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ОСОБИСТІСНИЙ РОЗВИТОК СТУДЕНТІВ-ЛІКАРІВ У ПРОФЕСІОГЕНЕЗІ

У статті розкриваються змістовно-сутнісні чинники становлення ціннісно-сислової сфери і морально-етичних якостей студентів медичних вишів. Особистісні чинники розглядаються як складові характеристики професіогенезу майбутніх лікарів. Розкрито особливості сенситивного періоду навчання у вищій школі, аналізуються основні новоутворення юнацького віку, специфіка психологічної підготовки медиків та її необхідність при виконанні професійних функцій. Студентський вік виділяється як окремий період розвитку у зв'язку з навчанням у вищій школі, з початковим періодом професійного становлення. Стверджується, що вивчення майбутніми лікарями психологічних дисциплін («Медична психологія», «Психологія особистості», «Психологія спілкування») сприяє становленню їх професійної компетентності та особистісному зростанню.

Ключові слова: особистість, особистісні чинники, професіогенез, ціннісно-сислова сфера, морально-етичні якості, викладання психологічних дисциплін, студенти-медики, новоутворення юнацького віку.

Problem topicality. The current state of medical care in the country demands radical changes. This point is a priori for both consumers of medical services (patients) and medical professionals since such problems as pay rate, equipment, a need to use «market modes» of providing themselves with decent life adversely affect the public image of medical professionals and their activities. Therefore the issues of medical education humanization, personal and professional development of future doctors (their axiological sphere, mental and ethical features) are becoming vital and urgent.

The analysis of the literature and applied studies indicates that the problems of psychology of medical practice and professional genesis of the doctor's personality are among important but little-studied problems of theoretical and applied psychology, on the whole, and labor psychology, in particular. The fundamentals of this problem can be the concepts of such researchers as E. P. Yermo-

layeva, M. M. Kabanova, S. V. Kosheleva, L. M. Suprun, O. M. Yudina, L. B. Shneider, who define the principle conditions for the development of the doctor's personality: improvement of their professional awareness level, formation of the professional ego, acquisition of the professional identity.

The research carried out by Ye. A. Klymov, I. G. Klymkovych, B. A. Yasko proves that the doctor's professional activity is sociotechnical. Its main characteristics include constant complication, multifunctionality, high variation, due process, and creativity. The professional classification suggested by A. S. Shafranova singles out the medical profession (together with professions in arts and education) as a special category based on the «prevalent presence of creative initiative. « This group is entitled «top-rank professions» according to the «requirement for constant off-our work on the subject and on oneself» [6].

The detected peculiarities demand from the medical specialist deep professional identity, reasonable and stable professional self-appraisal, motivation for regular self-perfection in their profession. The mental and ethical component is an important component of the modern doctor's professional skills. Taking this into consideration, the conceptual task of the doctor's professional training is to consistently form medical students' understanding of these ideas, awareness of humane, careful treatment of a person as well as environment as a life safety factor, preservation of healthy people's health and primary prevention at the individual, family, and population level.

Among the doctor's psychological qualities, the researchers distinguish the ability to empathize and understand the emotional state of both patients and healthy people (empathy), the skill to establish acceptable and emotionally sensitive relations with patients, the ability to analyze their own and other people's behavior, to independently control specific social and professional situations as well as to take the responsibility for coping with them, to have a reasonable and stable «self-conception», the ability to perceive and give social and psychological support for patients, to have enough advanced intelligence (medical judgment, clinical observation, professional knowledge), linguistic culture, humane treatment of a patient, honesty, vitality.

The practice of professional training in higher educational medical establishments reveals a number of contradictions, which in our

opinion actualize the problem of future doctors' personal formation. They are

- contradictions between pragmatic-utilitarian attitudes of the society and humanistic principles of the doctor's profession, which leads to a student having deviated occupational norms;
- contradictions between humanistic-oriented principles of the doctor's profession and practically absent concept of psychological training and psychological support of future doctors;
- between the desired (ideal) and existing (real) levels of the personal development of medical students and practicing physicians.

In order to solve the aforementioned contradictions, one should understand the logic and content of teaching and learning activities in higher educational establishments as well as peculiarities of the personality formation in adolescence, specific character of professional self-awareness formation in the context of professional training.

The purpose of this article is to highlight the main factors influencing the development of personal qualities of future physicians in the period of study in higher medical school.

The presentation of the material. The topicality of studying the problem of medical students' personality formation is conditioned by a special (sensitive) period when they are enrolled in the higher educational establishment. In the psychological studies of our country (L. S. Vyhotsky, L. I. Bozhovych, B. D. Elkonin, I. S. Kon), it is generally accepted to study the personality development in adolescence, ages 15–18 being early adolescence, and ages 18–23 being adolescence. The key activity is educational and professional, which leads to appearance of new formations: professional and personal identity, reflection, identification, world view.

B. G. Ananiev pointed out the discrepancies between the ages when a person becomes mature as an individual (physical maturity), as a personality (civil maturity), as a subject of cognition and labor (mental maturity and efficiency). Recent studies indicate that in youth certain sides of the personality begin to develop at a more equal rate because a person cannot function fully developing only in one direction: it needs all the resource of its personality both in adolescence and in adulthood.

According to the concept of E. Erikson, the nuclear problem of the whole adolescent period is to find an identity. However, the proc-

esses of identity formation remain actual during the whole period of adulthood and provide the feeling of continuity of adulthood experience.

The development of the feeling of ego identity from different childhood identifications is accompanied with integration of roles. The culmination is reached in late adolescent. A young person who is not sure of its identity feels awkward in intimate interpersonal relations. Becoming more confident, a young person has stronger needs for friendship, competition, leadership, love, inspiration.

Ego identity generates a new form of love for parents, which is free of desire to change them. In late adolescence, it is accepted that everyone is responsible for its modus. Lack or loss of ego identity in psychoneurosis is accompanied with despair and thanatophobia.

K. Obukhovskiy believes the essential feature of adolescence is formation and development of the need for realizing the meaning of life, which is considered as the only pivot of behavior that can consolidate its mature forms. The researcher singles out three stages of developing the need for the meaning of life. In the first stage (early adolescence), the behavior conforms to the need for emotional contact.

The second stage of developing the need for the meaning of life is characterized by free philosophizing and experience of the world's imperfection. This stage is typical of 20–22-year-old students. The working youth either quickly go round it or completely escape it staying in the first stage or passing into the third stage of this need development. The third stage takes place in late adolescence when the ability to draw conclusions from their own or others' experience is developed and the focus on the meaning of their own activity shows itself.

Late adolescence is defined by the author as a time for defining motivational structures on the basis of the personality's real-life experience.

The student age is determined as a particular development period connected with studies in higher educational establishments, with the initial period of professional formation.

In their papers, V. A. Bodrov, S. A. Klymov, D. Duper, T. V. Kudriavtsev presented their classifications concerning the stages of development of a person as a subject of professional activity. These classifications make it possible to generally single out the most significant psychological formations which occur in the period of becoming a professional in student years [2; 4]:

- the stage of professional training – from ages 15–18 to 19–23 – includes goal-directed acquisition of knowledge, practical skills in the chosen professional activity; development of subject-oriented motives and goals of future profession; formation of vocational aptitude for job training (short-term objective) and for practical activity (long-term objective) based on the development of professionally important qualities and professionally oriented structures of the personality;
- the stage of professional adaptation – from ages 19–21 to 24–27 – includes adaptation to social professional norms, conditions, processes of labor activities; self-awareness of the correctness of profession choice; development of professionally important qualities, special abilities, emotional-volitional qualities.

Thus, the student's personality is developed if there is training and professional activity. The development itself presupposes a transition stage from self-determination to ascertainment of professional distinctiveness, formation of «self-professional» image.

The backbone factor of the personality (L. I. Bozhovych, V. S. Merlin, K. K. Platonov) is professional orientation, which characterizes the degree of desire for learning of trade and wish for working in it. Motivation conditions the personality's behavior and activities and influences its professional self-determination as well as labor satisfaction.

According to A. P. Vasytkova who investigated the problem of professional choice and motivation, there are the following motives to choose the medical profession: a wish to treat people, a wish to relieve suffering of seriously ill patients, a possibility of taking care of loved ones, an opportunity to influence others, financial interest, availability of medicaments. It is good that in the survey sample there are no students with a low level of professional orientation, which means that students are adequately aware of the purport of chosen profession, strive to master it. In future this will facilitate the most optimal formation of the professional personality.

The researcher comes to a conclusion that the pledge of a future doctor's success is improvement of its own character and motivation for maximum professionalism.

The results of the conducted surveys show that almost 90% of the present first-year students choose the medical profession being guided by job prestige, family traditions, advice of relatives and

friends. Less than 5% hold a realistic view on the meaning or professional activity due to the previously obtained occupational skills of a paramedic, a medical assistant, or a nurse.

A different study of the motives for choosing the medical profession [3] reveals contradictions in the motivational connotative and cognitive spheres of the personality, which in their turn cause the vocational choice crisis.

Thus, on the one hand, this rather «inlaid picture» of the motivational components of the medical profession choice indicates that the youth have specific initial professional attitudes of mainly pragmatic and utilitarian character, and on the other hand, it indicates the diffuseness and incompleteness of the professional image.

In our opinion, the more the process of receiving higher education is interconnected with the process of professionalization, the more effective it is. On the one part, professionalization of future experts presupposes the social need for improving the effectiveness of the activity, which is reflected in professional securities, on the other part, it presupposes professionals' relevant personal need for professional improvement, which defines goals, motives, labor satisfaction and forms a professional attitude.

The Course of Psychology, as well as psychological training of future doctors on the whole, plays a significant role in this process. The training of medical psychologists has been introduced into the higher education medical system, which also recognizes the necessity to improve the psychological competence of general practitioners, college-educated paramedics, and family doctors.

O. V. Uvarkina points out that medicine as a branch of knowledge about a human being is a complex aggregate connected with the subsequent integration of natural, psychological, and pedagogical sciences, which still remains an urgent necessity, but not the scientific reality. The old methodological approaches, attitudes, which already played their historical role, have already exhausted themselves concerning the solution of the definite range of problems and became the main obstacle to a reasonable understanding of new approaches to the training of future doctors [7].

The medical profession as it has already been mentioned requires certain psychological peculiarities, which allow the doctor to successfully communicate with patients under extreme conditions and in a

daily routine; to work maintaining its pace and quality throughout the day, keeping a steady good mood; the ability to reassure patient, to make them believe in their recovery. As G. V. Karpenia states, «due to different stress situations, a patient's eventual death, a professional doctor is required to have not only professional training, but also psychological compliance with the chosen profession» [5, p. 3].

The contrastive analysis of theoretical researches and practical aspects makes it possible to single out the most significant, in our opinion, problems of teaching psychology to medical students:

- to determine a link between teaching psychology and needs as well as demands of the current medical activity;
- to modernize the content of the fundamental and professional medical education;
- to improve the curriculum, to redirect psychological and pedagogical disciplines from «elective» (minor) to major ones;
- to make medical students master communicative competences when working with patients according to different category features;
- to teach future doctors strategies and ways of self-regulation, stress coping strategies, ability to prevent «job burnout», «emotional seizure» etc.

Among the list of psychological disciplines, a special place is taken by the general professional disciplines with psychological content – Medical Psychology, Personality Psychology, Psychology of Communication. Studying these disciplines ensures the doctor's competence in the field of psychology. It is not only humanization of medical education, but also a prerequisite for personal formation of a professional.

Consequently, practical professional disciplines should facilitate the formation of reasonable ideas of oneself as a professional through self-reflection strategies and feedback.

Conclusion. The modern conception of training in higher educational medical establishments should be focused on the personal development of medical students. The main means of its realization are personality-oriented pedagogical technologies centered on the unique whole personality striving for maximum realization of its abilities, open to new experience, capable of making a conscious and responsible choice in different life situations. Here psychological and

pedagogical disciplines are especially significant; they need updating and bringing to conformity with needs and demands of the modern medical activity.

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КАХНО И. В.

ЛИЧНОСТНОЕ РАЗВИТИЕ СТУДЕНТОВ-МЕДИКОВ В ПРОФЕСИОГНЕЗЕ

В статье раскрываются содержательно-сущностные факторы становления ценностно-смысловой сферы и морально-этических качеств студентов медицинских вузов. Личностные факторы рассматриваются как составляющие характеристики професіогенеза будущих врачей. Раскрыты особенности сензитивного периода обучения в высшей школе, анализируются основные новообразования юношеского возраста, специфика психологической подготовки медиков и ее необходимость при выполнении профессиональных функций. Студенческий возраст выделяется как отдельный период развития в связи с обучением в высшей школе, с начальным периодом профессионального становления. Утверждается, что изучение будущими врачами психологических дисциплин («Медицинская психология», «Психология личности», «Психология

общения») способствует становлению их профессиональной компетенции и личностному росту.

Ключевые слова: личность, личностные факторы, професиогенез, ценностно-смысловая сфера, морально-этические качества, преподавание психологических дисциплин, студенты-медики, но-вообразования юношеского возраста.

КАКННО I. V.

PERSONAL DEVELOPMENT OF MEDICAL STUDENTS IN PROFESIONES

The article focuses on the content- and essence-related factors of forming medical students' axiological sphere as well as their mental and ethical features. Personal factors are considered as characteristic constituents of future doctors' professional genesis. The features of sensitive periods of study in higher education, analyzes the main neoplasm of youthful age, specific psychological training of physicians and their necessity in performing their professional functions. The student age is determined as a particular development period connected with studies in higher educational establishments, with the initial period of professional formation. Is indicated that the mental and ethical component is an important component of the modern doctor's professional skills. Taking this into consideration, the conceptual task of the doctor's professional training is to consistently form medical students' understanding of these ideas, awareness of humane, careful treatment of a person as well as environment as a life safety factor, preservation of healthy people's health and primary prevention at the individual, family, and population level. Been found that the practice of professional training in higher educational medical establishments reveals a number of contradictions, which in our opinion actualize the problem of future doctors' personal formation. It is stated that medical students' studying psychological disciplines (Medical Psychology, Personality Psychology, Psychology of Communication) contributes to their professional formation and personal growth.

Keywords: personality, personal factors, professional genesis, axiological sphere, mental and ethical features, teaching of psychological disciplines, medical students', neoplasms adolescence.

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