

# PSYCHOLOGICAL COMPETENCE AS A PSYCHOLOGICAL PHENOMENON

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## ABSTRACT

**Background:** The professionalism of the doctor is a multidimensional and complex situation. It is as same as the common diverse peculiarities related to doctors all over the world, having also aspects needed by the doctors possessing diverse specialties working in the multiethnic areas. In the contemporary epoch the rapid development of the science, technology including medical sciences and treatment techniques require that the professionals including doctors should have the interest to the innovations, to develop their innovational weltanschauung conforming to the development. Those doctors having no interest to the innovations, not studying and applying them into the practice soon will be blocked from the current life. Fulfilling this task is conveyed to the science dealing with the thoughts - psychology.

**Aims and methods:** The study of the peculiarities of process of development of the professional mastery of doctors, the identification of the effects of each of the psychological information, aptitude, observation, intuition, purpose and motives to the development of professional mastery of doctor; the study of the peculiarities of the development of the main structural parts of professional mastery of doctors and the degree of the influence of psychological knowledge and phenomena, the maintenance of the role of psychological knowledge and aptitude in the consecutive increase of the professional mastery of doctor.

While in the theoretical part induction, deduction, analysis, synthesis and comparison methods are used, in the experimental part observation, questionnaire expert evaluations, and experiment methods; also according to the aim of the survey methods of psycho-diagnostics are used.

**Results:** the perfection of the psychological qualities, knowledge and skills of doctors, exerting serious influence to the development of their professional skills development.

**Conclusion:** the role and the significance of the psychological competency in the structure of professional mastery of doctor was identified; the optimal ratio of theoretical knowledge and the knowledge related to the sphere was obtained, also the scientific novelty of the concept elaborated is that the psychological mechanisms maintaining the development of professional mastery of doctor are identified and substantiated.

**Keywords:** professional mastery of doctor, medical science, psychological knowledge, competency, capability, communicative, cognitive, intuition

## INTRODUCTION

The rapid socio-economic, socio-politic changes occurring these days require several necessities to the psychological resources of humanity, including doctors. So that's why in contemporary psychology there are researches and studies on the peculiarities and constructs corresponding to the changes occurring in the environment.

It is necessary that the specialists, namely the doctors need to have the properties of psychological competency in the structure of the contemporary "subject-subject" relations.

The psychological competency being the interdisciplinary problem such sciences like psychology, sociology and the pedagogic sciences study it. However, there is not a theory of competency universally accepted by the majority. There are several approaches existing to comment the factors and mechanisms of its formation and development.

Despite the relevance of the psychological competency, its necessity by the specialists of diverse professions, this type of researches having fragmental property, in general are limited by the definite parametric influence of structural parts of its contents to the activity and dialogue.

The analysis of the researches in this topic conducted in our country and abroad shows that its relevance and significance are substantiated and recognized by all; however its degree of study doesn't have such credit. According to A.G.Asmolov, D.A.Leontyev, L.A.Petrovskaya, Y.B.Shestopal the communicative competency within the psychological competency is studied methodically. The other parts and directions of the psychological competence: cognitive competence, social competence and others are not studied sufficiently.

The mutual bonds and interaction between the diverse types and forms of psychological competence almost not studied. At the same time the degrees and criteria of the competency are also not exposed.

The fact that the psychological competency of the doctor has the leading role in his/her professional mastery is recognized by all. Such recognition is visible in the documentations of various levels: professiographic, in documents and researches devoted to the occupation of doctor.

It is witnessed that there is a lack of special researches in psychology related to the psychological competency of doctors. Such a situation makes difficult the task of forming the programs enhancing the professional competence of doctors and their application into the practice.

The principle of the concept of "psychological competence" is commented by different researches in different manners. While some of authors refer to this as the psychological knowledge, study and skills, others explain this as the universal psychological system of the person.

The psychological competence of the subject as the psychological phenomena is studied by the psychological schools and directions abroad. But the study of this problem has recently started in our country.

The concepts of competence and competency are explained in a different way: "competence" - is the knowledge and experience, the sphere of the tasks of certain authority or government official, the sphere of knowledge and experience of person. "Competency" – is the sphere of tasks given to the certain authority or government official to be fulfilled on the basis of law, charter or other documents<sup>i</sup>.

Some scholars distinct the several structural parts in explaining the meaning of competency: the factors maintaining the competence (skills, knowledge, and talent); the results of the activities (the product of labour, the changes in the labour activity)<sup>ii</sup>.

In the science of Psychology there are several definitions of competency given:

- The level of the study of social and individual forms of the activity leading to performance in the framework of capabilities and status of the human being<sup>iii</sup>;
- The level of the successful solution of the problematic situations<sup>iv</sup>;
- The level of the formation of social experience of the subject<sup>v</sup>;
- The addition of the professional qualities and capabilities leading to fulfilling the duty requirements of the person to definite extent<sup>vi</sup>;
- The level of basic and special professional education, the consolidation of the solution of professional problems and total years in service<sup>vii</sup>;
- The norm of the understanding the surrounding world and the level of the adequacy of interaction with it (366);
- The addition of the knowledge skills and aptitudes maintaining the effective fulfillment of the activity;

I.S.Yakimanskaya besides to the knowledge related with the psychology, skills and aptitudes introduced the definite imagination of the significance and role of psychology in the doctoral practice, accurate usage of the information related to the psychology in the treatment of patients into the psychological competency<sup>viii</sup>.

While studying the professional psychology and professional success E.F.Zeer designated the following components in the structure of professional competence:

- The social competence expressing the ability to cooperate;
- The capability to successfully solution of professional duties, the independent evaluation of the results of his/her labour, mastery of new professional knowledge and capabilities;
- The reflection, the successful suppression of professional stress and deformation, the individual competency covering the preparation of the improvement of professional mastery<sup>ix</sup>.

It is needed a lot of time and efforts to refer to all of the definitions given to the psychological competency. Most of them are the expressions of the commenting the same phenomenon from the diverse points of views in varied form. In most cases they are filling each other. Despite the fact we are not articulating all of them we attempt to analyze the psychological competence of the doctor<sup>x</sup>.

One of the main structural parts of the professional competence of the doctor is psychological competency. Communicative competence is one of the structural parts of psychological competence. The communicative competence of the doctor has common aspects with the communicative competency of owners of other types of professions. At the same time the communicative competence of the doctor has its particular aspects.

Whereas owners of professions other than doctor exchange the information during the process of the communication, the doctor makes sure of other functions besides to the exchange of information during the process. Moreover, during the communication the doctor also needs qualities not required by the other specialists. For example, one of the qualities needed by the doctor during the dialogue with the patients is tolerance. The necessity of this quality is related with psychological situation of patients with whom the doctor is busy in the dialogue. Most of the patients are capricious due to the illness. This condition is mostly visible in children. This case needs patience from the doctor.

The communicative competence is expressed in the demonstration of cognitive, emotional and psychomotorical qualities in the process of dialogue and their usage.

One of the components of the communicative competence is the socio-perceptive competence. It is expressed in the aggregate and accurate perception of the person involved in dialogue, exact understanding and evaluation. Conducting a study of socio-perceptive competence N.E.Vegerchuk shows the following structural parts: purpose –motivational, cognitive, emotional and evolutional components. Above and beyond this author also includes the subject as the person having an ability of evaluation of himself/herself conducting professional dialogue and activity into the socio-perceptive competence<sup>xi</sup>.

The socio-perceptive competence is established as perceiving himself/herself completely, in-depth as individual, the subject of activity, understanding and evaluation<sup>xii</sup>. Therefore, the socio-perceptive competence can be categorized as the preparedness of the human being to be a whole subject of the socio-perceptive process. This quality maintains his /her successful process of interaction with the socium.

The requirement for the doctors are established through the state standards in the system of higher education. The students studying in the freshmen year on the basis of state standards obtain diplomas after seven years providing them a right of medical practice. Of course during this time there will be significant changes in the lifespan of the society. This also leads to the changes of requirements for doctors. So that's why progressing approach should be applied while instituting State educational requirements<sup>xiii</sup>.

In the State educational requirements there are specifications of what knowledge, skills and aptitudes should be gained by the specialists including the doctors<sup>xiv</sup>. Here there are almost no indications of what personal qualities should be obtained by final year's students, that's doctors. However the profession of doctor is such an employment where in the success of it there is a crucial role of not only the knowledge, skills and capabilities, but also personal qualities<sup>xv</sup>. For example, one of the personal psychological qualities most needed by doctor is the empathy. However, this quality requires that the person should be compassionate to others, it is undeniably needed by the doctor. The doctor who doesn't understand the condition, pains of the patient, his/her closeness to danger, cannot be a doctor in broad sense<sup>xvi</sup>. This case also testimonies the extent of the role of personal psychological properties of doctors has in their professional practice.

The student who has the desire obtaining the profession of doctor having been admitted to the university should work hardly to meet the requirements of the time passed till the graduation, gain needed qualities, and enrich skills. In this very process extending even after the graduation, in-service training centers and universities should assist.

In the state standards requirements demanded from the professions are met and expressed. However these standards cannot reflect the expression of the person as a professional. For each of the doctors the profession of doctor is the means of his/her participation in the life of the society and the main source of gathering material possessions. The profession of doctor allows existing and developing for him/her in exchange of labour. Besides to that in the conditions of transition to market relations rendering paid medical services require having several qualities in addition to the professional knowledge of doctors.

The fact that the state standards determine the education aims, they pose as the mechanisms of managing the quality of education by the society and state. They have the collected aims of the society and the state policy in the sphere of education. The doctor should act in this framework of goal and policy and present himself properly.

One of the peculiarities of the contemporary period is the scientific and technical progress, the informatization of all spheres of social life. In these circumstances the doctor should have the property of tolerance to the competition in order to work successfully. Tolerance to the competition demands definite psychological qualities. One of such qualities we can assume is the innovational thinking, being well aware of the news in the field of doctoral job and practice, the ability of their selective application to his practice, to justify the trust of patients. In order to achieve such qualities it is obligatory that the doctor should constantly improve not only his knowledge but also the information related to other spheres of social life. In other words in the conditions of the transition period to the market relations there is a high rise of interest in doctors for improving their professional mastery. Now, the doctor needs to articulate himself not only as the specialist but also as the comprehensive member of the society.

The process of acquiring the professional mastery is long-lasting process having several phases. These phases are the following: the adaptation of the doctor to the profession, the demonstration of doctor as the specialist, obtaining the stable successes in securing profession and high honorable professional mastery phase.

It is not possible to achieve all these phases in the medical higher educational institutions. The first of these phases - the adaptation of the doctor to the profession cannot be totally achieved in the higher educational institution. The finish of this phase can occur during the several years after the start of independent doctoral practice.

The transition to the further phases of professional mastery can be achieved by independent work process, studying in the in-service institutions and courses, and working to eradicate his adverse peculiarities.

## **CONCLUSION**

The personal psychological characteristics, psychological knowledge and skills have essential role among the qualities maintaining the professional mastery of the doctor. The development of the professional mastery of doctor occurs in accordance with his/her psychological features, level of psychological knowledge and skills. In the contemporary period the intense pace of the science, technologies, including the medical science and treatment techniques require the development of special interest to innovations and innovational thinking in doctors. The doctor who hasn't interested in innovations, who hasn't study and applied them carefully into the practice will soon be left in lower stages of the life. Innovational thinking becomes the mandatory properties and essential part of the clinical thinking which is one of the important structural parts of the professional mastery of the doctor. There is a necessity for diverting the activities of medical practitioners from nozocentric direction to anthropocentric direction. Although there is preference in the scientific and methodical literature for anthropocentric approach, nozocentric approach in the treatment prevails. The treatment of the patient should prevail instead of treatment of the illness in the experience of the doctor. In order to achieve this doctors' knowledge related with the personal psychology should be developed and enriched. The professional mastery of the doctor is characterized by his handling of the

medical theory, his selected specialty, his awareness of the personal psychology, the successful application of the above-mentioned knowledge into the practice.

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## SUMMARY

Given the importance of surgery within the specialty of Obstetrics and Gynecology it is crucial to understand the process of wound healing and the suture available to surgical repair. The selection of the type of suture depends on the tissue and anatomical location. Three properties of a suture material

affect its handling: memory, elasticity and knot strength. Tensile strength, tissue reaction and capability to be absorbed are other important characteristics of the suture material.

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