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**DIAGNOSTICS OF EDUCATIONAL ACHIEVEMENTS IN TERMS OF  
COMPETENCE-BASED APPROACH**

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**Diagnostics as a tool the formation of intercultural and communicative competence** The problem of diagnostics in foreign-language education is still poorly understood. Pedagogical diag-

nostics in the university is a whole system with numerous components, internal and external connections. Diagnostic work is carried out to determine the level of students' mastery of the intercultural communicative competence in accordance with the requirements of the State Compulsory Standard of Education of the Republic of Kazakhstan, and to identify the elements of content that cause the greatest difficulties for students. At this stage, intercultural communicative competence diagnostics is not applied at the proper level, as teachers do not know the methods of diagnostics well enough, and there is no system of diagnostic tools.

Educational monitoring involves continuous monitoring of the state of the learning process: collection, processing, analysis and dissemination of information on the state of the pedagogical system. Diagnosis as a monitoring tool enables each student and teacher to obtain the necessary information on the progress and results of the educational process for its timely correction. [1] Thus, the new concept of diagnostics, which objectively reflects the needs of modernity, which is seen as a process and is a broader concept that includes monitoring, is monitoring diagnostics. (A.I. Pulbere, V.V. Derkach, S.A. Rusinova, etc.) [2, p. 248].

There are many methods for conducting pedagogical diagnostics. In foreign-language education, diagnostic tools are, for example, tests of reading skills. [3, p.10] An example of diagnostic activity is the systematic observation of the teacher of his students. The educator uses observations in the classroom and an unofficial student report (self-evaluation report) to make decisions about what to do next. This includes providing students with feedback on their learning activities and achievements. The teacher can also change or adapt the learning objectives according to the needs of the learners.

However, the development of appropriate tools/mechanisms of diagnostics of competencies is connected with great difficulties, as there are actually no scientifically grounded level criteria of selection of values (qualitative, quantitative) for the formation of the scale of educational activity of students [4].

The difficulty of diagnostics is that it is necessary to take into account the individual characteristics of students, as the causes of problems may be different. [5, p.17] Also, teachers usually do not follow all the stages of diagnostics. According to Ch. Alderson et al., the diagnostic process should be based on four stages: first, on the students' hearing and examination; second, on an approximate assessment; third, on the utilization of diagnostic tools, tests, and expert help; and fourth, on the decision making process.

In order to improve diagnostic methods, it is necessary to specify the requirements for the training of students in order to correlate the actual results of education with the planned goals. Thus, for example, the requirements to the results for the purpose of diagnostics are set taking into account the development of taxonomy, which includes the content aspect, as well as the levels of its development by students, which can be further specified within the framework of objective and subjective methods of evaluation. Diagnostics of learning achievements in the development of educational programs defined in educational standards is also carried out on the basis of the criterion-evaluation approach. Diagnostic criteria may include requirements for the development of educational programs or educational outcomes. Diagnostic criteria include descriptions of actions or activities that indicate the achievement of an educational result. When drawing them up, one should warn against incorrectly drafted, unspecific or ambiguous diagnostic criteria. It is necessary to present the criteria of diagnostics of educational achievements to the students before the beginning of the evaluation process.

The term “diagnosis” has Greek roots and means di“a” – through and “gnosis” – knowledge. Although since the Renaissance, diagnosis has been accepted as a medical term for disease symptoms, it has long been used in many scientific fields, including psychology, pedagogy and others. A recognized authority in the field of pedagogical diagnostic testing in many school subjects is the American E. Thorndyke (1874-1949).

“Diagnostics, in a broad sense, is a special kind of knowledge between scientific knowledge of the essence and the recognition of a single phenomenon. The result of this knowledge is a diagnosis (from Greek diagnosis – recognition), i.e. the conclusion about belonging to the essence ex-

pressed in the singular”. Diagnostics provides timely feedback and correction of possible deviations in the educational process, as well as identifying the cause of these deviations, thus providing flexibility in the management of the educational process.

Diagnosis is essential to the effectiveness of the learning process, to obtaining reliable information about students' activities, and to increasing their self-esteem and motivation. Different types of diagnostics are used in practice: medical, technical, psychological, social, pedagogical diagnostics, etc.

“Pedagogical diagnostics is a special type of activity, which is the establishment and study of the attributes that characterize the state and results of the learning process, and allows on this basis to predict possible deviations, to determine the ways of their prevention, as well as to adjust the learning process in order to improve the quality of training of specialists”. [6, p.325] Thus, the purpose of pedagogical diagnostics is to provide feedback in the educational process.

The most modern and more universal definition of the term diagnostics is given in the Encyclopedia of Epistemology and Philosophy of Science: it is "cognitive activity consisting in comparing the observed features of the object under study with the system of a priori (normatively) given empirical features with the purpose of its identification and subsequent projection on this object of the previously obtained factual and nanological knowledge about it or objects of the same type". [6, p. 179] This means that diagnosis consists in forming a cognitive image of the object under study (or the object sought). Within the framework of this work, diagnosis is the creation of a cognitive-communication profile (image) of the intercultural communicative competence.

Thus, the purpose of diagnostics is to obtain immediate data on the state of the diagnosis object in order to make timely corrections in the educational process. Diagnostic results are necessary for making the right decisions, so it is necessary to understand the categories and terms concerning the object of diagnosis.

#### **Diagnostic structures of intercultural communicative competence**

O. Efremov considers five components in the system of pedagogical diagnostics in the university: purpose, content, object of diagnostics, means of diagnostics and subject of diagnostics. [7] Thus, the analysis of diagnostic structures proposed in the psychological and pedagogical literature has allowed us to identify a number of basic components in the diagnosis of intercultural communicative competence, which are presented in Table 1.

Structural components	Content
The purpose of intercultural communicative competence diagnosis	Identification of problems in the formation of the intercultural communicative competence and subsequent correction
Diagnostics subjects	A teacher, a student.
Diagnostic object	intercultural communicative competence, sub-competencies
Contents of the information to be diagnosed	Skill descriptors in the intercultural communicative competence subcompetence
Diagnostic tools	questionnaire

Table 1– *Structural components of the intercultural communicative competence diagnostic process*

The transformation of the goals in foreign-language education from the study of language as a system, then language as a means of communication, to the tool of cognition of another culture [8, pp. 122; 6, pp. 10-31] has put the formation of intercultural-communicative competence in the first

place, presenting culture and language as its basic elements, “culture through language, language through culture”. [6, p. 50]

According to Jan van Eyck, the communicative competence considered in its close interrelation with the socio-cultural includes the following subcompetencies [6]:

- Linguistic competence (knowledge of vocabulary and grammar);
- Socio-linguistic competence (ability to use and interpret forms of language depending on context / situation)
- Discursive competence (ability to understand and logically build individual statements)
- Strategic competence (ability to compensate for lack of knowledge using different strategies);
- Socio-cultural competence (a certain degree of knowledge of the socio-cultural context);
- Social competence (willingness and readiness to interact with others).

The most detailed structure of communicative competence is given by L.F. Bahmann and includes: [9, pp. 84-94]

- Language (linguistic) -pragmatic
- Organizational (grammar and textual competence) -strategic (evaluation, planning and implementation)
- Psychological mechanisms.

**Implementing diagnostics in terms of competence-based approach.** Ensuring the effectiveness of educational process management in foreign-language education is possible with the full use of the intercultural communicative competence’s didactic possibilities of diagnostics (diagnostic assessment) as the intended end goal and educational result, as the quality of education in the competence approach implies the result-aimed focus of education on the formation of competencies.

Diagnostics of the formation process, the intercultural communicative competence is a process of collecting information on how well the learner knows the language and can use it in practice. The first step in designing a diagnostic questionnaire is to define what it means to have sufficient/excellent language training. At this stage, it is the formation of the intercultural communicative competence that is the main indicator of the mastery of a foreign language by the student. The Council of Europe (2016) also advocates that education should enable learners to participate as active citizens in democratic and multicultural societies and increase their chances of success in working life. [10]

To develop diagnostic tools, it is necessary to know the theory of pedagogical measurements, methods of control and to ensure maximum objectivity of procedures and methods of evaluation by developing valid tools. It is also necessary to take into account the level and stage of the educational process, to determine the evaluation criteria and measures to eliminate deficiencies in the results of diagnosis.

The following diagnostics of the intercultural communicative competence should be carried out:

- Initial (input) diagnostics - to determine the potential the achievability of the objectives and possible problems for planning Actions to correct the discrepancies detected during the diagnostics;
- Current diagnosis - to identify difficulties in a timely manner and solving problems in the cognitive activity of students, and making necessary changes in the educational process.

To effectively implement intercultural communicative competence diagnostics in the training process is necessary:

- Establish clear learning outcomes,
- To determine the appropriate tasks for this,
- Evaluate the regular learning activities of learners and encourage them self-assessment of their own results and needs,
- Provide effective feedback, both positive and negative, on related to further development,
- To adjust the learning outcomes.

**In conclusion**, the solution to the problem of developing diagnostics of intercultural communicative competence formation requires systematization of the conceptual apparatus and analysis of its development history, as well as the current state. The first chapter of this work presents a discussion of the theoretical foundations of diagnostics of educational achievements (competence, intercultural communicative competence) and relevant literature on the main tasks and key issues of work over the past decades.

Diagnostics of the level of students' intercultural communicative competence formation provides efficiency of foreign-language educational activity and increase of students' motivation. Diagnostics of the intercultural communicative competence is a mandatory component of the educational process. Diagnostics is aimed at identifying the achievements and shortcomings of students. Diagnostics has a complex structure and includes the assessment, accumulation of data, their analysis, and reflex, revealing the dynamics of educational and personal changes and forecasting the further development of events.

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