



FILOLOGIYA VA PEDAGOGIKA

O'ZBEKISTON RESPUBLIKASI MAKTABGACHA VA MAKTAB TA'LIMI VAZIRLIGINING
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Ushbu sonda

O'zbek terminologik
nazariyasining ilmiy
tadqiqi: hosil bo'lishi,
taraqqiyoti va boyish
manbalari

4
bet

Alisher Navoiyning
"Sab' ai sayyor" va "Saddi
Iskandariy" dostonlarida
sabr talqini

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Badiiy nutqdagi
frazemalarda obrazlilikning
ifodalanishi

70
bet

Креативное письмо как
инструмент изучения
иностраных языков

140
bet



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ФИЛОЛОГИЯ И ПЕДАГОГИКА

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boshqa umumiy o'rta ta'lim muassasalariga tatbiq etish bo'yicha takliflar tayyorlanadi.

Hududiy hokimliklar bilan birgalikda 208 ta umumta'lim maktablari tanlab olinib, mazkur maktablarda 2023–2024-o'quv yilidan boshlab 7-sinflarda ikkinchi xorijiy til va 10-sinflarda kasb-hunar o'rgatish tizimi yo'lga qo'yildi. Maktablarda o'rgatiladigan jami 6 ta xorijiy til va 27 turdagi kasb-hunarlarning o'quv dasturlari va taqvim-mavzu rejalari,

shuningdek, kasb-hunar xonalarini jihozlashga qo'yiladigan talablar ishlab chiqildi.

Bugungi kunda o'quvchilarga ikkinchi xorijiy til sifatida 4 ta maktabda ingliz tili, 107 ta maktabda nemis tili, 62 ta maktabda fransuz tili, 7 ta maktabda yapon tili, 24 ta maktabda koreys tili va 4 ta maktabda xitoy tili o'rgatilmoqda. Shuningdek, o'quvchilarga ishchi kasb yo'nalishida 15 ta, tadbirkorlik sohasida 4 ta, axborot texnologiyalari sohasida 8 ta turda kasb-hunarlarni o'rgatish yo'lga qo'yildi.

Foydalanilgan adabiyotlar

1. O'zbekiston Respublikasi Prezidentining 2019-yil 24-aprelda qabul qilgan "O'zbekiston Respublikasi Xalq ta'limi tizimini 2030-yilgacha rivojlantirish konsepsiyasini tasdiqlash to'g'risida"gi PF-5712-sonli Farmoni. <https://lex.uz/docs/4312785>.
2. O'zbekiston Respublikasi Prezidentining 2023-yil 28-fevralda qabul qilgan "Yangi O'zbekistonning taraqqiyot strategiyasini "Insonga e'tibor va sifatli ta'lim yili"da amalga oshirishga oid davlat dasturi to'g'risida"gi PF-27-sonli Farmoni. <https://lex.uz/docs/4347851>.
3. O'zbekiston Respublikasi Prezidentining 2024-yil 2-fevralda qabul qilgan "Umumiy o'rta ta'lim muassasalari o'quvchilarini xorijiy til va zamonaviy kasblarga o'qitish bo'yicha qo'shimcha chora-tadbirlar to'g'risida"gi RQ-53-sonli qarori. <https://lex.uz/docs/6787995>.
4. O'zbekiston Respublikasi Maktabgacha va maktab ta'limi vazirligining 2023-yil 14-avgustdagi "Umumiy o'rta ta'lim muassasalarida o'quvchilarni kasbga yo'naltirish ishlarini tizimli tashkil etish to'g'risida"gi 238-sonli buyrug'i.
5. O'zbekiston Respublikasi Maktabgacha va maktab ta'limi vazirligining 2023-yil 14-avgustdagi "Umumiy o'rta ta'lim muassasalari o'quvchilarini ikkita xorijiy til va bitta kasbga o'rgatish amaliyotini bosqichma-bosqich joriy etish to'g'risida"gi 239-sonli buyrug'i.
6. Bitiruvchi sinf o'quvchilarini hunarga tayyorlash bo'yicha 46 ta kasb ro'yxati tuzildi. <https://kun.uz/news/2022/08/12/bitiruvchi-sinf-oquvchilarini-hunarga-tayyorlash-bo-yicha-46-ta-kasb-ro-yxati-tuzildi>.
7. 21st Century Competencies. <https://www.moe.gov.sg/education-in-sg/21st-century-competencies>.

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VR-BASED IMMERSIVE TRAINING FOR MEDICAL ENGLISH COMMUNICATION

Annotation. This article explores how VR-based immersive training fosters advanced medical English communication for students. Interactive simulations replicate clinical scenarios, allowing participants to practice language skills and patient interactions safely.

Keywords: virtual reality, medical English, immersion, communication, simulation.

Annotatsiya. Ushbu maqola VR texnologiyalaridan foydalangan immersiv o'qitish ingliz tilida tibbiyotga oid muloqotni rivojlantirish samaradorligini o'rganadi. Virtual muhitda yaratilgan klinik vaziyatlar talabalar uchun xavfsiz sharoitda lug'at va interaktiv ko'nikmalarni mashq qilish imkonini beradi.

Kalit so'zlar: virtual reallik, tibbiy ingliz tili, immersiya, kommunikatsiya, simulyatsiya.

Аннотация. В статье рассматривается эффективность иммерсивного обучения на основе VR-технологий для развития медицинского английского языка. Виртуальные клинические сценарии позволяют безопасно отрабатывать лексику и коммуникативные навыки, помогая студентам эффективно взаимодействовать с пациентами.

Ключевые слова: виртуальная реальность, медицинский английский, иммерсия, коммуникация, симуляция.

Virtual reality (VR) technologies have transformed the landscape of educational training by offering immersive, interactive environments that closely mirror real-world scenarios. In the realm of medical education, especially

in contexts where healthcare professionals need to communicate in English, VR-based programs provide an opportunity for learners to practice language skills in lifelike clinical settings without the risks associated



with real patient interactions. Mastery of medical English communication is increasingly indispensable in globalized healthcare systems, where professionals frequently engage with international colleagues and patients [1]. However, conventional language instruction methods often rely on passive techniques such as lectures, textbooks, or standardized dialogues. These methods may not sufficiently capture the complexity of real-time patient-doctor interactions, nor do they adequately simulate the pressures and nuances that clinicians face in authentic clinical encounters. The adoption of VR-based immersive training responds to these limitations by creating a safe, dynamic, and context-rich environment where learners can refine their verbal and non-verbal communication skills in English while receiving immediate feedback on performance [2: 181–185.].

This study employed an experimental design to evaluate the efficacy of a VR-based immersive training program aimed at improving medical English communication among advanced medical students. Participants were recruited from a university-affiliated teaching hospital in an English-medium curriculum. They were randomly assigned to either an intervention group or a control group, each comprising 20 students. The intervention group participated in a six-week VR-based training module, accessing simulated clinical scenarios using head-mounted displays and specialized software. These simulations covered common patient interactions, including history-taking, explaining diagnoses, and discussing treatment plans. Each scenario featured virtual patients programmed with diverse health conditions, cultural backgrounds, and emotional states, challenging participants to adapt their communication strategies accordingly. Throughout the sessions, students interacted with the virtual patients in English, and the system recorded their speech for subsequent analysis. In contrast, the control group received traditional classroom instruction focused on role-play activities and standardized dialogues, led by an experienced medical English instructor. Both groups completed weekly assignments involving vocabulary drills and grammar exercises to ensure consistent language practice outside of the formal sessions. At the end of the six-week period, all participants were assessed using a structured clinical examination (OSCE) in English. This evaluation involved live patient actors and covered standardized cases that paralleled those used in the VR simulations or the control group's role-play tasks. Trained evaluators, unaware of participant group assignments, rated the students' performance on fluency, clarity, empathy, and overall communication effectiveness.

Data analysis revealed significant differences between the two groups in measures of medical English communication. Students in the VR intervention group

scored substantially higher in fluency and clarity, with a mean improvement of 22% over their baseline scores, compared to a 12% improvement observed in the control group. In addition, evaluators noted that intervention group participants demonstrated more confident use of medical terminology and displayed better responsiveness to non-verbal patient cues. Qualitative observations indicated that many students in the VR group had developed a more patient-centered approach, as they became accustomed to facing a range of patient emotions in simulated scenarios. While both groups showed gains in empathetic communication, the VR group was more adept at delivering bad news or discussing sensitive health topics, a skill attributed to repeated practice in varied and immersive circumstances. Notably, those in the VR group reported lower levels of anxiety prior to the OSCE, suggesting that immersion in realistic virtual settings may mitigate performance-related stress. Despite these overall positive trends, individual differences persisted. A small subset of VR participants exhibited challenges in adjusting to the technology, citing motion sickness or difficulty navigating the virtual environment. Nonetheless, these issues did not appear to hinder their final assessment scores.

The results support the premise that VR-based immersive training can be a powerful tool for cultivating advanced medical English communication skills. By allowing students to rehearse complex interactions in realistic clinical settings, the VR module offered a continuous feedback loop in which learners refined their ability to use precise terminology, adopt appropriate interpersonal strategies, and respond empathetically to patient concerns [3: 112]. This corresponds with theories of situated learning, which posit that authentic, context-rich experiences promote deeper engagement and more effective skill transfer. The heightened realism of VR appears to replicate many of the cognitive and emotional demands that characterize actual clinical interactions, encouraging learners to internalize both linguistic and interpersonal competencies. Interestingly, while both groups demonstrated noticeable improvements, the VR-trained students performed better in scenarios requiring rapid adaptation, such as managing non-routine patient questions or emotional responses [4]. This may be attributable to the dynamic and unpredictable nature of VR simulations, which challenge learners to shift strategies on the spot. Furthermore, the reduction in performance anxiety observed in the VR group suggests an important ancillary benefit: immersive simulations enable repeated exposure to clinical stressors without the potentially harmful consequences of real-life mistakes. However, these findings must be interpreted with caution due to a relatively small sample size and the specialized nature of the participants, who were already enrolled in

an English-medium medical curriculum. Future studies might expand participant diversity to include healthcare professionals at different career stages or those with varying levels of English proficiency.

VR-based immersive training emerges as a promising method for enhancing medical English communication skills. By situating learners in lifelike clinical environments, the approach encourages repeated, authentic practice that surpasses what is typically achievable through conventional classroom instruction [5]. Improved outcomes in fluency, clarity, and empathetic communication indicate the

method's potential utility for preparing medical students and professionals for the multilingual demands of contemporary healthcare. While technological barriers and individual preferences remain considerations, they do not appear to significantly limit overall effectiveness. As VR hardware becomes more accessible and user-friendly, the potential for integrating immersive training modules into standard medical curricula grows increasingly viable. Further research, particularly with larger and more diverse cohorts, will help clarify the full impact of VR-based language training on long-term clinical performance and patient outcomes.

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