SUMMARY

Communication and culture reciprocally influence each other. This intertwining produces intercultural communication which serves as a mode of understanding for the members of one culture to learn how to communicate, behave and interpret messages coming from members from other cultural groups. The introduction of the intercultural communication concept to students from the Departments of Pharmacy and Nursing at the University of Nis Medical School during compulsory English language classes keeps the future healthcare providers in pace with modern pharmacy and medicine, forcing them to realize how important it is to comprehend what happens when intercultural contacts and interaction take place.

Key words: intercultural communication, English language classes, students, pharmacy, nursing

1. Defining Communication and Intercultural Communication

Intercultural communication is not a new issue - as long as people from different cultures have been encountering one another there has been intercultural communication. It is a symbolic, interpretive, transactional, contextual process in which the degree of difference between people is large and important enough to create dissimilar interpretations and expectations about what is regarded as competent behaviors to be used to create shared meanings (1). Thus, intercultural communication is defined as a multi-disciplinary academic field of research and study that seeks to understand how people from different countries and cultures behave, communicate and perceive the world by creating a cultural synergy (2). As an integral part of it, communication is the most important personal quality and the most rewarding one for people whose priority is to expand knowledge and broaden their horizons if they want to work or be a part of an intercultural setting either as professionals, business people or expatriates.

Although a rather complex process, communication simply defined is a process of sending and receiving messages that enables humans to share knowledge, attitudes and skills. The whole process involves sending and receiving information between a sender and a receiver. The common model of communication is shown in the following diagram:

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Source --> Encoding --> Message --> Channel --> Receiver --> Decoding --> Response
       ↓       ↓       ↓       ↓       ↓       ↓       ↓
          Noise          Feedback
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The idea or feeling comes from the Source. This input into symbols (Encoding) produces a message which is transmitted through a Channel.
The channel is the medium used for communication (e.g. writing, speaking). The message is interpreted by the Receiver (Decoding) who responds with a feedback that can be either positive or negative. Noise here means anything that distorts the message. This means that communication can be very difficult if the difference between the cultures is great; it can break down completely if there is too much 'cultural noise' (1). Since the human part of communication is largely a learned behavior, this should make possible for members of one culture to learn and develop the art of communication of another culture. This is the moment where communicators are introduced to the arena of intercultural communication as the means for overcoming possible misunderstandings that underpin interaction between members of different culture (3). While in the arena fighting like gladiators of the ancient Rome, intercultural communication teaches the communicators to see the world from a different perspective by affording them constant access to new experiences, new meanings and new understandings, finding a proper place for them in that same world and helping them explain the world and themselves by connecting people through culture and celebrating diversity (4-7). Moreover, a successful intercultural communication is a matter of the highest importance if humankind and society are to survive, whereas, theoretical and practical knowledge about intercultural communication in lecture halls introduced by the English language teacher during the compulsory language classes enables students to learn how to coexist peacefully with those who do not necessarily share their own life style or values. This is essential and guarantees successful intra- and intercultural communication.

2. Employing Intercultural Communication in English Language Classes

All languages are ways of marking cultural identity. The language used by a particular speaker constantly refers beyond itself irrespective of his/her intentions and it cannot be used without carrying meaning, even in the environment of a foreign language class (8). Therefore, English language teachers should be aware of the place of cultural studies within English language teaching and try, in every way, to improve students' cultural awareness and communication competence as well (9). Language teaching has therefore always and inevitably meant, in fact, "language and culture" teaching "because effective international cooperation, knowledge of other countries and their cultures is as important as proficiency in their languages and such knowledge is dependent on foreign language teaching" (9, 10). Thus, the role of the English language teacher is to develop skills, attitudes and awareness towards cultural values just as much as it is to expand knowledge of a particular culture or country. Moreover, all language teaching should promote a position which acknowledges respect for human dignity and equality of human rights as the very basis of social interaction. Hence, the purpose of teaching intercultural (Intercultural communication, unlike intercultural communication, is defined as the ability to communicate with the members from the same cultural group.) communication as an integral part of compulsory English language classes is not to try to change learners' values, but to make them explicit and conscious about any and every evaluative response to others. Typically so, here is where students see what is acceptable in one culture is clearly not acceptable in another which largely depends on one's world view meaning that people involved in intercultural interactions are on the Titanic about to hit the ice berg. (In the intercultural context, the ice berg represents the unknown facts about different cultures, precisely the ones, that usually cause problems in intercultural interactions.) In order to avoid hitting the ice berg, that is, misunderstandings in intercultural communication, both good linguistic and cultural competence is indispensable.

Cultural and linguistic competence is a set of congruent behaviors, knowledge, attitudes and policies that come together in a system, organization, or among professionals that enables effective work in cross-cultural situations. “Culture” refers to integrated patterns of human behavior that include the language, thoughts, actions, customs, beliefs and institutions of racial, ethnic, social, or religious groups. Tantamount to culture, “competence” implies the capacity to function effectively as an individual or an organization within the context of the cultural beliefs, practices, and needs presented by patients and their communities (11). Hence, in 2000, the Liaison Committee on Medical Education (LCME) (Liaison Committee on Medical Education (LCME) is a nationally recognized authority for medical education programs leading to the M.D. (Medical Doctor) degree in the US and Canadian Medical Schools.) introduced the standard for cultural competence saying that the faculty and students must demonstrate an understanding of the manner in which people of diverse cultures and belief systems perceive health and illness and respond to various symptoms, diseases and treatments.

To this end, pharmacy/nursing students at the University of Nis Medical School should learn to recognize and appropriately address gender and cultural biases in healthcare delivery, while first considering the health of the patient. Cultural competence in healthcare combines the tenets of
patient/family-centered care with an understanding of the social and cultural influences that affect the quality of medical/pharmaceutical services and treatment. With the ever-increasing diversity of the population in Serbia and strong evidence of racial, national and ethnic disparities in health care, it is critically important that health care professionals are educated specifically to address issues of culture in an effective manner. Correspondingly, the intercultural dimension in English language teaching at the University of Nis Medical School aims to develop the students of pharmacy and nursing as intercultural speakers or mediators, who will have the fortitude, as future health professionals, to engage in multiple intercultural pharmacist/nurse-patient encounters and approach patients with intercultural awareness that will enable them to avoid stereotyping (either positive or negative) in providing healthcare to patients from different cultures. The students are, therefore, not only being taught how to overcome stereotypes about different cultures, which is a milestone for their future careers, but also to perceive the patient as an individual whose qualities are yet to be discovered, rather than perceiving him/her as a representative of an externally ascribed identity or another cultural, racial or national group.

For registered nurses, in particular, intercultural communication is valuable in patient care because cross-cultural issues are pervasive and ever-increasing in the complex healthcare systems today. Moreover, intercultural communication is becoming a threshold competence in the selection of nurse managers in a sense how they, as health professionals, deal with sensitive cultural issues from the emic (Studying culture from an emic point of view means involving analysis of cultural phenomena from the perspective of one who participates in the culture being studied) and etic (Studying culture from an etic point of view means involving analysis of cultural phenomena from the perspective of one who does not participate in the culture being studied,) point of view. On the other hand, pharmacists also come across sensitive intercultural issues in dealing with patients that may occur during pharmacist/patient communication (practiced throughout a pharmacist career in the United States) and represent the keys to facilitating the excellent care of the patient throughout the length of the pharmacist/patient rapport both in the OTC (Over-the-Counter) area or hospital rooms. Therefore, training pharmacy students in various aspects of communication with intercultural patients is both an important agenda and a challenge not only for an English language teacher but also for pharmacy educators. The future pharmacist learns that multicultural patient care has the potential to improve communication between the health care provider and the patient, increase patient satisfaction with the provider and during the encounter, increase patient cooperation with drug therapy plans, and improve the quality of care and enhance patient health (12).

In acknowledging the tightrope that all healthcare providers walk in multicultural settings, each of them should pay attention not only to details of particular cultures but also to the larger picture, namely that every individual brings to interpersonal encounters a set of expectations as to how people should and will interact and what possible outcomes will result (13). Moreover, healthcare providers (in this case registered nurses and pharmacists) must challenge themselves to simultaneously examine their own cultural biases as they learn about cultures and patients from another culture in clinical or OTC encounters. To this end, students of pharmacy and nursing at the University of Nis Medical School learn that intercultural communication is the communication on the basis of respect for individuals and equality of human rights as the gist of social interactions, and in that sense become fully aware of the fact that attitudes towards illnesses, kinds of treatment, the role of the nurse/the pharmacist in rapport vary widely across cultures. What is considered an illness in one culture may not be seen as such in another. Some cultures favor treatment of the whole person, others concentrate on dealing with specific symptoms. In some cultures healthcare providers (the nurse/the pharmacist) will put more emphasis on the patient as a person, while in others the focus is on the analysis of the illness. Also, proxemics (physical distance), oculesics (eye contact), haptics (touch) and vocalics (voice patterns) vary across cultures and should be learned in order to avoid misunderstanding and insult (14). Therefore, bearing in mind both the verbal and the nonverbal cues in dealing with patients from different cultures the English language teaching with an intercultural dimension, perpetually helps the students to acquire (as indicated) both linguistic and cultural competence essential for successful communication. Students are also made aware that an intercultural speaker apart from cultural and linguistic awareness and competence needs to learn skills, attitudes and values involved in the process of intercultural communication which are crucial to understand intercultural human relationships. Moreover, these help the students to develop their intercultural competence i.e. their ability to ensure understanding by people of different social identities and their ability to interact with people as complex human beings with multiple identities and their own individuality.
The role of the English language teacher is not only to teach but also to help the students see relationships between their own and other cultures, help them acquire interest in curiosity about otherness and an awareness of themselves and their own cultures seen from other people's perspectives. Accordingly, in order to develop the intercultural dimension in lecture halls, the English teacher should make pointers for students which will make them grasp the idea of how to become successful intercultural communicators, in this case, in healthcare. The following points in teaching intercultural communication should not be, therefore, considered as definite because the area of interculturalism is very broad allowing each language teacher to make his/her own set of priorities within the context. The teacher should:

1. Provide students with both intercultural and linguistic competence
2. Prepare them (as future healthcare providers) for interaction with people from other cultures
3. Enable them to understand and accept people from other cultures as individuals with distinctive perspectives, values and behaviors
4. Help them to see that such interaction is an enriching experience
5. Teach students the know-how of social processes and of how other people are likely to perceive them and vice versa. Also, no teacher can have or anticipate all the knowledge which students might need at some point. Teacher's skills of comparing are as important as knowledge because students need to be able to see how misunderstandings can arise and how they might be able to resolve them. By comparing and contrasting two or more cultures side by side and seeing how each might look from the other perspective, students can comprehend how each might misunderstand what is said or written or done by someone with a different social identity. Also, in order to have the ability to know how to ask people from other cultures and, consequently, obtain relevant information about their beliefs, values and behaviors - skills of inquiry and interaction are a must. This means the ability to acquire new knowledge of a culture and cultural practices as well as the ability to operate knowledge, attitudes and skills under the constraints of real-time communication and interaction. Consequently, by the end of the compulsory English language course the students should be able to understand the following:
   a) the concept of cultural filters (that is shared cultural experiences, perceptions and beliefs (or our world view)) as they apply to medical/pharmaceutical care in culturally diverse populations,
   b) understand how culture works to create differences in disease explanations and
   c) understand how culture molds beliefs about medical/pharmaceutical treatment.

What should also be pointed out is that the acquisition of intercultural competence is never complete and perfect. Moreover, to be a successful intercultural speaker and a mediator does not require perfect English language and cultural competence. This means that there is no perfect model to imitate, no equivalent of the notion of a perfect interculturalist just as there is no acquisition of a new national identity. What an English language teacher can do is to make the students see the foundation of intercultural competence: curiosity and openness, empathy, readiness to suspend disbelief about other cultures and belief about one's own. This means not taking one's own values, beliefs and behaviors for granted, avoid assuming that they are the only possible and naturally correct ones and be able to see how they might look from an outsider's perspective who has different set of values, beliefs and behaviors by showing the ability to de-center and think outside the box.

Finally, if the teacher manages students to be open-minded, curious about and tolerant of other people's beliefs, values and behaviors, the students will understand their own beliefs, values and behaviors better. Students need a critical awareness of themselves and their values in addition to those of other people which make up and build-up their ability to evaluate and judge on the basis of explicit criteria, perspectives and products of one's own and other cultures.

3. Conclusion

Lastly, it is not the purpose of teaching intercultural communication in the English language classes at the University of Nis Medical School to try and change already established students' values, but to make the students explicit and conscious in response to others. There is nonetheless a fundamental values position which all language teaching should promote especially to future healthcare providers: a position which acknowledges respect for human dignity and equality of human
rights by staying in touch with the world and communicating wisely with it. The role of the English language teacher is therefore to develop skills, attitudes and awareness of values just as much as it is to expand knowledge of particular culture or country and make the students aware how important it is to celebrate diversity by overcoming prejudices about people and cultures that are different form one's own.

REFERENCES