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**TEACHING COLLOCATIONS IN ROMANIAN MEDICAL
LANGUAGE FOR PREPARATORY YEAR STUDENTS**

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Abstract

Specialized languages are defined as communication within a particular professional activity or communication within a domain of specific knowledge. In the context of teaching a specialized medical language for non-native speakers, one should start with analyzing the structure of the target group, the level of the linguistic competences (non-terminological vocabulary), and the level of knowledge in the respective field in order to identify the necessary tools to attain the goals and objectives. Given the importance of the lexicon to language structure, second language learning and language use, the process of understanding a scientific text begins with the definition of unknown terms, their explanation and use in a context and continues with lexical exercises until the learner can use the terms in oral and written communication correctly. Collocations are groups of words that co-occur in a language in a way that sounds natural to a native speaker. Second language learners often rely on their native language, assuming that there always exists a one-to-one correspondence between lexical items of the source and target languages. This may cause collocational errors because equivalent lexical items do not always have the same sense in two languages for various reasons, including cultural differences which are reflected in the vocabulary of every language. In teaching medical language for non-native speakers, various teaching methods and procedures should be used such as: definition, exemplification, lexical exercises and dictionaries. The present paper aims at identifying efficient methods and procedures used in teaching collocations specific to the medical language.

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1. Introduction

Terminology as a discipline is defined as the scientific study of the terms used in specialized languages. „Terminology means first the discipline which studies *specialized communication*, accomplished *unambiguously* in a certain scientific, technical, professional field” (Bidu-Vrânceanu, 2000, p.19). The notion of *terminology* had been used for the first time by the German teacher Christian Gottfried Schütz as early as 18th century. The first definition of terminology had been given by Whewell (1967) (English epistemologist and moralist) in *The History of Inductive Sciences* (1837) and in *Philosophy of Inductive Sciences* (1840). Eugen Wüster (1898–1977) an engineer interested in information science and a promoter of appropriate specialized professional communication elaborated a theory of terminology based on his work experience of *The Machine Tool. An Interlingual Dictionary of Basic Concepts* (Wüster 1968), a French and English dictionary of standardized terms.

For him, the main purpose of terminology was to avoid ambiguity in professional communication. He formulated the general principles of terminology and he established terminology as a discipline.

“The specificity of terminological units in contrast to other units of the same structural level (words) resides in the fact that they fulfil restricted conditions in each of their cognitive, grammatical and pragmatic constituent components” (Cabré, 1999, p. 183). According to her approach, the description of a terminological unit must necessarily have these three dimensions: a cognitive element, a linguistic element and a socio- communicative element.

From the perspective of their cognitive constituent, they satisfy the following conditions: they rely on a thematic context; they have a precise place in a structure, which determines their specific meaning; this meaning is clearly fixed; they are recognized and disseminated by the community.

From the linguistic point of view, they are lexical units with lexical and syntactic structure; they may suffer any word formation processes; they may be similar with units from general vocabulary; they are nouns, verbs, adjectives or adverbs; “their meaning is related to a special subject; their syntactic combinability is restricted according to the combinatory principles of all lexical items of a language”(Bidu-Vrânceanu, 2010, p. 61).

According to their communicative constituent, they are used in specialized discourse; they adapt to this type of discourse functionally; they can be acquired through a learning process and they are used by specialists in their field or by non-specialist who want to communicate in the respective field; they are mainly denotative.

2. Problem Statement

In linguistics, phraseology is the discipline which studies stable word-groups, such as idioms, phrasal verbs, and other types of multi-word lexical units (defined as *phraseological units* or *phrasemes*). According to Gläser, “a phraseological unit is a lexicalized, reproducible billexemic or polylexemic word group in common use, which has relative syntactic and semantic stability, may be idiomatized, may carry connotations, and may have an emphatic or intensifying function in a text” (Cowie, 1998, p.19).

Phraseology includes all relations between a term and its co-occurrences; to that effect linguists and other specialists in the fields treat differently the phraseological units of specialized languages and phrases, collocations and idioms of standard language. It is to be mentioned that within the phraseology of

specialized languages, criteria of selection, systematization and definition of are double-determined, phraseological units being considered on one hand as units of a given linguistic system and on the other hand as units belonging to a notional hierarchized system.

Different criteria had been used to determine these functional units such as: thematic according to their source of origin, that is the source referring to a particular sphere of human activity, natural phenomena, domestic and wild animals, etc; the semantic principle, related to the relationship between the meaning of the whole unit and the meaning of its components, and the functional principle “which establishes formal criteria of idiomaticity by analysing the units from a syntactic point of view or the contextual approach which starts from the assumption that individual meanings of polysemantic words can be considered dependent on their contexts”(Frătilă, 2011).

Regardless of category, the common trait of any phraseological units of a language is that they “are stable combinations of two or more words having a fixed meaning and denotative function” (Hristea 1984. p.134). The two major sub-classes of fixed expressions are **collocations** and **idioms**. Collocations are groups of words that are frequently juxtaposed in a language, following a pattern that sounds correct to a native speaker. They are connected to “the mutual expectancy of words, or the ability of a word to predict the likelihood of another word occurring” (Jackson & Amvela, 2007, p. 106).

In Romanian medical language the most frequent terms are formed according to following collocational patterns: (Staicu, 2016, p. 109).

- **juxtaposition:** *aparatură digestivă, astm bronșic, centru nervos, fosa iliacă, metabolism bazal, nerv sciatic, , sistem circulator, țesut conjunctiv, țesut epitelial, ș.a.*
- **nominal phrases with proper nouns:** *boala Parkinson, boala Crohn, sindromul Down, sindromul Zollinger-Ellison, sindrom Marfan, test Papanicolaou, virus Ebola etc.*
- **noun phrases(noun + noun in the genitive:** *albul ochilor, , baza craniului, centrul reflexelor, deformarea oaselor, eradicarea infecției, leziunile mucoaselor, menținerea mobilității, tendonul lui Ahile, ș.a.*
- **noun + adjective:** *artera toracală, centură scapulară, dietă hipocalorică, glande lacrimale, ganglioni limfatici, materie cenușie, malformații coxo-femorale, nervul sciatic, piramidă nazală, regiunea lombară, scoarță cerebrală, etc.*
- **noun + preposition + noun:** *canale de conducere, extracte de cartilaj, exces de os, glande cu secreție, hernie de disc, organe de reproducere, reacții cu edem, rezecție de intestin, vase de legătură ș.a.*
- **verb + noun (Ac.):** *a administra medicația adecvată, a ameliora durerea, a extirpa un nodul, a injecta un antiinflamator, a perfora stomacul, intestinul, a preveni recidivele,;*
- **reflexive verb+ noun:** *se modifică evoluția bolii, se extirpă nodulul, se instalează hemipareză, ș.a.*

The elements of a collocation are the **node**, i.e., the lexical item that is being studied and the **collocate(s)**, i.e. the lexeme(s) that co-occur with the node; the number of lexemes a node may have represents its **range**. If the range of a node is taken into consideration, one may speak about various types of collocations. **Fixed, unique or frozen collocations** occur when a node can combine with one collocate

only. In Romanian medical language the node can often have several collocates. As example from the node *țesut* we can build the following collocations: *țesut conjunctiv* (juxtaposition); *țesut de legătură*, *țesut de granulație* (with preposition); *țesutul dintelui* (with a noun in genitive).

Researchers in the field like, Gross (1996) consider phraseological units a larger category which include all co-occurrences of a term in a text, whether they have a strict specialty character, with idiomatic value or they are terminological constructs whose constituents have a restrictive combination potential. As for the Romanian medical language, phraseological units fall into the following distinct categories according to the degree of semantic cohesion of the components.

Collocations with a stable form(some of them also met in other specialized languages):

a face o operație de, a face o injecție, a introduce un instrument, a extrage un organ, a face un vaccin;

Phraseological combinations with univocally connected constituents: *a suferi un accident vascular cerebral ischemic, boli cerebrovasculare, stop cardiac/ respirator, sarcină extrauterină;*

Idiomatic phraseological units, biunivocally connected, being of strict specialty, having a very reduced collocability:*poliartrită reumatoidă, cortex cerebral, transpoziție viscerală.*

Taking into account the above-mentioned categories, one can affirm that medical texts are usually built using medical terms of different types (strictly specialized or with inter/intra disciplinary character) in lexical combinations with elements of standard language which acquire significant meanings and play the role of a binding agent in the communication act from the specialized text/discourse.

In the context of teaching a specialized medical language for non-native speakers, one should start with analyzing the structure of the target group (homogenous or non-homogeneous), the level of the linguistic competences (non-terminological vocabulary, the scientific level), the level of knowledge in the respective field with a view to identify the modalities and the necessary tools to attain the goals and objectives. It goes without saying that the learner should possess a basic level of Romanian as well as basic specialized knowledge (mainly biology) acquired in the previous schooling years.

Given the importance of the vocabulary for the structure of language, second language acquisition and its communicative role, the process of understanding a scientific text begins with the definition of unknown terms, their explanation and use in a context and continues with lexical exercises until the learner can use the terms in oral and written communication correctly.

In teaching medical language collocations, “the lexical approaches in language teaching reflect a belief in the centrality of the lexicon to language structure, second language learning, and language use” (Leech, 1997, p. 78).

The teacher's role is to combine a great number of teaching methods for the acquisition of new words and phrases. Moreover, for non-native learners who study medical language in a Romanian, setting is very important; to have to take part in real communicative situations in order to improve their linguistic performance in the specialized language, necessary for their future studies.

3. Research Questions

- 3.1.** Which are the most effective means and methods in teaching/learning Romanian specialized medical language for the students of the preparatory year?
- 3.2.** What is students' opinion on current study materials we use in point of difficulty and structure?

4. Purpose of the Study

The present study proposes to identify the most efficient methods and procedures in teaching/learning Romanian medical collocations for preparatory year students. At the same time we aimed at identifying if the current medical textbooks and materials meet the expectancies of our students, in point of structure, topics and level of difficulty)

5. Research Methods

5.1. Sample

The sample consisted of 75 foreign students enrolled in the preparatory year to learn Romanian who will study medicine the next year: 51 boys and 24 girls, who came from different geographical areas: Arabic countries (Jordan, Iraq, Syria, and Lebanon), Asia (Vietnam, China), Africa (Morocco, Congo, Guinea, and Cameroon), and Europe (France, Territoires d'Outre-Mers). The study developed during the second semester of the academic year and ended with the final examination in specialized medical language.

The questionnaires had been administered in the classroom, the participation being voluntary.

5.2. Instruments

The medical language course comprises several units. A unit is built upon a basic theme and contains a text, related vocabulary, lexical exercises, conversation topics, written communication topics. In teaching medical language collocations for non-native speakers, various teaching methods and procedures had been used such as: definition, exemplification, lexical exercises, word lists, dictionaries, glossaries, anatomical maps. The course ends with a written exam. At the end of semester, students answered a questionnaire built by us, with close-ended answers. The questionnaire referred to the methods used in the classroom, the types of lexical exercises, and the level of difficulty of the topics and units in the textbooks.

6. Findings

The data registered for the group of students in the preparatory year point out the following: most students acquired a basic vocabulary which will allow them to enrol in the Faculty of Medicine. The results obtained at the final exam showed that 34 students passed with very good grades (9, 10), 21 students with good results (8), 12 students with satisfactory (7) and 3 students with unsatisfactory (4).

The answers given to the question which referred to ranking the means used in teaching medical collocations as regards their efficacy (most important, very important, important, less important) showed that students consider lexical exercises one of the most useful means in learning the new structures of the specialized language (61%). The second place is held by dictionaries and glossaries (18%), then the project (11%), anatomic maps (10%).

In teaching medical collocations, we have focused upon different types of exercises. We presented 7 types of exercises and asked students to choose the first three they consider the most effective. According to students, their favourite exercises are of the type

1. Gripa și hepatita sunt boli..... (astenice, medicamentoase, epidemice)

Vasoconstricția este un răspuns.....(voluntar, involuntar, epidemic)

where their choice refers only to the correct collocate.

2. Each unit contains exercises of the type given below; they are very popular and considered useful by our students; sometimes this type of exercises is required to be solved in a given period of time.

Medic	musculară
Substanțe	toxice
Factor	olfactivă
Funcție	anestezist
Fibră	agresor
Boală	respiratorie
Insuficiență	cardiacă
Mucoasă	vitală

3. For this type of exercises, only the node is given and the winner finds the largest number of collocates in a short period of time.

(A face)/ temperatură, o operație, injecție, roșu în gât, rezumatul bolii-

(Boală)/ gravă, respiratorie, poliarticulară., profesională, mintală, somnului, de sange, cu transmitere sexuală, boală de nutriție, contagioasă, curabilă, letală, incurabilă , cronică, organică

As regards the level of difficulty of current textbooks answers ranged from very easy, easy, difficult but attainable, very difficult. Students considered them difficult but attainable (78%), very difficult (22%). Nobody considered textbooks easy or very easy.

6.1. Discussions

The large number of students who chose lexical exercises as being the most efficient way in learning can be explained through the fact that collocations are new and unknown structures, basically denotative, sometimes very different in the pivot language they can speak (students are often anglophones or francophones); that is why they prefer to use them in exercises and then in contexts which makes the learning process easier. All students use medical dictionaries (usually bilingual ones, online variants) but this is considered a rather informative process; sometimes entries are not given in the context and the meaning of the complex phraseological combinations cannot be derived easily. The project is usually elaborated for written communication and is usually used by the end of a cycle of units (revision) or by the end of semester when students have a certain word-stock. The project presents any subject with a medical topic and can use different medical collocations related to the theme (description of an illness, cardiovascular apparatus, the nervous system, the digestive system, vitamins, etc.). Anatomical maps have a restrictive use and are considered less important at this learning stage; students prefer to communicate in the classroom and study maps and glossaries at home.

We have also noticed that students prefer to define the collocation by means of the medical dictionaries (ex. *Boala contagioasă, este cauzată de un agent biologic (virus, bacterie, parazit, ciupercă,*

insectă) fiind transmisă direct, de la persoană la persoană) and then use it in different contexts. By the end of the second semester they are able to use synonyms(*boală infecțioasă* *boală comunicabilă*, *boală transmisibilă*) and illustrate the concept (ex. *varicelă*, *gripă*, *hepatită*, *pojar*, *tuberculoză*).

An important limit of the study refers to the fact that we did not take into consideration the linguistic background of the students or their native language; it seems that students who speak French understand some terms better due to the common Latin origin of medical terms and to calques borrowed from French. As groups are heterogeneous, we often notice differences in the reception of terms.

7. Conclusion

The present study proposes to identify the most efficient means of teaching medical collocation for the students of preparatory year. They learn Romanian in order to attend a medical school the following year. Students' answers showed that at this level, lexical exercises of different types, dictionaries, projects help them to become acquainted with Romanian medical language. Also, most students consider that they can manage with the course although the level of difficulty is high. This answer is probably determined by the fact that they are strongly motivated in becoming medical students in Romania.

Learning a specialized language in a non-native language setting does not simply mean to memorize words for different things and concepts. Words and phrases should be used actively in the communication process. The role of the Romanian language teacher is to help students acquire the ability to select information, to understand correlations among terms, to avoid collocational errors, to learn new words and phrases and use them in proper contexts, to improve the informational universe which will help them develop their career and their personality.

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