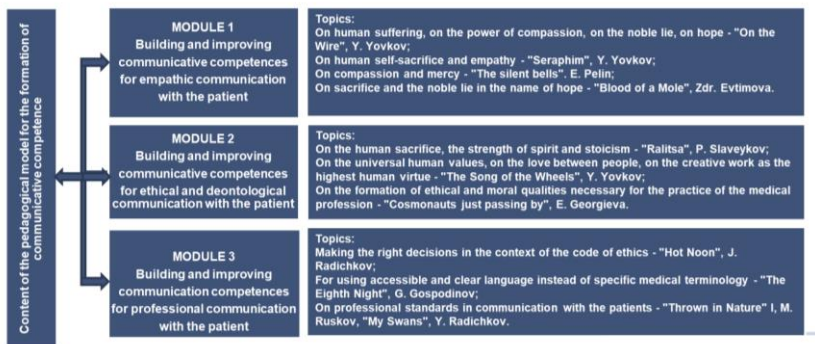


Figure №4: *Modules in the Experimental Model for Developing Communicative Competence in Bulgarian Language Education.*

System of Semantic-Aesthetic and Methodological Approaches for Developing Communicative Competence in Medical Students Through the Use of Literary Texts in Bulgarian Language Education

The model for forming and developing communicative competence in medical students consists of ten educational cycles. Each cycle, within the framework of three educational units, addresses a specific literary work or an excerpt from it. The tasks and activities are aimed at building upon the lexical-grammatical knowledge acquired so far in specialized Bulgarian language courses and gradually and systematically mastering communicative skills in opposition of text perception and creation.

The grammar module of the language course covers both parts - morphology and syntax. Students develop their linguistic competence by mastering terms (words and expressions used daily) that are new to them, together with key terminological vocabulary. They become aware of the existing norms in the modern Bulgarian language and the rules for their use and become familiar with the syntactic order in sentences.

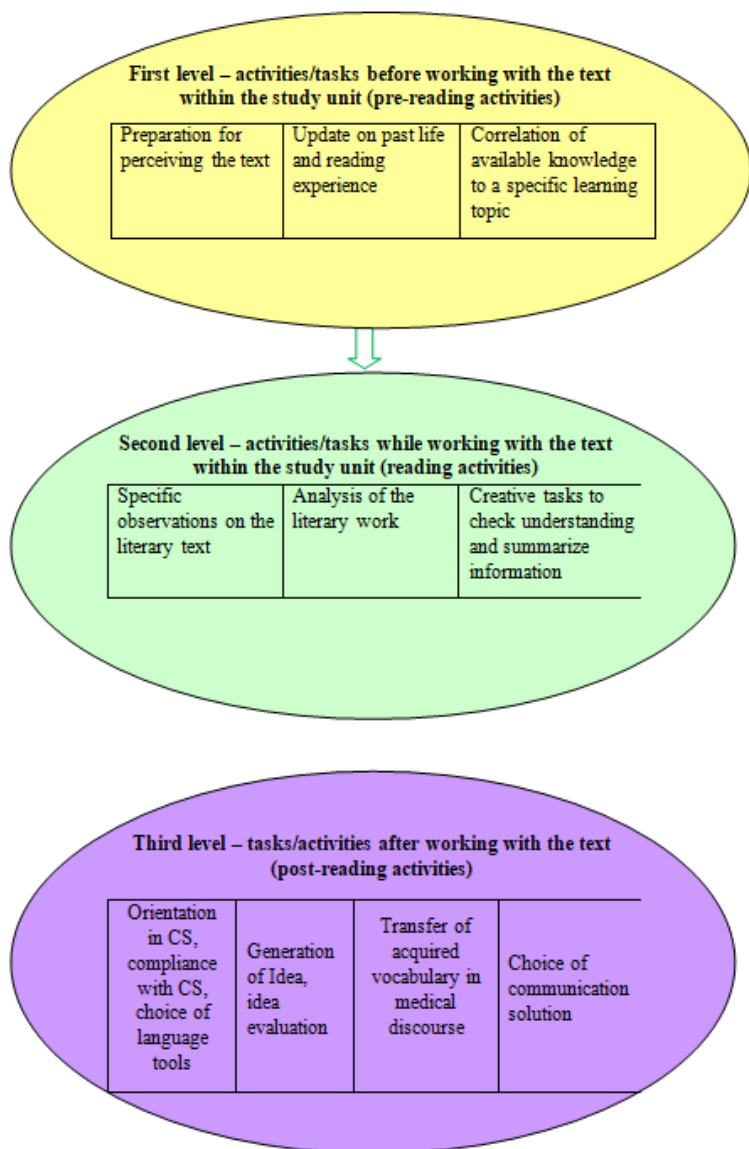


Figure №5: *Levels in the Pedagogical Model.*

The specialized scientific terminology module, including pre-clinical and clinical texts, focuses on the productive mastery of

communicative skills: reading, listening, speaking, and writing in Bulgarian for medical practice. It creates conditions for verbal interaction in learning situations in which every student has the opportunity to express his/her opinion, to be listened to, and to participate in dialogue. The content of the course integrates thematically selected literary texts divided into three modules, and the organization of the language course is subordinated to the overall theoretical and pragmatic concept. In organizational and methodological terms, the learning activities in the experimental model are designed and implemented on three communicatively oriented levels, in which the work with the literary texts is structured in successive lesson units:

First Level: Activities before the reception of the literary text

First lesson unit - preparation for perception and introduction to the topic: Work on each topic starts with a short presentation that introduces students to the author of the work and the era in which he or she worked. Students are given copies of the fictional text or selected fragments of it, a short Bulgarian-English glossary with the new vocabulary, accessibly presented so as not to distract from the perception of the proposed work. The glossary gives a concise and clear description or explanation of the meaning of words, concepts, phrases, stable word combinations, artistic figures, obsolete, dialectal, and foreign words, and names of processes and phenomena denoting cultural and everyday realities. The words are arranged in the order of their appearance in the text. After the explanation of the word's meaning, a note is added in parentheses to specify stylistic usage.

Preliminary Tasks: In the first exercise, after presenting the author, era, and specific vocabulary, tasks are set for independent reading of the text, updating personal experience, and preparing to work on the vocabulary with a focus on the keywords in the text provided in the worksheet.

Era and Author: Facts, phenomena, current issues, and socio-political highlights of the historical period that influence the formation of the author's personality and the development of their style are emphasized.

Second Level: Activities During Work with the Literary Text

Second Lesson Unit – Group Work:

Theme: The theme is introduced with a focus on the development of the action and the nature of the events. The literary-artistic intent of the author is specified, with an emphasis on creating motivation and attitudes for perceiving the characters, their experiences, actions, and motives, as well as the development of the plot.

Plot Summary, Composition, and Ideo-Aesthetic Analysis: During the exercise on each topic, the main points of the plot of the studied work (content and form components), problems, conflicts, and composition are traced. An ideational-aesthetic analysis is conducted to establish the informational-content contexts of the literary reality.

Author's Language and Style: The understanding and interpretation of the content are accompanied by an analysis of the artistic form of the work – language, style, and literary devices (epithets, comparisons, metaphors, symbols, gradation, inversion, etc.). The aim is for the instructor to help enrich the students' active vocabulary and improve their verbal expression through vivid literary examples.

Vocabulary Work: Vocabulary work involves clarifying unknown words and updating words from the passive vocabulary. Words, phrases, and expressions are summarized in a bilingual dictionary (which can be supplemented and expanded by students during the exercise).

Third Level: Activities After Working with the Text

These tasks include answering the questions and generalizations after the conceptual and aesthetic analysis.

Third Lesson Unit – Completing Creative Tasks: Creative tasks are assigned after the ideational-aesthetic analysis is completed.

Semantic, Aesthetic, and Methodological Approaches to Working with Literary Texts in the First Module: *Building and Enhancing Communicative Competencies for Empathetic Interaction with the Patient.*

Empathy is an emotional state in which one can put oneself in another person's place and similarly empathize with their feelings, desires, and ideas, understand and accept their emotional state. Empathy manifests itself not only in terms of interaction with people. Contact with a literary work also evokes positive and negative feelings. The reader

gets into the image of the literary hero, a process of identification occurs. The literary text re-creates the imaginative world and through its concrete-form perception, generalized understanding, and appreciation, its immediate subjective experience is achieved. With its ability to provoke empathy and empathy, a literary work in the language studied activates one's knowledge, ideas, memories, lived feelings, and experience, provoking comparison with native language models, thus contributing to the development of emotional intelligence. In this sense, the development of empathy as a basic social quality in medical practice is a necessary condition for the fulfillment of the humane mission of the medic. The concept of developing communicative competencies for expressing empathy is developed through an analysis of the themes of human suffering and the power of compassion ("On the Wire", Y. Yovkov), about human responsiveness and empathy ("Seraphim", Y. Yovkov), about the power of compassion and mercy ("The Silent Bells", E. Pelin), about the noble lie in the name of hope ("Blood of a Mole", Zdr. Evtimova). The problematics are discussed in the context of the author's humanistic messages, which students arrive at after reflecting on the content and characterization of the characters. Particular attention is paid to the artistic details of poverty superimposed in the portrait characterization of the characters, which evoke an emotional-empathic response: "... his girdle is armored, his sweatpants - too. He was barefoot" ("On the Wire", Y. Yovkov); coat "ragged, tattered, pierced all over, patched all over", ("Seraphim" Y. Yovkov); "ragged, dirty, covered with an unclean clothwith bare, dirty feet that had imprinted their footsteps on the floor" ("The Silent Bells", E. Pelin). The additions to the portrait characterization of the characters, introduced by non-verbal means - their facial expressions and gestures, are also highlighted: ("His gaze wandered", "He tightened his mustache unnecessarily", "...from beneath the blanket, his nape, melted by the illness, his face was like wax" ("On the Wire", Y. Yovkov); "The woman fell silent and wept. Seraphim listened to her hiccoughing and howling like a beaten woman" ("Seraphim", Y. Yovkov); the child "pale, withered like a lance flower. It had drooped its eyes, was breathing heavily and moaning painfully" ("The silent

bells", E. Pelin); "She shook, she would have fallen ... her gaze burned into my eyes" ("Blood of a mole", Zdr. Evtimova). It is summarized that such a subtle psychology is also needed by students, and future doctors, to catch the most inconspicuous, at first glance, details in the condition and behavior of the patient - appearance, speech, and non-verbal manifestations, to diagnose it, to select the most adequate therapy and to compose a treatment plan. Character speech is another vivid means of individualization. Its analysis suggests that it is saturated with agonizing pauses, unspoken phrases, sentences are choppy ("On the Wire", Y. Yovkov), or filled with many pauses, peppered with words taken from folklore: "natural as alive so to speak" ("Seraphim", Y. Yovkov), or distinguished by expressiveness: "You have! You have! My wife is going to die. Three drops only!" he seized my left hand, raised the wrist violently, twisted it. - Three drops! Otherwise, I shall lose her!" ("Blood of a Mole," Zdr. Evtimova).

Regarding patient speech, the observed characteristics highlight the crucial importance of both verbal and non-verbal signals. The prosodic and paralinguistic qualities of these signals, along with the selection of lexical items and correct usage of grammatical forms, determine the quality and nature of communicative interactions. These factors support or hinder the achievement of communicative goals. Therefore, in the analysis of communication with patients, within the context of reflexive-personal manifestations of empathy, special attention should be given to the concept of "noble lie." By itself, the concept of a noble lie is an oxymoron—most often, a lie is seen as ugly, dishonest, misleading, and turning into deception. However, it is important to emphasize to students that in certain situations, a person, particularly a physician, might be compelled to utter such a noble lie (considered by Cicero in Antiquity as a necessity) and it has nothing to do with dishonesty or deception. Rather, it is spoken with the intention of not taking away the last hope of the patient, and thereby the fragile pieces of resistance, desire for life, and will to recover" You'll see it too.... You'll see it, I tell you you'll see it."), ("On the Wire", Y. Yovkov), "- Here you are - I said. This blood is from a mole" ("Blood from a Mole," Zdr. Evtimova). We make an analogy with such sparing

behavior of the doctor in delicate situations for the patient, which is most often an expression of humanity, mercy, and empathy. Within the moral case discussed about the noble lie and its place in medical practice, emphasis is placed on the doctor's ability to put himself in the place of the patient and his loved ones, to understand their feelings, wishes, hopes, and actions. The example could be successfully integrated into communicative exercises for expressing personal opinions on medical issues, such as those posed by the Hippocratic Oath.

Semio-aesthetic and methodological approaches for working with literary texts in Module 2: *Building and improving communicative competencies for ethical and deontological communication with the patient.*

One of the ways to improve health care and to build a humane attitude towards the patient is the education of a few moral qualities leading to the interaction of the future health professional with patients: humanity, compassion, empathy, and dedication. Modern research and advances in engineering (electronic and laser) sciences and the field of bio- and nanotechnologies, followed by their application in tissue engineering, as well as the penetration of high-tech devices in health care institutions, pose several moral challenges to medical ethics, deontology, and medical law. Without denying high technology, it must be acknowledged that it alienates the physician from the humanistic treatment of the patient. The patient is rather becoming an object with interactions mediated by computers, digital devices, and medical equipment, by the duration, activities, scope and financial dimensions of the clinical pathway, and by the limited examination time. In the context of globalization, the observed distortions in the relationship between health professionals and patients are threatened by further dehumanization. Discussed in the context of medical students' Bulgarian language training, the issue of ethico-deontological education emerges as a central issue in the general and special training of future physicians for humane communication in medical practice. The formation of moral qualities in them continues throughout their conscious life, and their manifestation is essential for the establishment of a therapeutic and emotional-psychological

relationship between them and other subjects in health care. The placebo effect of a doctor's words is often stronger than medication and even the scalpel. As a result, greater efficiency is achieved in examination, consultation, diagnosis, and treatment.

The didactic technology for the building and development of communicative competencies for ethical and deontological communication with the patient in a methodological context finds a solution by working on the topics of human sacrifice ("Ralitsa", P. Slaveykov), on building common human values, on love among people, on creative work as the highest human virtue ("The song of the wheels", Y. Yovkov), on forming moral and moral qualities necessary for the profession ("The cosmonauts only passing by", E. Georgieva). After familiarizing themselves with the plot and reading individual fragments of the texts, the students, with the help of the instructor, reflect on the moral and aesthetic messages: praise of the national virtues and the beauty of the Bulgarian woman as a symbol of moral purity and high ethical essence: "Like that evening-star in the sky, there was a maiden in the village of Ralitsa, and the whole village was crazy about her. ("Ralitsa", P. Slaveykov), "her eyebrows thinly painted like leeches, her face round and white, her eyes surrounded with fine eyelashes, like the wasp of black-class wheat" ("The song of the wheels", Y. Yovkov). Attention is drawn to the common human values of spiritual stoicism, vital strength, and vitality, symbolized by the smile: 'and yet that beautiful smile blossoms on her lips, unrivaled by life - with a heart unbroken' ('Ralitsa', P. Slaveykov); 'He did not die because, as he himself said, death does not come when we are waiting for it, but when we least expect it. But he no longer thought about any of this. Suffering and pain are easily forgotten once health returns' ("The Song of the Wheels", Y. Yovkov). Here we encounter a favorite compositional technique - the illness of the craftsman - a counterpoint to his robustness and strength. The writer recalls the philosophical idea that in the face of illness and death, one appreciates and appreciates life better. And then Sali Yashar "sees through": "Oh, Allah! I have been blind, I have been foolish! What fountains and bridges do I want to build? Good deeds! Is there a greater good deed than the one I am doing? I must make carts, carts!" ("The Song of the

Wheels”). The author's idea resonates strongly with modern times, emphasizing professionalism as a universal concept – specifically as a professional quality and moral value for the future medic. The moral message by Y. Yovkov encourages students to improve themselves and stirs in them the aspiration to achieve high competence, mastery, perfection, the realization of high goals in medicine, mastery of knowledge and skills for the treatment of the sick, creativity and innovation, and just like the protagonist - to do good deeds. The students understand the dream of glory, of a good name, of serving the profession with integrity, of immortality in the memory of the people, and project all this onto their treatment of patients. Through his human life, the hero seems to suggest to future doctors how to find the answer to the question of the meaning of human life and how to achieve harmony - harmony within their souls and with the sick. Therefore, the analysis of the text focuses on the power of the human spirit to rise above suffering and overcome pain, emphasizing that stoicism is a cardinal feature of the Bulgarian national character, thanks to which our people have survived the historical trials. This inherent trait of the Bulgarian people is something the doctor should strive to awaken in their communication with the patient - to provoke his will to live, his desire to survive. The specialist's message could be: 'You and I must cooperate. These findings lead directly to the understanding that in the act of communicating with the doctor, the patient can be intrinsically motivated to fight the disease and pain, to overcome suffering, to show fortitude and faith in the cure.’ Thus, in the situation of communication, physicians unintentionally and deliberately influence the important aspect of the healing process - the patient's desire to recover. In this sense, the performance of health care duties requires physicians to possess not only professional knowledge and skills but also moral-ethical and personal qualities. In addition, educators must address and instill the humanistic idea of the intolerance and inability of the fragile human being to adapt to the world in which we are born and are trying to survive “You keep hugging him, reassuring him that no one here means him any harm. That he'll be all right. ... all day they've been hitting us, demanding information, they've found our hiding place in the woods, I won't tell them anything, nothing, your

hallucinating grandfather tells you the moment the man next to him starts screaming for help, help” (“The Cosmonauts Are Only Passing By,” E. Georgieva). The texts analyzed in this module are thematically linked to specific situations of professional interaction in which moral-ethical components are leading. The assignments for work at the level of clinical dialogue are a good opportunity for students to practice typical etiquette markers in medical discourse.

Meaningful-aesthetic and methodological approaches to working with literary texts in Module 3: Building and improving communicative competencies for professional communication with the patient

Defined as communicative, the medical profession cannot be pursued without solid theoretical and practical training. Like any social skill, linguistic communication can also be further developed and refined. When the skill is developed to a high level, it is characterized as communicative competence and is equivalent to the effective operation of linguistic knowledge in a given communicative situation. This brings out the formation of the key competence as the main goal of patient-centered learning in the Bulgarian language course in its medical, methodological, and professional-applied aspects. It should be developed at a level that satisfies the needs of effective professional communication by the future health professional, a native speaker of a language different from the patient's language. The communicative needs of medical students are related to the perception and production of various types of related texts oriented to full verbal communication. Contemporary medical texts of various types - outpatient sheets, anamnesis, history of disease, diagnosis, etc. are treated by medical humanities as literary texts, not just as a description of the patient's actual condition.

Accepting the thesis that the construct of communicative competence is based on the correct and appropriate use of linguistic tools and the application of specific cultural codes in the performance of various communicative tasks - such as perception, reproduction, interpretation, and creation of own texts, the third module offers tasks and activities for working with literary texts to develop skills of information exchange, interaction, and mutual perception and

understanding. The work on the formation and further development of the above three structural sub-aspects of professional communication with the patient is conducted in the context of analytical activities on the following key themes: on making correct professional decisions in the context of medical ethics ("Hot Noon", Y. Radichkov); on using accessible and understandable language in medical practice ("The Eighth Night", G. Gospodinov); on professional standards in communication with patients ("Thrown into Nature", M. Ruskov). Building professional sensitivity in making acceptable decisions and taking responsibility for their implementation is part of the mechanism for adhering to the moral and ethical component of the medical profession. An example is provided in Radichkov's "Hot Noon," where a military doctor proposes a drastic solution to save a child's life by amputating the arm: "First came a military doctor in a white apron from under which his boots were visible. The assistants were carrying a bag and a light stretcher.... Relieved and soft, the child relaxed on the wet stones, and the doctor and assistants were already opening the suitcases placed on the stretcher." Bringing up the issues of nurturing moral-ethical personal qualities and forming attitudes for a humane solution to any medical case is a starting point in the analysis of the image of the brigade's military doctor who suggests the shocking solution of amputating the child's arm to save its life, noting that "one-armed men do not serve as soldiers."

Debate with students the pre-set problem: When, under what circumstances, does a doctor have to sacrifice a body part (albeit a vital one) to save a patient's life? During the discussion we conclude that often in their professional path, the doctor has to make complex and responsible decisions, sometimes both difficult and dramatic, to help the suffering person. This incident can serve as an appropriate example in such situations and teaches the skills of building correct judgment, the ability to make a quick and accurate, timely decision. Linguistically, the general's communication with the child in the dramatic situation is an example of using an appropriate and sparing, low register of language: 'I see you are a hero,' said the general. — 'When you grow up, you will serve with me. Do you want to?' - 'Why, yes!' said the boy. His teeth gleamed under the bridge-so wide was his

smile that all his teeth bared and gleamed. He was going to serve with the General!” (“Hot Noon”, Y. Radichkov). The act of humanity generated by the tragic fate of a child shows the extent to which people can activate and reveal the best in themselves in such a critical situation. Radichkov's humanist conveys his philosophical idea that when people unite their efforts for the sake of good, they can save human lives, even though the situation may seem to be hopeless.

Another important communicative component is the accurate selection of appropriate linguistic means, and the use of understandable terms, expressions, and words used in medical texts to describe a specific diagnosis - “neuritis acustic”. The focus is on the symptoms and therapy of the disease and the medication the patient is taking: 'nivalin, duzodril, dibazol, tanakan, betaseric, vastarel and again nivalin, duzodril, dibazol', and organs: “I pronounced them aloud so that they would enter directly from the outer ear through the middle ear (auris media), slide down the eustachian tube, pass unharmed through the hammer, anvil, and stirrup, and lend their healing phonemes to the complex structure of the inner ear (auris interna). There, at the beginning of the circuitous labyrinth, lay like a Minotaur a snail (cochlea), which also had to be passed without being killed, to reach at last the organ of Cortius, which sheltered the dead auditory cells” (“The Eighth Night”, G. Gospodinov). The text has been successfully integrated as a useful source of specific medical terminology for students training to be physicians in both English and Bulgarian language programs. The issue of human despair is debated, which, having reached the extreme limit, the feeling of powerlessness, makes people turn to folk medicine, folk beliefs, superstitions, and “grandmother's remedies”. Thus, are born absurd and desperate actions - using bat wings, ashes from a hearth, and as happens in the story, drinking the blood of a mole (“Blood of a Mole”, Zdr. Evtimova), or “ginseng with royal jelly from the mountains of Northern China, mummies from Mongolia, heated Greek olive oil and incense crystals to my geographically native dried beef tallow (warmed). I went back to the 17th century and, digging in some Medicine Books, I found the following: 'If the ear buzzes, crush fresh blackberry leaves, mix them with honey and olive oil, warm it, and

drip it in...” (“The Eighth Night,” G. Gospodinov); and another even more categorical remedy: “For deafness-mix goat’s blood with tallow and pour it into the ears” (“Thrown into Nature,” M. Ruskov).

We emphasize that people are willing to do anything to save a loved one, but at what cost? This can lead to crimes committed in the name of a “noble cause”—kidnapping people, forcibly stealing organs, and even murders. There are shocking cases of doctors who violate the Hippocratic Oath. These stories provoke deep reflections on humanity, its pains, and concerns, and inevitably stimulate in students a conscious desire in their future work to help with professionalism, research, and innovative spirit in establishing advanced diagnostic and therapeutic methods for treating the diseases—modern-day scourges—to reduce the number of desperate people who seek cures in superstitions and dubious healers. We conclude with the students that the Hippocratic Oath is not just a collection of beautiful words—it requires high moral standards, a sense of duty, and responsibility toward patients. We draw a parallel to the coded rules in the oath, highlighting the key principle *Primum non nocere* (“First, do no harm”), and initiate a discussion in the context of the general’s decision to save the child’s hand (“Hot Noon,” Y. Radichkov), Jorge’s choice to trust medicine (“The Eighth Night,” G. Gospodinov), and the clash between good and evil, the pursuit of progress versus conservatism, science versus charlatanry (“Thrown into Nature,” M. Ruskov).

The organizational, functional, and cyclical nature of the modular learning system constructed to teach Bulgarian language to medical students is graphically summarized in Figure 6.

In its graphical visualization, the sequence of activities is linked by arrows, and the levels are marked by ellipses. The model represents the interaction between internal and external factors of the system as a continuous process. In the sequence of activities that the overall system undertakes to reach the intended goal, the role of the innovative pedagogical model as a particularly active factor cannot be overlooked.

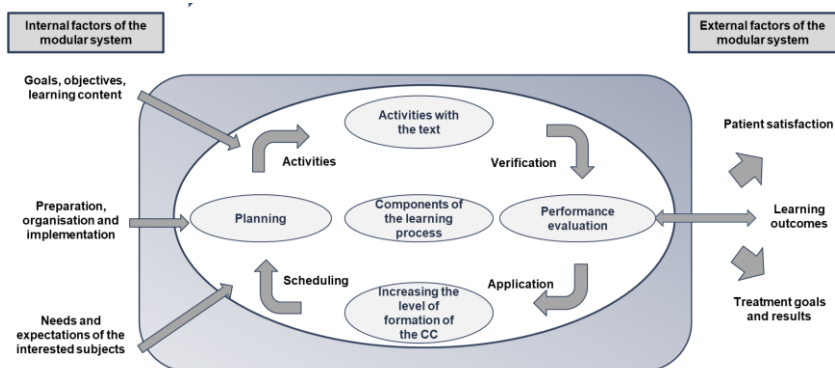


Figure №6. *Organizational-functional model of the system of semantic-aesthetic and methodological approaches to work with literary texts.*

The cause-and-effect interrelationships between the planning, the execution of various tasks and activities with literary texts, the evaluation of the results, and the development of the professional communicative competence of medical students are clearly visible. The positive effect is measured by higher patient satisfaction, increased learning outcomes, and achievement of treatment goals and results.

Chapter Four: Analysis of the Results from the Experimental Study

Chapter four presents the analysis of the results of the experimental study. Methods appropriate for conducting reliable pedagogical research are used. The model was approbated in a real learning process. The research methods are consistent with the objectives, object, and hypothesis. The obtained data were processed with appropriate mathematical and statistical methods. The scientifically applied results, generalizations, and conclusions after the experimental work conducted on the validation of the three-level model have been presented at scientific forums at home and abroad and published in various journals.

In the preliminary stage of the research, two surveys were conducted to explore the opinions and assessments of different target groups on major issues related to students' communicative competence.

The first survey, implemented in three sections, tracked the perspectives of medical students trained in Bulgarian and English language programs according to the following criteria:

- level of Bulgarian language proficiency;
- use of Bulgarian language in academic and practical situations;
- barriers to communication with native speakers;
- interaction with people of different cultural, ethnic, and religious identities.

As a result of the analysis of the findings of the first section of the survey, the following conclusions and generalizations are drawn:

- The self-assessment of just over half of the students (54.7%) is concerning, as they rate their proficiency in Bulgarian at the end of the first year as low or satisfactory, acknowledging serious deficiencies in their language skills. This poses a barrier to their full participation in the practical activities at clinical bases where communication in Bulgarian with patients is mandatory.
- Communication in Bulgarian with representatives of the target groups is not prioritized by the participants in the English-language program due to the non-mandatory use of the target language in academic communication, and they clearly state a preference for using the mediator language; trainees in the Bulgarian-language program report that they do not fully get along with people speaking another Slavic language.
- Students noted that they have difficulties in communicating with patients due to the situational conditioning of real communicative situations in medical clinical practice and the inability to follow the sample sequence for medical questioning given in the textbook.
- According to the survey respondents, the first three places were occupied by difficulties in effective communication with patients of different verbal and non-verbal nature, with a higher rank given to differences in the use of language means of communication - 91%, low level of linguistic and grammatical knowledge - 84% and differences in logical and linguistic construction of texts - 81%. The

greatest misunderstandings in the recognition of non-verbal means were found by the respondents when comparing the affirmative and negative elements in the native and the receiving country.

- The student's opinion on the effectiveness of the forms of training shows that the practices, exercises, and internship were rated as the most important. During these forms of training, better conditions are created for involvement in real language situations of medical practice requiring active participation in productive listening-speaking communicative activities.

To summarize the results of the second block of questions in the survey, four criteria were derived: the relevance of the language course to the needs of students; attitudes towards the use of accessible and understandable language in communicating with patients; preferences towards the use of a consultative language register; and attitudes towards sociolinguistic markers of medical discourse. The analysis of the first criterion allows us to conclude that two-thirds of the students choose practical exercises as the most effective forms of training that create conditions for involvement in real communicative situations of medical practice. Over 50% of respondents preferred exercises and internships, which involve productive language activities like listening comprehension and speaking. The effectiveness of training in building communication skills with instructors was positively rated by one-quarter of the students. The results obtained from the study of the need for how specific medical terms can be deciphered and clarified to patients using appropriate comparisons (which is tracked by the second criterion) provide evidence that respondents have a positive attitude to using the Bulgarian equivalents of highly specialized medical terms. This was seen as an appropriate way of overcoming cultural differences. It is oriented in the direction of building relations of understanding, tolerance, and correctness between communicators from different lingua cultural, and ethnic groups. Regarding the replacement of professional medical terminology with common vocabulary, respondents strongly believe that this is a beneficial communicative practice. More than two-thirds of respondents (68%) emphasized that when communicating the diagnosis, especially to patients without

medical training, it is necessary to use understandable Bulgarian synonyms instead of the well-known Greek Latin terms understood only by specialists. A clear preference was expressed by more than 71.0% of the students towards appropriateness in choosing adequate means of expression, evaluated as a supporting factor in achieving the diagnostic-treatment goal, which was tracked by the third criterion. Responses to the questions under the fourth criterion indicate preferences for the following sociolinguistic pairs of markers in medical discourse: conciseness and brevity, completeness and integrity, clarity and precision. These markers were ranked as follows: conciseness and brevity (78.0%), completeness and integrity (77.0%), and clarity and precision (67.0%).

The following criteria were proposed for the evaluation of the answers to the questions from the third block of the survey: interaction with representatives of different linguacultural, ethnic, and religious communities; tolerant attitude towards participants with different ethnic backgrounds; recognition of characteristic features of Bulgarian ethnocultural identity in literary texts; identification of difficulties related to the recognition of different verbal and non-verbal markers in the host country. The collected information and its analysis allow drawing the following conclusions: the majority of the respondents (about 90%) state that different religious beliefs do not create difficulties and barriers to verbal communication with the representatives of different groups; giving external expression to religious beliefs through their symbols is not considered as an objectively significant factor for disrupted or difficult communication; more than two thirds of the respondents (77.0%) say that they have the freedom to observe rituals of a religious nature during their stay in a sovereign country such as Bulgaria; respondents identified ethnic tolerance as a leading factor for appropriate and meaningful communication, as differences do not create barriers, do not separate minorities, but rather are a prerequisite for achieving equality in a multicultural environment; there is freedom to accept other cultural codes - traditions and customs manifested in the language and in national linguistic stereotypes, which play an important role in the process of mutual understanding and acceptance; the majority of

respondents (79.8%) stated that the university does not allow restrictions on the practice of any religion or the performance of rituals related to it.

Analysis of the results of a survey among patients on the level of proficiency of foreign medical students in the Bulgarian language

To analyze the results of the second survey (to explore the opinion of patients), five criteria were identified: observance of the orthographic norms of the Bulgarian spoken language; use of understandable synonyms of specific medical terms; appropriate use of linguistic means in a specific communicative situation; recognition of non-verbal signals; the importance of communication with the doctor in the diagnostic and treatment process. The summarized findings are as follows: Almost two-thirds of patients (64%) indicated that in communication students deviate from literary norms, which creates problems in conveying, perceiving, and interpreting important medical information. Most patients (78%) noted that students do not use understandable synonyms of medical terms. The ability of trainees to appropriately and functionally use observed linguistic figures (comparisons, metaphors) in medical discourse was rated as low by 75% of respondents. The study reported low rate in decoding the nonverbal signals given by the trainees to the hospitalized patients. A high percentage of respondents (93%) inferred communication with the physician as a major factor in achieving a quality diagnostic and treatment process.

The summaries and conclusions based on the comparative analysis of the data from the two surveys make it possible to identify the following problem areas:

1. Regarding communicative competencies and their components:
 - linguistic competence - deficits and incompleteness in students' knowledge of general, terminological, and special vocabulary of preclinical and clinical disciplines are the most serious barriers to understanding spoken language, as well as in composing statements consistent with the communicative goal;
 - grammatical competence - there are gaps in the application of grammatical norms;

- orthographic competence - Deviations from standard pronunciation norms were noted, including incorrect pronunciation, stress errors, inaccuracies in the use of the definite article, and others.

2. Regarding the level of formation of sociolinguistic competencies - deficits are observed in the process of intercultural communication, which is expressed in the inappropriate use of linguistic markers of communication, unfamiliarity with Bulgarian speech etiquette, undeveloped skills in the use of understandable explanations or the use of comparisons, figurative metaphors, etc. to replace special medical terms.

3. Regarding the level of formation of sociocultural competencies - they have limited knowledge of the socio-cultural features characteristic of the language studied, and they do not distinguish the signs of cultural difference.

4. Regarding non-verbal linguistic means - there is a lack of knowledge of the non-linguistic components of the host country encoded in body language, facial expressions, gestures, postures, etc.

The findings of the existing deficits require actions to be taken to increase the linguistic, grammatical, lexical, and orthographic competencies of medical students to further develop and improve the skills of clear and accurate perception and construction of verbal messages with meaningful information from and for the patient. The summary, analysis, and interpretation of the obtained data were considered in the construction of the methodological toolkit applied to the experimental groups.

Analysis of the results of the ascertainment stage of the pedagogical experiment

The objective of the diagnostics conducted was to establish or reject the assumption that the participants in the BLE and ELE before the start of the experimental training had similar results to the specific level of proficiency in the Bulgarian language in the CEFR (A1). There was no statistically significant difference between the mean scores of the studied students in the total test scores equated to the scores according to the current grading system in Bulgaria (Figure 7: Line graph 1). From these data, we conclude that we can randomly select experimental and control groups from all formal groups tested

at the beginning of the academic year with which to conduct the experimental pedagogical study.

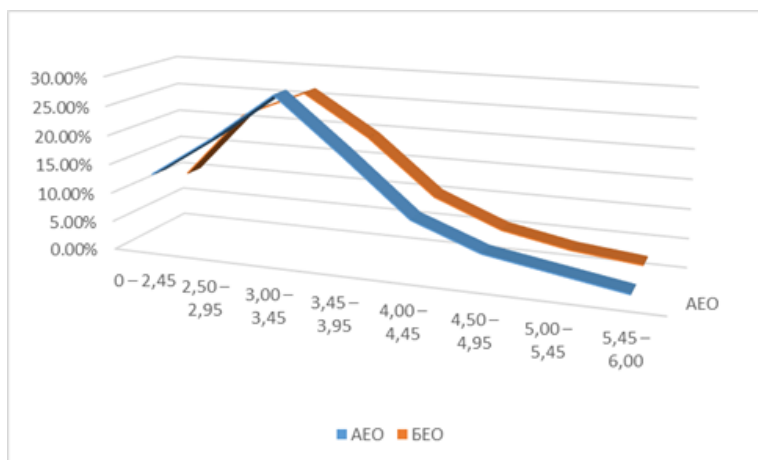


Figure 7: Line diagram 1: Entry-level test results (level of proficiency in the Bulgarian language according to CEFR - level A1).

Comparative analysis of the results of the input measurement of the reference level of proficiency in Bulgarian by medical students in English-language and Bulgarian-language programs: Analysis of the results of the diagnostic test (Pretest).

In quantitative terms the sample size is large (300 units), and in qualitative terms it is relevant to the general population (foreign students at MU-Pleven). The ratio between the sample and the general population is 1/6.

It is important to emphasize that in social sciences, including medicine, large numbers of units are not used because monitoring a unit requires large-scale funding and time. Therefore, the minimum required number is used. In a diagnostic study at the input/output level regarding the formation of language and communicative knowledge, 48 students at MU-Pleven were included, divided into four groups as follows: two groups each from the English and Bulgarian language programs (experimental and control) - four groups in total. Each group included 12 students. For the study of the entry level of the students

from the experimental and control groups a diagnostic toolkit - Pre-Test was developed. This test aims to determine the level of proficiency in the target language. The test is designed based on the CEFR model to evaluate the level of mastery of the curriculum content, providing validity for our claims. The empirical data obtained are presented through descriptive and statistical analysis. The conclusions are synthesized according to the criteria for measuring the degree of coverage of level A1 by medical students, with corresponding indicators and benchmarks. The comparison of achievements between the experimental and control groups was conducted using two statistical tests to check for normal distribution: the Kolmogorov-Smirnov test and the Shapiro-Wilk test. The second test is appropriate when the sample size is less than 100. From the two statistical tests, we conclude the degree of deviation of the observed distributions from normality. The Kolmogorov-Smirnov test is not statistically significant as it has a $p\text{-value} > 0.05$ for each group. The Shapiro-Wilk test was also not statistically significant for the four groups studied ($0.859p=$, $0.543p=$, $0.338p=$, $0.664p=$). The empirical data obtained show that in this case, we can assume the distribution of the observed variables to be normal. The results show no statistically significant differences between the experimental and control groups in the English-language and Bulgarian-language programs at the entry-level. The statistical measurements lead to the following more important conclusions: 1) The scale used, composed of 13 items, has good reliability [$\alpha = 0.815$] (standardized item $\alpha = 0.804$). 2) There is a statistically insignificant difference between the two experimental and the two control groups in AEO and BEO at the input level. 3) The main conclusion of the first point is confirmed by the non-parametric Kolmogorov-Smirnov and Shapiro-Wilk tests). 4) The parameters show insignificant differences, which gives us a reason to examine the two experimental and the two control groups of students in AEO and BEO as two complete samples - 24 students in KG and 24 students in EG, respectively. 5) The results indicate non-significant differences in the level of target language acquisition achieved by students in BEO compared to students in AEO, which gives us a

reason to assume that the experimental model is equally applicable to medical students enrolled in both programs.

Analysis of the results of a study on the level of formation of communicative competencies in medical students

The analysis of the results of the diagnostic survey is based on seven criteria (Table 3):

Table No. 3: Criteria, Indicators, and Evaluation Metrics.

Criteria	Evaluation Metrics	Indicators
1. Perceiving a text and selecting correct statements related to the content of the text.	1. Read an unfamiliar text (in two parts and questions for each part) of 400-450 words for up to 35 minutes.	1.1. Answer to the true-false questions. 1.2. Answers short questions (with 1-3 words) correctly.
	2. Fill in the blank space in sentences from the text.	2.1. Find a matching word among other words to fill in a blank space in the text. 2.2. Complete sentences.
2. Orientation in the communicative situation.	1. Navigate the communication situation: who is speaking/to whom.	1.1. Able to recognize the roles of addresser and addressee. 1.2. Fulfills the communicative roles of the addressee - speaker, creator of the text; to the addressee - listener, recipient of the message.
	2. Find out why it's being talked about.	2.1. Can detect what the text is talking about.

		2.2. Know how to find the micro-themes that create the meaningful integrity and continuity of the text.
	3. Establish the static and dynamic aspects of the text.	3.1. Can detect the time of the action in the text. 3.2. Can find the place of action in the text. 3.3. Establish the static and dynamic aspects of the text.
	4. Discover how to speak	4.1. Know how to find out how to talk.
3. Finding and extracting specific information from a text.	1. Search, find, and extract specific information from text.	1.1. Can differentiate keywords.
	2. Understand the meaning of an unknown text when reading with a certain communicative task	2.1. Can understand phrases, expressions, and short texts written in simple words describing people and events.
4. Evaluating the frequency of use of comparisons.	1. Find direct comparisons in the analyzed text.	1.1. Can estimate the frequency of use of simple comparisons.
	2. Find indirect comparisons in the studied text.	2.1. Can evaluate comparisons by stereotypy/sustainability.
5. Assessment of ability/stereotype comparisons.	1 Find lexemes for direct matching in the examined text.	1.1. Can find the qualities of an object, person, picture, etc., compared with others. 1.2. Can replace special medical terms with

		appropriate synonyms.
	2. Explain specialized medical terms with appropriate comparisons.	2.1. Use comprehensible comparisons to clarify medical terms. 2.2. Can replace specific medical terms with appropriate similes.
6. 6. Understanding the specific stylistic functions of metaphors in the text.	1. Can find lexemes with figurative meaning in the text under consideration. 2. Can replace specialized medical terms with appropriate metaphors in the studied text.	1.1. Know how to distinguish figurative meaning that gives a new quality to a given concept.
	2. Can replace specialized medical terms with appropriate metaphors in the study text.	2.1. Able to replace special medical terms with appropriate metaphors.
7.Distinguishing the variants of the medical language registers.	1. Recognize the high medical register.	1.1. Know how to find and replace highly specialized terms of Greek Latin origin, loanwords, and foreign words.
	2. Recognize the average medical record.	2.1. Know how to find and replace specialized but often-used terms in

		the modern Bulgarian language.
	3. Recognize the low medical register.	3.1. Know how to find and transform specialized medical terms with comprehensible synonyms established in the modern Bulgarian language.

Analysis of the results of Criterion 1: As a result of the analysis of the results of the Pre-Test, the following conclusions can be drawn about reading comprehension skills:

- Two-thirds of the students had no difficulty in solving the test items requiring the competencies of “Distinguish true from false statements”. 68.07% and 66.7% of the control and experimental groups, respectively, indicated correct answers. This indicates the presence of good skills to choose between two alternatives - true/false.
- The statements that examine the competencies for “Searching and extracting information from text” were more difficult for the students. 66.7% of the students from the control and 63.54% of the students from the experimental groups gave correct answers. Based on these empirical data, we can conclude that students' competencies for searching and retrieving information are less developed compared to their competencies for choosing between two alternatives.
- Statements that examine students' ability to draw inferences and conclusions related to finding indirect information in the content of the text were the most difficult for the four groups to complete. Only 63.9% of students in the control and 65.7% in the experimental groups gave correct answers. Comparing the students' achievements on all studied criteria, we can conclude that they have the most difficulty in solving tasks that require formed skills to draw valid conclusions and inferences as a result of finding indirect inform.

- The success rate of students in solving the tasks examining the level of knowledge and skills on the indicator “Selecting the Appropriate Word Among Other Words to Fill in a Blank in the Text” was also not very high. Only 35% of the ELE.CG, ELE.EG, BLE.CG, BLE.EG and 30% of the experimental group gave correct answers.

The results from the diagnostic assessment according to **Criterion №2** lead to the following general conclusions:

- Deficits are observed in the skills for recognizing the roles of the communicators: 37.5%/17.2% for the addresser and 33.3%/12.5% for the addressee (EG/CG, English-language education) and 41.7%/20.8% for the addresser and 41.7%/12.5% for the addressee (EG/CG, Bulgarian-language education);

- The results of the experimental groups are similar in terms of correctly identifying the circumstances in which the communicative situation occurs—time and place, as well as situating the communicators in time and space;

- An unsatisfactory level of skills is observed in more than two-thirds of the students in understanding what is being discussed, why it is being discussed, and how it is being discussed, which is evidence of poor personal vocabulary among the medical students.

The study conducted about **criterion №3** allows the following conclusions to be made regarding students' skills in extracting information from unfamiliar texts:

1. Most of the surveyed students do not have the skills to search for and extract information from an unfamiliar text when reading with a specific communicative task.

2. The students in the experimental and control groups do not possess well-developed skills to process, analyze, interpret, and summarize specific information from a text.

The results for **criterion №4** were measured and reported using two tasks, each providing values for the frequency of comparison usage. In the first task, six comparisons were given to the students as stimulus material. Five of these comparisons were selected from Bulgarian folklore, and one was from the professional sphere. The participants were asked to assess the variable frequency of usage by marking one of the ratings on a seven-point Likert scale. To investigate preference

selection, the six comparisons were paired, with the number of pairs determined by the formula: $\frac{n(n+1)}{2}$. As a result of the experiment, each pair of comparisons received 48 ratings from the students. The hypothesis being tested was whether the frequency of usage of a given comparison influences the assessment of its stability (stereotypicality/logicality). If the hypothesis is correct, the frequency of usage of the given comparisons would have statistically significantly higher average ratings than the corresponding average ratings for the attribute of stability within the comparative structure. The analysis of the results allows us to conclude that from the proposed figurative comparisons, the respondents evaluated as more stable (i.e., more frequently used) the structure that is not popular and has not acquired a phraseological character in Bulgarian culture. Instead, it activates associative thinking related to professional stereotypes in the student's understanding of a logical image that can be used. Although the selected expression is not idiomatic and lacks stylistic nuance, it was preferred as more stable and serves as an example of expanding the vocabulary with new comparisons that convey expression but are rarely used and understood by representatives of the respective professional field—namely, the medical field.

The obtained data lead to the following conclusions regarding the skills for substituting specialized medical terms with appropriate comparisons (**following Criterion №5**):

1. The students do not possess sufficient skills to understand the frequency of usage of the proposed comparisons.
2. The respondents' assessment of the frequency of usage of the comparisons depends on the use of the given example as part of the linguistic structures employed by a distinct professional group (within the corresponding sociolect, influenced by the clinician's professional activities).

The **sixth criterion** includes two indicators for classifying skills related to understanding the specific stylistic functions of metaphors in a text. Indicators have been formulated to measure the manifestation of these figures. The results for the two indicators were measured and reported using ten tasks (five tasks per text) based on

literary and specialized texts. These tasks allow for the examination of the values of both indicators during the diagnostic process. The achieved results provide the basis for the following conclusions and generalizations:

1. At the beginning of the assessment, 41.67% (or 10) of the students in the control group (CG) and 45.83% (or 11) of the students in the experimental group (EG) do not have sufficient knowledge and skills to understand the stylistic functions of metaphors in both literary and specialized texts. Consequently, they are unable to replace specialized medical terms with comprehensible synonyms.
2. The participants in the diagnostic assessment fail to identify the connection between the theme and the title of the text and struggle to relate the title to the text after its initial reading.

The conclusions drawn from the self-assessment of the surveyed individuals according to **Criterion №7** (regarding the skills to distinguish between the variants of medical language registers) show that students in both the experimental and control groups struggle with differentiating between the various medical register variants. The greatest difficulties reported by the students are in identifying the characteristics that differentiate the lower language register. More than half of the participants indicated that they either do not recognize it or cannot distinctly differentiate it from the other two registers—56.0%. These results can be explained, on the one hand, by the specificity of the lower register as a linguistic subsystem, characterized by dynamic syntactic models, and short or single-clause sentences. On the other hand, this register is marked by a more limited vocabulary, the substitution of specialized terms with accessible and commonly understood ones, the use of informal address forms, imperatives, etc. More than half of the respondents indicated that they recognize the high and middle registers (55% and 56%, respectively). This can be attributed to the specialized Latin-based vocabulary used in these registers, which students encounter both in the language course on Latin and in their clinical discipline studies. It is concerning that the self-assessment of the respondents indicates that they do not possess the skills to select an appropriate language register for the patient, in

which comprehensible Bulgarian synonyms for specialized terms are used.

Analysis of the Results from the Empirical Study after Testing the Model for Developing Communicative Competencies

The communicative competencies of medical students are examined in the final stage of the empirical study using the same diagnostic tools as in the initial stage. The observed changes in student performance (based on the proposed criteria and indicators for assessing the effectiveness of the applied model) show positive trends in the development of the competencies and a mutual correlation between the application of semantic-aesthetic and methodological approaches to working with literary texts and the achieved effects. The results lead to the following generalizations and conclusions, which are of significant practical importance for the language education of medical students:

- **At the beginning of the academic year, the results of the students in the experimental and control groups involved in the study were similar.** By the end of the training period, an improvement in the performance of the students in the experimental groups was observed according to the set criteria and indicators, as evidenced by the data, their statistical processing, and visualization through graphs. This serves as proof of the effectiveness of the applied experimental model.
- **After the experimental training activity, the most significant improvement was observed in the tasks related to orientation in the communicative situation** (considering external circumstances, mental-psychological states, and the roles of speakers and listeners), as well as an increase in the ability to identify the subject of communication. A comparatively smaller positive change was noted in tasks related to determining the time, place, and situating the communicators in time and space.
- **Students trained using the experimental methodology showed better skills in understanding the content of unfamiliar texts**, as well as in finding and extracting information from them and identifying keywords. They understood the meaning of an unfamiliar text when reading with a specific communicative task.

- **For students in both experimental groups, there was noticeable development in the ability to evaluate more stable comparisons (phraseological expressions),** whereas the corresponding skill in students from the control groups remained less developed.
- **In the interpretation of the correlation analysis, a high degree of correlation (0.85) was found** between the frequency scales of figurative comparisons obtained before and after the application of semantic-aesthetic and methodological approaches to working with literary texts.
- **Progress was achieved in the development of the ability to understand and evaluate comparative structures based on the criterion of stability (phraseological nature).**
- **Students in the experimental groups demonstrated a higher degree of development in the ability to identify the stability of metaphorical expressions.** 91.67% of the students in the experimental groups indicated that they would use these expressions in clinical dialogue to enrich their communication with expressive and understandable vocabulary.
- **The data shows that after completing the tasks aimed at building and refining the skills to perceive, understand, and appropriately use stylistic devices, students gained competencies in using the middle and lower language registers in the context of clinical communicative situations.**

Comparative Analysis of Experimental Results from the Two Stages of the Study

The results show the presence of a statistically significant difference in the comparative analysis of the data on the first criterion (perception of the text and choice of correct statements related to the content of the text). It is most pronounced in the entry-level results of the students from the experimental group, where the students from the BLE field performed on average with 8.4 points compared to 7.2 for their counterparts from the ELE. In the case of exit level results, the differences were again statistically significant, but this time they were in the range of 0.5 to 0.7 points. Almost everywhere the resulting differences are significant, with only two places showing no significant difference - this is between entry-level ELE, CG, and

entry-level BLE, CG. The statistically proven hypothesis that the students of the experimental and control groups (in both strands) at the beginning of the experiment showed the same score, i.e. possessed similar language and communicative knowledge at the entry-level, gives us a reason to consider the two groups as a complete sample of 300 units. At the exit level, a statistically significant difference is observed between the same two groups, which is a valid argument that the experimental training program, including semantic-aesthetic and methodological approaches to working with literary texts, contributes to the development of linguistic literacy and communicative competencies. To test the hypotheses of statistically significant differences between the mean results from entrance and exit levels, a student's t-test for paired samples was used. The results obtained in the final stage of the experimental study indicate that a statistically significant difference is observed between the pairs of results (entrance-exit level, experimental-control groups). This indicates an overall improvement in the performance level of the students at the end of the training compared to the beginning. This improvement is most significant for students in the ELE experimental group, where the average score increased by nearly 4 points, from 7.2 to 11.1. A similar result is observed in the BLE experimental group, where the increase is 3.2 points. In the control groups of both directions, a statistically significant increase is also observed, but it is in the range of 0.8 to 1.8 points (Figure №8).

The most noticeable difference in the input-output level scores was in the experimental group in the BLE, where the difference was 4.4 units. For the experimental group in ELE, the difference was 2.7 units (Tables 4 and 5).

It is noticeable that the effect accumulates—on one hand, between entrance and exit levels, and on the other hand, between control and experimental groups. This leads to significant differences in the results of the studied groups.



Figure №8: Line Chart №2. Differences in Average Scores of Students: Entrance **ELE** CG / Exit **ELE** EG; Entrance **BLE** CG / Exit **BLE** EG.

Table №4. Differences in the input-output level: BLE

<i>ELE</i>	<i>Input level</i>	<i>Output level</i>	Δ
<i>Contr. group</i>	7,8	8,9	1,5
<i>Exp. group</i>	8,4	11,1	4,4

Table №5. Differences in the input-output level: ELE

<i>ELE</i>	<i>Input level</i>	<i>Output level</i>	Δ
<i>Contr. group</i>	7,8	8,9	1,1
<i>Exp. group</i>	8,4	11,1	2,7

For comparing the entrance-exit level results, the Wilcoxon signed-rank test for paired samples is used, as the comparison pertains to the results of the same students at two different times, with a total of 4 test evaluations conducted. In none of the tasks related to orientation in the communicative situation (as assessed by the tasks in the second criterion) is there a decrease in the number of correct answers at the exit level compared to the entrance level. Only among the students in the ELE EG was there one task where the number of correct answers did not increase but remained the same. The results of the students in

the experimental groups on the exit-level tasks are significantly higher than those of the students in the control groups.

The analysis of the results for the third criterion allows us to conclude that, because of applying semantic-aesthetic and methodological approaches to working with literary texts, there is a stronger influence and improvement in the abilities of students in the experimental groups to find and extract specific information from a text compared to the same abilities of students in the control groups. Students in the experimental groups demonstrate better skills in orienting themselves within the content of a short unfamiliar text, including finding and extracting information from it, and accurately differentiating keywords. When testing the hypothesis for differences between the means of two independent samples (Wilcoxon test), it was found that the smallest differences were observed between the mean values: entrance/exit for the ELE control group – 1.0, and entrance/exit for the BLE control group – 1.25. The largest differences were recorded for entrance/exit for the BLE experimental group – 2.75, and entrance/exit for the ELE experimental group – 1.25.

The tasks proposed for investigating the fourth criterion involve identifying and extracting direct and indirect comparisons and achieving important objectives. The memorization and inclusion of these figures in the active vocabulary can be considered to be stimulated by interaction with the text. However, every successful transfer—although initiated by the text—depends on the extent to which the text can activate the individual student's abilities for perception and processing.

The comparison of the results from the tasks evaluating the frequency of use of comparisons (Identifies direct/indirect comparisons in the analyzed text / Evaluates the frequency of use of direct/indirect comparisons in the analyzed text) allows for definitive conclusions regarding the increase in average values within the groups. The greatest increase is observed in the achievements of students at the exit level from the BLE group—2.0 points, while the smallest increase is seen in the achievements of the BLE control group—1.0 points. Among the students in the experimental groups, a significant progress of 2.0 points is noted.

The comparative analysis of the data obtained from solving the tasks related to progress on the fifth criterion indicates that the average results of the students in the experimental groups show a statistically significant difference. This is an indicator of substantial progress in developing the skills to identify lexemes for direct comparison and to explain specialized medical terms with appropriate comparisons: entrance level for the experimental groups – 6.0 (ELE) and 8.0 (BLE); exit level for ELE – 9.0 and BLE – 10.0.

The conclusions drawn from the comparative analysis of the responses to the criterion "Understanding the stylistic functions of metaphors in the text" indicate that for the indicator "Identifies lexemes with figurative meaning in the text," the achievements of students in the control groups from ELE and BLE are lower than those of students in the experimental groups at the end of the experimental activity. The results are as follows: Pre-Test – 58.33%, Post-Test – 68.75%, while students from both experimental groups show significant progress in this criterion: Pre-Test – 62.50%, Post-Test – 91.67%. For the indicator "Identifies how the usual meaning is replaced in the stylistic figure," the results are similar: control groups: Pre-Test – 56.3%, Post Test – 66.67%; experimental groups: Pre-Test – 58.3%, Post Test – 91.67%.

To perform the comparative analysis for the seventh criterion, "Recognition of Variants of Medical Language Registers," it is essential to analyze the empirical data obtained from the three tasks and determine whether the achievements of students in the control groups from ELE and BLE are lower at the end of the empirical study compared to the achievements of students in the experimental groups. Progress is observed among participants from all four groups, but no significant difference is noted between the results of students from the control groups at the entry-level and their results at the final stage of the pedagogical experiment. The average difference in results between the entry and exit levels for the control groups is 1.66 for ELE and 1.67 for BLE. For students in the experimental groups from ELE and BLE, the progress is more substantial – 3.5 for ELE and 3.42 for BLE (Figure №9).

It can be strongly stated that the students of the experimental groups formed the ability to recognize different medical registers to a higher degree. Similar trends were found when comparing means between ELE/ BLE control-experimental groups. The differences in means were found as follows: 1.84 for ELE and 1.83 for BLE, with higher scores for the experimental groups. This is taken as the basis for the conclusion that the degree of formation of this skill in the students of the experimental groups is higher, while for the students of the control groups, the skill remains formed to an average degree.

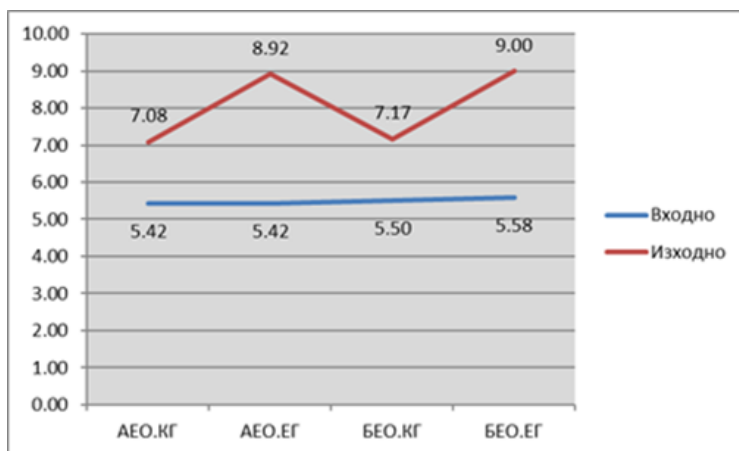


Figure №9: Line Graph №3. Differences in Average Scores of Students: Entry/Exit Level, AEO/BEO Control/Experimental Groups

Achieving these original results allows for the identification of problem areas and the delineation of new opportunities for the proposed model to further develop and refine students' skills in clear and accurate perception and construction of verbal messages with significant information for and from the patient.

The data presented above contains varied content, visualized in graphs. To address and rectify the imperfections and gaps in language acquisition, it is important to incorporate educational content that aids in developing skills for the adequate perception and interpretation of linguistic and cultural information in texts. Possible approaches

include integrating various types of educational and communicative activities at different stages of working with literary sources, which feature artistic images and motifs representing specific vocabulary, national character, value systems, and the collection of ethnic and religious specifics of Bulgarians. The tasks follow lexical and communicative progressions:

- **Tasks for Introduction to Historical Context and Topic Orientation:** Utilizing visual aids such as photos and paintings; reading a selected excerpt from the text aloud.

- **Tasks for Vocabulary Preparation:** Reading a text with the task of underlining unfamiliar words; explaining introduced vocabulary with suitable synonyms and adding to a bilingual dictionary; creating an associative cloud with keywords; filling in missing words in a text; linking keywords with expressions in the text; constructing sentences from scrambled words.

- **Tasks for Text Perception:** Matching an excerpt from the text to an illustration; finding an excerpt in the text structure based on a given keyword; identifying a character's words; making predictions; identifying incorrect statements; matching character traits to the corresponding characters.

- **Tasks for Text Analysis:** Dividing the text into episodes; choosing an appropriate title for episodes from several options; independently creating titles for episodes; arranging episodes in their correct sequence; tasks involving true/false statements; multiple-choice questions; creating semantic maps of events; what/where/when/how/why/who is involved.

- **Tasks for Application (Creating Verbal Messages on the Given Theme):** Asking questions to facilitate a deeper understanding of the story; describing the characters' feelings; creating a Book face profile for a character; connecting the reading material with other texts or personal experiences; visualizing the text by creating a plot map: title, author, setting, character(s), problem, actions, resolution; role-playing; solving a case study.

FINDINGS AND CONCLUSIONS

The interpersonal interaction between doctors and patients and the establishment of close, humane, ethical, and trusted relationships between them undoubtedly contribute to achieving therapeutic goals and significant results. The communicative skills of healthcare professionals play a crucial role in this process, including the ability to perceive—listening to the patient’s medical history or reading the information contained in health documentation—and to create various types of verbal expressions suited to the specific communicative situation. Emphasizing the importance of specific medical knowledge and skills in clinical dialogue, this dissertation proposes a pedagogical model aimed at improving the communicative competencies of medical students and graduates. This model is based on receptive and productive speech activities: perception, literary analysis, and interpretation of literary texts.

The original thesis is based on the understanding that engaging with literary works in Bulgarian language education for medical students shares significant similarities with the interaction between doctors and patients. This engagement occurs through oral and written texts, where the patient acts as the sender—speaker, author/creator of the text—and the internist as the receiver—listener/reader, recipient of the message. The idea of linking reading literary examples with patient care is related to how texts and messages in healthcare are perceived and understood. This necessitates the inclusion of literary works in the university training of medical students. The experimental model aims to support the development of future healthcare professionals' abilities to hear, understand, and empathize with their patients' stories on various levels. The focus is on enhancing skills to search for and identify factual, emotional, social, metaphorical, and existential meanings within these stories and to engage with patients in a manner analogous to or transformed from their interaction with literary works. The results of the theoretical and empirical experimental study lead to the following general conclusions:

➤ The review of the leading theoretical, methodological, and empirical sources investigating the scientific and applied question of the use of fiction texts in the language training of medical students

outlines the necessary scientific basis for the experimental work, bringing the subject in question into the context of contemporary international standards for human-ethical communication in the field of health care and the tendencies to impose communicative competence in the interaction with patients as a leading element in the professional training of medical students.

➤ The analysis of the main theoretical concepts related to the formation of communicative competence in the process of Bulgarian language training for medical students substantiates the pedagogical functionality of the semantic-aesthetic and methodological approaches of working with literary texts in the proposed experimental model, linking it with the updated teaching content, the applied methods and forms of teaching, entirely aimed at raising the level of communicative competence of future healthcare professionals.

If we conceptualize the histories of diseases as texts and the physician as a reader, then communicating with the literary works in the language studied is a potential factor that predetermines the formation and development of communicative competencies for human-empathic communication, an important component of the professional competence of the physician. In this context, literary work is seen to optimize the process of mastering the target language. Alongside expanding students' skills in how to access clinical information, how to perceive it, and how to interpret it, literary texts add to the patient's perspective. Through identification with the patient - like identification with the image of the literary hero - the works evoke empathy and compassion.

The theoretical interpretation of the methods and approaches in the research area and the content analysis of the normative and educational documents add new research touches to the contemporary studies of this important scientific and applied problem. Thus, they emerge as a starting point in the scientific substantiation of the proposed and tested author's model for optimizing the Bulgarian language course and improving the communication of medical students in clinical discourse. Based on the achieved results the following theoretical generalizations are drawn:

- the analysis of the contemporary theoretical, methodological, and applied research actualizes the issue of the formation of professional communicative competencies; it allows to drawing of the necessary conclusions and implications for the linguistic practice given the inclusion of artistic texts in the training. They are conceptualized as an effective means through which to work on improving students' capacities for humane-ethical and empathic interaction with the patient;

- scientific works that investigate the literary dimensions of medical texts treated as a literary subgenre in their integration into medical education are systematized, and insufficient interest is found in the study of the relationship between the possibilities of fiction texts to stimulate the development of linguistic-communicative competence and the results of the diagnostic-therapeutic activity of medical students, which is why this topic remains in the periphery of theoretical publications on the subject;

- communication in clinical discourse is fundamental for the development of an emotional-psychological and trusting, human-empathic relationship between the medic and the patient and is one of the ways to achieve professional goals and results important for the patient's health and consistent with the goal in the diagnostic-treatment plan;

- scientific-methodical and empirical research in the field of working with artistic texts in specialized language teaching is the basis for the idea of creating a modern pedagogical model. The aim is to propose a reliable and applicable algorithm for supplementing the teaching activities in the discipline "Bulgarian language" for medical students with targeted tasks and exercises in the direction of building and improving the communicative competencies necessary for the practice of the profession.

The analysis and systematization of the main concepts and models from the theory and practice of specialized language teaching support with original empirical research the vision of a working strategy, including content, meaning-aesthetic and methodological approaches of working with literary texts, and outlines the perspectives of its applicability in personal and professional-communicative plan. The

analysis of the questionnaires makes it possible to draw the following necessary conclusions for foreign language practice:

- students' self-assessment of the level of communicative competence in the language studied, understood as proficiency in the language norm, is not high, with respondents stating that this is the main obstacle to not fully participating in the planned practical activities in the clinical facilities, where communication in Bulgarian with patients is mandatory; this determines their preference to use the transfer language in communication;

- the students, future doctors, are aware that they have difficulties in communicating with patients and say that the main problem in verbal interaction with them is due to the situational conditioning of real communicative situations in medical clinical practice;

- the respondents expressed the opinion that the problem areas that hinder the development of trusting relationships with native speakers are the following: insufficiently well-developed personal communication skills; lack of motivation to use Bulgarian because the language of instruction and academic communication is English, while practical exercises in clinical facilities are necessarily conducted in Bulgarian; insufficient participation in simulations of real practical communicative situations in regulated Bulgarian language exercises

- in the first three places, the students indicated the following difficulties in communicating with native-speaking patients: differences in the use of linguistic means of communication, low level of linguistic and grammatical knowledge, and differences in the logical and linguistic construction of texts. The other three barriers share almost the same rank (inconsistencies in the meaning of words/phrases, ignorance of social conventions, and differences in sign language);

- the study found that effective forms of learning, according to students, are those during which they actively have the opportunity to participate in productive language activities: listening and speaking;

- from the analysis of the results of the experimental activity it was found that when interacting with the representatives of different groups in clinical socio-cultural situations, students consider it important to use the Bulgarian equivalents instead of the narrowly

specialized medical terms, to present medical information comprehensibly and in the target language, which is an indicator of the respondents' high awareness of the application and importance of the consultative medical register;

- respondents evaluate ethnic tolerance as one of the leading factors for appropriate and meaningful communication, stating categorically that differences do not create barriers, do not separate minorities, but rather are a prerequisite for achieving equality in the multicultural Bulgarian-speaking environment;

- the evaluation of the results of the questionnaire with the patients shows that in their communication with them the students deviate from the literary norms, which creates problems in the transmission, perception, understanding and interpretation of relevant medical information;

- patients felt that the level of practitioners' ability to use understandable synonyms of specific medical terms for health conditions in medical diagnoses - as an acceptable way of conveying essential information about their health status and upcoming treatment - was not high, which accounted for the difficulty in using the recommended medium and low language registers;

- according to the hospitalized students, they are not proficient in effective communicative verbal and non-verbal language tools to the extent necessary for healthy communication;

- the data show unequivocally that doctor-patient communication is the most significant factor in medical dialogue, cited first by most patients.

The results of the questionnaire surveys confirm the levels of language proficiency reached in the pedagogical observation phase and are a reason to state categorically that the students of the two programs have similar levels of Bulgarian language at the beginning of the experimental study. Hence the author's justified decision to consider the groups taught in the English and Bulgarian language programs as a complete sample. The analysis of the empirical data from the research conducted in the ascertainment stage allows us to highlight the problem areas related to the development of communicative competence in Bulgarian language education. The necessity of

updating the methodological approaches and teaching content to overcome the deficits in terms of further development and improvement of communicative competencies for human-empathic communication with native speakers is argued and conclusions are drawn about the effectiveness of the applied pedagogical technology in the training of medics:

- The constructed modular experimental model is scientifically and methodologically grounded and representative, as the tasks for working with fiction texts are situated on the basis of vertical and horizontal cross-curricular integration on the topics of acquiring knowledge about language and improving communicative competencies for empathic, ethical-ontological and professional communication with patients;
- the in-depth analysis of the results of the diagnostic tools used to evaluate the experimental methodology confirms the assumption that the application of the meaning-aesthetic and methodological approaches of working with literary texts further develops the communicative competencies of the Bulgarian language in medical students and supports its effective professional use in medical discourse;
- Interpretation of the results of the two stages of the experimental study in a comparative plan allows to formulate of definite conclusions about the observed increase in the communicative competence of students, and future doctors, trained by the experimental methodology, as the diagnosis of the possessed skills was carried out on different tasks: reading comprehension, appropriate use of stylistic figures, adequate application of the variants of medical language registers;
- after the experimental training, the obtained empirical data show that a significant developmental effect is observed in terms of the skills of orientation in the communicative situation, extraction of information from the text, comprehension of the properties of frequency and stability of comparisons, evaluation of the stylistic functions of metaphors, recognition of stylistic markers characteristic of different medical registers.

CONTRIBUTIONS OF THE DISSERTATION

I. Theoretical Contributions

1. **Evaluation and Analysis:** A comprehensive review and analysis of key theoretical concepts, normative documents, specific empirical models, and accepted practices related to the research question have been conducted. This forms the basis for conceptualizing the potential of literary texts to impact the development, enhancement, and growth of the necessary communicative competencies for professional communication in clinical discourse among medical students.

2. **Key Concepts Analysis:** Key concepts related to communicative competence as a critical component of a health professional's overall competency have been analyzed and systematized. This analysis is situated within the context of educational and communicative activities at various stages of working with literary texts and outlines the theoretical foundation needed for conducting experimental research.

3. **Conceptual Framework:** The conceptual framework for the use of literary texts in methodologies and practices aimed at achieving higher levels of communicative behavior in Bulgarian socio-cultural communication in healthcare has been justified.

4. **Educational Model:** An original educational model has been developed to optimize the teaching process of the Bulgarian language for students and medical graduates. This model integrates curriculum content, a sequential methodology for the gradual acquisition of essential communicative competencies through practical activities with texts, and appropriate assessment tools.

5. **Diagnostic Tools:** A diagnostic toolkit has been proposed, tailored to the characteristics of the research object and subject. It includes criteria, indicators, and corresponding measures to evaluate the effectiveness of experimental activities with medical students.

II. Practical Contributions

1. **Survey Analysis:** Based on the summary and analysis of results from two surveys involving 297 respondents (students from English and Bulgarian language programs at MU-Pleven) and 111 hospitalized patients, key achievements in language education have been highlighted. Problematic areas crucial for forming communicative

competence in Bulgarian language training for foreign medical students have been identified, and specific measures for addressing these issues have been suggested.

2. Literary Practices Exploration: Existing practices in medical humanities have been examined and creatively interpreted, focusing on patient narratives and medical histories as texts. Areas, where literary analysis applies to clinical verbal and documentary communication, have been explored through observations and analyses of patient messages, various medical texts, and health cases in literary works.

3. Experimental Results Analysis: Results from experimental activities with 48 students in the context of Bulgarian language education in both English and Bulgarian language master's programs have been summarized and analyzed. The focus was on developing communicative competencies necessary for achieving professional goals and diagnostic-therapeutic outcomes through acquiring knowledge, practical skills, and abilities for humane, ethical-deontological, and professional communication with patients.

4. Causal Relationships: Causal relationships between task performance and activities in the experimental model and the improvement in communicative competence levels among medical students have been delineated. The potential for practically integrating the proposed methodological ideas to address diagnosed communicative problems among future practicing doctors has been outlined.

5. Positive Trends: Data from the application of the author's model, which includes semantic-aesthetic and methodological approaches to working with literary texts in Bulgarian language education for foreign medical students, reveal a positive trend toward developing professional communicative competence. This suggests that the proposed methodological model is a suitable educational tool.

PUBLICATIONS ON THE TOPIC OF THE DISSERTATION

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- 2. Valova, T. (2023).** Attitudes of the medical students on the usage of the Bulgarian language in educational and practical situation. In: Twentieth Anniversary National Scientific Session for Students and Faculty. Proceedings of the Twentieth First National Science Session for Students and Faculty. Pleven: Medical College of Medical University. Pleven, 2023, pp. 339-349. 78-954-756-324-7.
- 3. Valova, T. (2023).** The communicative competence of the physician in the context of human interaction with the patient. In: Twentieth Anniversary National Scientific Session for Students and Faculty. Proceedings of the Twentieth First National Science Session for Students and Faculty. Pleven: Medical College of Medical University. Pleven, 2023, pp. 350-361. 78-954-756-324-7.
- 4. Valova, T. (2023).** Types of texts in the medical discourse. In: Tenth International scientific conference. University of Veliko Tarnovo „St. St. Cyril and Methodius“, „Pedagogical education – traditions and modernity“, Nov 17-18, 2023. ISBN 2534-9317, 32-40.
- 5. Valova, T., B. Petkova. (2022).** Integration of traditional and modern methods in specialized foreign language teaching. *MANAGEMENT AND EDUCATION*, 18 (1) 2022, pp. 34-40. ISSN 13126121.
- 6. Valova, T., B. Petkova. (2021).** Formation of communicative competence in foreign medical students by working with authentic text. *MANAGEMENT AND EDUCATION*, 17 (3) 2022, pp. 46-51. ISSN 1312-6121.
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12. Valova, T. D., B. V. Petkova. (2020). Communicative approaches in foreign language training for medical purposes. In collection: "*Intergenerational relations: modern discourse and strategic choices in psychological and pedagogical science and practice*". Ed. L.M. Mitinoy. - M.: Psychological Institute RAO. 316 p. 2020, pp. 141-145. DOI: 10.24411/9999-047A-2020-00037; ISBN: 978-5-6044523-6-3.

13. Valova, T. D. (2019). Building sociolinguistic competence in the context of blended learning for foreign medical students. In: XXI CENTURY UNIVERSITY: SCIENTIFIC DIMENSION. Materials of the scientific conference of scientific and pedagogical workers, graduate students, master's students TSPU named after them. L. N. Tolstogo. Tula, May 22, 2019, pp.169-177. ISBN 978-5-6042450-8-8.

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