# APPROACHES TO DEVELOPING FOREIGN LANGUAGE TEACHING SYSTEM IN HIGH SCHOOLS OF UZBEKISTAN

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**ABSTRACT:**In this article, approaches to developing foreign language teaching system in schools of Uzbekistan were offered, particularly in medical higher educational institutions, by introduction differentiated - continuous and professional – oriented English language and it aims at developing medical students' foreign language professional communicative competence. In this aspect realisation of the training system, based on information technologies and specification of foreign language learning is actual and practically significant.

**Keywords:** Practically significant, non- linguistic, curriculum, colleagues-physicians, multicomponent, naturalistic exercises, linguistic contrast.

## MATERIALS AND METHODS

The offered concept was developed in execution the Decree of the First President of Republic Uzbekistan "On Measures For Further Enhancement Of The System Of Teaching Of Foreign Languages " from December, 10th, 2012 and provides coordinally improving teaching system of foreign languages in non linguistic high schools, particularly in medical educational institutions, by introduction differenciated - continuous and professionally - oriented approach of teaching of a foreign language and is directed on preparations of future doctors possessing wide access to achievements of a world civilisation and world information resources, and also development of the international cooperaton.[2,76]

The basic idea of the concept is that teaching foreign languages should be carried out continously and differenciated on the level - degree basis starting from the actual level of knowledge of the foreign language of students, without taking into account course and curriculum on a speciality. Learners benefit greatly from explicit explanation of how pronunciation fits into the overall process of communication. A very simple model of communicat ion, showing a listener trying to interpret a message on the basis of cues in the speakers' speech, is sufficient. This gives learners a framework within which to understand what goes wrong when they are not understood or are misunderstood, and to gain a clear, practical idea of the nature of linguistic contrast - not just a classroom drill with 'thigh' and 'thy', but the living basis of our ability to communicate in real life contexts.The advantages of working with this type of framework are:

a) It takes learners' focus away from their own 'performance' and places it more clearly on the listener's experience of their speech. This can be very helpful in reducing nervousness and the expectation of failure.

b) It changes the goal of pronunciation from one of mimicking a native accent (extremely difficult to achieve), to one of creating intelligible messages (perfectly possible).

c) It allows a blurring of boundaries between segmental and supra segmental aspects of speech, and an easy way in to teaching learners about the information structure of speech, which is highly useful in teaching English prosody.

## RESULT AND DISCUSSION

This type of teaching naturally encourages the use of naturalistic exercises and practice of real communicative situations. Classes must be learner-centered in the sense that learners

should be able to practice speech that will be directl y useful to them in their real lives. I think it is essential that the basis of all classroom exercises should be phrases and sentences.

**CONCLUSION**

In conclusion, the method of curriculum design and delivery for Medical English needs to shift from the traditional methods to being contextually - based and experiential. It needs to be delivered at the level of advanced English training where focus can be dedicated to the language of the career rather than the structural foundations and rules of learning a new language. The provision of this type of course or curriculum will improve the students' motivation to learn and participate in learning activities. Immersion activities and exposure to native English speakers who are also health professionals are crucial elements in enculturating the Medical English student into the way career-specific language is actually used.

**REFERENCES**

1. М.Карабаев, А.А.Абдуманонов, М.И.Ахмедова. Компьютерная программа для формирования иноязычной профессиональной коммуникативной компетенции студентов медиков. Свидетельство Патентной ведомстве Республики Узбекистан N: DGU 02453 от 29.03.2012г. об официальном регистрации программы для ЭВМ.

2. Bruck, M., & Waters, G. (1990). Effects of reading skill on component spelling skills. Applied Psycholinguistics, 11,425–437.

3. Burnette, A., Bettis, D., Marchand-Martella, N. E., Martella, R. C., Tso, M., Ebey, T. L., McGlocklin, L.,

4. Collins, M. (1983). Teaching spelling: Current practices and effective instruction. Direct Instruction News, 3(1), 1, 14–15.

5. Darch, C., & Simpson, R. G. (1990). Effectiveness of visual imagery versus rule-based strategies in teaching spelling to learning disabled students. Research in Rural Education, 7(1), 61–70.