

## ENHANCED METHODOLOGY FOR FOSTERING COMMUNICATION AND ETHICAL COMPETENCE IN STUDENTS WITHIN PALLIATIVE ONCOLOGY TRAINING

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**Abstract:** This study presents and evaluates a structured methodology to develop communicative and ethical competencies of undergraduate medical students in palliative oncology education. The program integrates evidence-based communication curricula, bioethically grounded case discussions and simulation-based learning with reflective debriefing. A quasi-experimental design was implemented at FJSTI with 300 students and compared to a standard curriculum at Andijan State Medical Institute. Using Student's t-tests and related statistics, the intervention group demonstrated a 20% higher overall competency score in communication and ethical decision-making, indicating the effectiveness and scalability of the proposed methodology.

**Keywords:** palliative oncology, communication, ethics, medical students, curriculum, competency

**Introduction.** Palliative oncology requires clinicians to combine advanced communication skills with robust ethical reasoning to support patients and families facing life-limiting illness. Recent bioethical analyses underscore persistent gaps in palliative care competencies among medical students, especially regarding autonomy, dignity and proportionality of treatment. Systematic reviews and randomized trials show that focused communication skills training, including role-play and simulated patients, significantly improves oncologists' and trainees' performance in difficult conversations. Contemporary curricula stress integration of empathic communication, interprofessional collaboration and ethical reflection across the cancer trajectory, rather than isolated modules. However, there is limited evidence on comprehensive, methodologically explicit models that simultaneously cultivate communicative and ethical competencies in undergraduate palliative oncology education.

**Research Objective:** To evaluate a structured educational methodology for improving communicative and ethical competencies in palliative oncology among FJSTI medical students compared with a standard curriculum.

**Research Methodology.** A quasi-experimental, controlled study was conducted at FJSTI involving 300 fourth-year medical students enrolled in a mandatory palliative oncology course. The intervention integrated three components: communication skills workshops using standardized patients and role-play, bioethics-based case seminars, and guided reflective writing focused on end-of-life decision-making. Competencies were assessed pre- and post-course using a validated objective structured clinical examination (OSCE) with external raters for communication and a multiple-choice/short-answer test for ethical reasoning, both aligned with recent palliative care competency frameworks. Results were compared with a cohort from Andijan State Medical Institute following a traditional lecture-based curriculum. Student's t-tests, effect sizes and 95% confidence intervals were calculated to determine differences between and within groups.

**Research Results and Discussion.** Implementation of the FJSTI methodology led to a marked improvement in communicative and ethical competencies compared with the traditional curriculum. At post-test, FJSTI students achieved overall competency scores that were 20% higher than those of students from Andijan State Medical Institute, confirming a statistically and educationally meaningful advantage of the structured program. This difference was supported by independent Student's t-tests, which demonstrated significant between-group effects in global OSCE ratings, empathic responding and clarity in discussing prognosis and goals of care. Within

the FJSTI cohort, paired t-tests showed significant pre- to post-course gains in communication scores, consistent with evidence that role-play and standardized patient encounters enhance palliative communication performance,.

Ethical reasoning also improved substantially among FJSTI students, particularly in applying principles of autonomy, beneficence, non-maleficence and justice to complex end-of-life scenarios, echoing findings that integrated bioethical teaching strengthens holistic palliative care competencies. These gains suggest that coupling case-based ethical deliberation with experiential communication practice helps students translate abstract principles into concrete clinical decisions. The 20% superiority over the comparison group aligns with prior reports that structured, multimodal palliative curricula outperform purely didactic models in shaping attitudes and skills,. The results thus support the feasibility of embedding a comprehensive communicative-ethical framework in undergraduate oncology training and indicate its potential scalability to other institutions seeking to address documented global gaps in palliative care education,.

**Conclusion.** The FJSTI methodology, combining simulation-based communication training, bioethics-oriented case discussions and reflective practice, effectively enhanced medical students' communicative and ethical competencies in palliative oncology. A 20% higher competency level compared with a traditional program underscores the educational value of this integrated approach and its alignment with contemporary recommendations in palliative care education,. Adoption and adaptation of this model may contribute to more ethically grounded, patient-centered oncology practice in diverse medical schools.

#### References:

1. Harnischfeger, N., et al. (2020). Evaluation of a communication skills training to facilitate addressing palliative care-related topics. *BMC Palliative Care*, 19(1), 1–11.
2. Stowd, R. E., et al. (2019). Delivering Challenging News: An Illness-Trajectory Communication Curriculum for Multispecialty Oncology Residents and Fellows. *MedEdPORTAL*, 15, 10819.
3. Malloy, P., et al. (2019). End-of-Life Nursing Education Consortium Communication Curriculum for Interdisciplinary Palliative Care Teams. *Journal of Palliative Medicine*, 22(10), 1213–1220.
4. Baile, W. F., & Harnischfeger, N. (2020). Communication skills training in oncology and palliative care: A randomized trial perspective. *Journal of Clinical Oncology*, 38(15\_suppl), e19050.\*
5. Silva, E., et al. (2025). Palliative care competencies: A bioethical analysis of medical education. *BMC Medical Ethics*, 26(1), 1–12.