

FUNDAMENTALS OF DISCOURSE FORMATION

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ANNOTATION

In this article, discourse is considered as a concept that allows for two different pronunciations of the word. It has been argued that discourse serves to illuminate the process of communication in a variety of professions to date.

Keywords: discourse, conversation, speech, allegorical, cultural artifact, optimization, speech, related speech.

INTRODUCTION

Discourse means discussing this topic on a regular basis. Discourse is a method of using language that is formed and defined based on rules structured according to context and context. In the linguistic literature, the term "discourse" does not have a definite meaning, but the range of events it represents is very wide, from "part of the text" to "speech". Turning to the basic theory of linguistics, the central definition is "discourse." The term is used not only in the humanities, but in many fields, because it has all the features of a polysemantic concept. In other words, although discourse is widely used in text linguistics, literature, sociology, political science, philosophy, logic, psychology and medicine, it is also a unique unit in text linguistics. The terms "discourse" and "text" are the same. Assuming that it is used for a concept, then "text" is used for written communication and "discourse" is used for oral communication. But first of all, what is the etymology of this word? In what sense is discourse often used?

Of course, there is some interesting information about the term "discourse".

Discourse is a concept that allows the pronunciation of a word to change in two ways. That is, you can pronounce "speech" by emphasizing the first syllable, but you can also focus on the second syllable. In the second case, you can understand the discourse, which is more scientific and generally accepted. The history of this concept goes back to the 5th century BC, when the Latin word "discursus" was used. Then, at the beginning of the emergence of the main philosophical currents, the meaning of the term was limited to very simple meanings - such as "idleness, confusion, rotation, maneuvering, running" but over time. As a result of the development of philosophical thinking and linguistic activity with the teeth, the concept of speech also began to be enriched with new semantic nuances.

Thus, in the time of the ancient Greek thinkers, especially Plato and Aristotle (fourth century BC), the word "discourse" was used as a concept of "thinking, and intellectual concept" and "debate, and controversial concept." And over time, after the practice of allegorical use in the sense of "conversation, speech, conversation, use of language," this definition has a modern meaning, which is used in most modern languages. . Discourse serves to illuminate the process of communication in a variety of professions to the present day. We also believe that discourse is theoretically interdisciplinary.

1. Semantic discourse is a conceptual generalization of each aspect of communication and dialogue within the content in this analysis.

2. Legal, medical, or religious discourse, on the other hand, embodies the generality of systematic discourse used in specific areas of intellectual research or social conventions. Discourse can also be seen as a performance of language, but these ideas are also extremely limited. For example, if we look at the medical analysis of discourse, we can see the social conventions that are observed in the process of communication between the patient and the health worker.

Medical discourse is the communication between the medical staff and the patient in the context of a perfect and communicative interaction. Nowadays, there is a growing interest in medical discourse. At the same time, the number of medical publications, websites and forums filled with medical terms and concepts is growing.

Patients who are interested in their own health often turn to various sources for help, where they try to find answers to topical questions. Because they do not always understand a particular medical text, patients do not always trust the doctor, often leading to misunderstandings in these cases. The communication between doctor and patient requires a special approach and discursive technological methods that have a deliberate therapeutic effect on the person.

From the above it is possible to see the peculiarities of medical discourse. It includes written and oral methods of medical discourse.

First, medical discourse is a medical text, often a specialized medical publication that talks about a disease, its diagnosis, treatment, prevention, and so on. The purpose of the medical discourse is to share experiences in the medical world, to reveal the research data of some experts. Participants of the scientific medical discourse include specialists, practicing physicians, medical staff, students of medical institutions.

Second, scientific and popular medical discourse is divided into discourse genres, consisting of scientific articles, monographs, commentaries, and lectures. All of them are aimed at providing the perfect medical care to the patient.

Third, medical discourse is a specific way of presenting specific medical terms, a special form of communication with a patient, where the physician explains a specific problem related to the patient's health in plain language. The linguistic role of physician-patient communication is that the use of reading literature and the medical discourse of communicating with the physician are characteristic of the linguistic orientation and allow the patient to believe in treatment and recovery, even in the presence of a serious illness.

In short, the characteristics of medical discourse are:

two actors: doctor and patient,

two types of discourse: oral and written,

two types of publication: scientific and popular,

several genres of discourse, medical discourse is to explain to the patient that only the physician, his knowledge, experience, and desire will help to overcome the disease when medical care is given directly to the patient.

After the conversation with the doctor, the patient feels better, which, in addition to medical praise, increases the patient's confidence in the doctor.

This is because the concept of speech is used instead of language in a way that encompasses the non-linguistic dimensions of all communication methods. As we explore many aspects of discourse, we explore and apply the comparative aspects of the discursive views of world scholars in world linguistics. It uses the term "discourse" in many of the world's scholarly works on textual problems. Michel Foucault, a French scientist who lived and worked in the twentieth century, was the greatest contributor to the development of this concept in the field of critical theory. Given that language, text, and speech are no longer the basis of innovative methodological schemes, these terms are used as a metaphor for a universal principle that allows for the interconnection, measurement, and optimization of cultural artifacts that have traditionally been considered qualitatively diverse. used. It represents a system of statements produced by the practical power of speech as a system that supports certain social rules at any point in history.

The fact that the French historical philosopher Michel Foucault expressed discursive practice in his views with discursive practices and discursive complexes shows a significant change in the author's methodological position. It is not just a matter of renaming old concepts ("epistema"), which is almost unheard of in Foucault's later works. By analyzing examples of discursive practices from data archeology, it contributes to the reduction of arbitrariness in the selection of certain facts in words and things, and instead of referring to authors and works, the "authorship function" in works of different historical periods offers a research program. The internal uniformity of the epistemic space is replaced by the ability to identify multilevel discursive practices and their interrelationships. Interpersonal gaps, on the other hand, have the ability to understand, along with other changes in the structure of discursive complexes.

It explains not only what can be said at any given moment, but most importantly, what can not be said through the concept. Initially, the terms "discourse" and "text" were used interchangeably, but later "text" was used for written communication and "discourse" was used for oral communication. It should be noted that in recent years there has been a growing interest in the study of related speech or discourse in a number of humanities and social sciences. Discourse can be used as a synonym for 'related speech'. Related speech, of course, means text, and it seems that the terms "text" and "discourse" are used interchangeably. It is also common to use the terms "text" and "discourse" to refer to different concepts.

The word "discourse" can be a term meaning "part of a text," but it is used in many linguistic literatures where the problem of text is studied from different perspectives. ", "Sentence", "syntactic complex", "monologue sentence", "communicative block" and so on. The purpose of these comments on the term "discourse" is to emphasize that the original meaning of the word is "speech", "speaking", that in the literature the term is used as a synonym for "text", and thus the text is both written and og. It was to emphasize once again that Zaki could be too.

This means that the text is a complete speech, whether oral or written. The view that text is a unit of both language and speech, as noted above, is recognized by the vast majority of researchers. Just as speech patterns exist in language, and the direct realization of these patterns occurs in speech, there are general rules, patterns, and "formulas" for creating text in

a language system. Based on these patterns, a text is created in the speech. Therefore, if speech is both a language and a speech event, then the text is both a language and a speech event. It is true that the laws, rules, and categories of speech cannot be directly applied to the text. Because, as has been said, the text is larger than speech, a higher communicative unit, and in its creation there are completely different laws.

As OL Kamenskaya rightly points out, the fact that the structure of the text is limited by the laws of language is quite weak, and this feature allows to express in detail the most complex idea in a large text. However, despite the fact that the structure of the text is weakly limited by the laws of language, the relationship between its charters is mandatory, and at the same time this relationship is unique. There are general rules for composing texts, of course, but the nature of these rules differs from the rules of sentence construction in that they are relatively weak. But when it comes to language and speech, it is natural that there are some similarities between speech and text.

The German linguist W. Dressler described the text as a unit of the language system ("text", "potential text", "emic text") and the text as a unit of speech. is also displayed as M.Helliday considers the text-creating function of language to be organically specific to language, among other basic functions.

He looks at it as it is and says that it cannot be limited to the scope of speech. In general, it can be said that the idea that text is both a unit and a unit of speech is quite common today. In linguistics, the question of the levels of language structure is known to be important for any research. In the process of language research, phonological, morphological, syntactic and lexical-semantic levels are distinguished at different stages of analysis. Where does the text appear in the hierarchy of these levels? In general, can text be a separate layer of language structure? For a long time, before the widespread development of text linguistics, one idea prevailed in linguistics, that is, it was recognized as the highest unit in the hierarchical (hierarchical) structure of language units.

For example, the famous French linguist E. Benvenist states that a sentence can be segmented, but it cannot be considered as a component of any other higher-level unit, and writes: "A sentence can only be derived from any other sentence. coming before or after may be in a series relationship with them. A group of sentences cannot form a separate level unit relative to the level of speech. There is no language level above the categorical level."

Russian linguist M.Ya. Blox, studying the relationship between language units and language levels as a whole system, pays special attention to the essence of the hierarchy, from the smallest unit of language to the largest unit - the text. In particular, it articulates clear and well-founded ideas on the relation of speech and text to language levels. He calls a sentence a proposema as a unit of formation (from the word "proposition", which represents the semantic basis of a sentence) and states that the proposematic level is not the last upper limit of the language sign segment, but a "supraproposematic level" formed by the syntactic combination of independent sentences.

Some researchers say that the text can be considered as a separate level, but at the same time, the text can be a level of speech, not language. Emphasis is placed on the systematic nature of the text as a phenomenon of speech. From this point of view, it is natural that logical text should

be viewed only as a speech phenomenon, not a linguistic phenomenon. However, the fact that the text is, in essence, first and foremost a linguistic phenomenon, is a fact that is almost recognized in today's linguistics. There is also a stereotype in linguistics that the text is the primary and primary language symbol. Therefore, it is difficult to agree that the text refers only to the level of speech.

In this regard, OL Kamenskaya's book "Text and Communication" makes a comparison to show the existence of a separate text level in the language system. According to him, the level of participation of language units in the communicative task is also the basis for the stratification of the language system. It is for this reason that he argues that one of the acceptable principles for distinguishing and justifying levels in a language system may be to compare the structure of language with the structure of knowledge. According to him, the amount of knowledge accumulated by mankind is enormous, and this knowledge has a certain content. In the model of knowledge structure, the highest generalized level can be conditionally called "total knowledge of the world". Total knowledge of the world is divided into specific sciences (such as linguistics, physics), as well as everyday life, which is the highest level. Specific knowledge in any field of knowledge is always included. It consists of some scientific rules (theories) and facts - "fragments of knowledge" that form another level in this model. Fragments of knowledge, in turn, are made up of knowledge about certain objects and the relationships between them, which constitute another separate level in this model. Sentences, on the other hand, are made up of elementary knowledge about concepts or relationships between them that create a lower level of knowledge. Concepts, in turn, consist of incomplete concepts about the object or relationship that make up the elements of the next level. The next level, so to speak, is the level of differentiation.

In the process of studying the discursive analysis of the above world scientists, our scientists also have their own historical and national views and their research on the concept of discourse, first of all, on folklore, monuments "Avesto", "Orhun-enasoy". , Turan's epic about the Alpine land Tunga (VII century BC) written in BC and other written monuments, goes back to the history of our people. These important sources in the study of the socio-economic life, culture and language of our people are also valuable for their richness of materials that encourage eloquence. Oratory certainly not only dramatically develops communication, but also highlights the possibilities of discursive communication in a variety of professions.

It is worth noting that above we have studied a number of professional discursive views, as well as analyzed the strategic tactics of medical discourse.

The purpose of a medical discourse is to help the patient, that is, to diagnose, treat, and explain to the patient how to behave in order to maintain his or her health. The goal is achieved through strategies defined by key intentions. Diagnosis, treatment, and referral strategies are differentiated according to the different stages of the physician-patient relationship.

The strategy of medical discourse is implemented using discourse-behavioral tactics that have an emotional impact on the patient.

Specific tactics for diagnostic strategies are: acquaintance tactics, tactical questioning tactics, rapprochement tactics, explanatory tactics, accusatory tactics, and emotional balance tactics.

Familiarity tactics are those that occur during a patient's referral to a physician through a complaint on the surface of the disease. In it, Shfikor diagnoses the patient by listening to his complaint and determines the treatment and diagnostic strategy. Diagnosis uses a variety of tactics to treat the patient.

Bemor: – Assalomu alaykum, doktor.

Shifokor: – Va alaykum assalom, xo'sh sizni nima bevovta qilatapti?

Bemor: – Salomatchiligimda bezovtalik bor.

Through this conversation, the dialogue between doctor and patient connects to the next type of tactic.

The tactic of knowing and asking for specific information is a special tactic of the diagnostic strategy, the purpose of which is to obtain the necessary information about the patient and identify potential "problem areas". This tactic is done using questionnaires that are characterized by typification: specific questions, counter-questions, retrospective questions, guide questions, repetitive questions, help questions. Question-answer information microdialogs are characterized by rapid rotation of replicas. Incomplete sentences, rare syntactic structures are characterized by the presence of semantic stress, which performs a conceptual function. Properly chosen intonation does not mean that the answer is vague, thus preventing the patient from responding alternatively.

Accusation tactics are not specific to medical discourse in general and are a specific tactic of diagnostic strategy. The purpose of this tactic is to change the course of action, the direction of the patient's thoughts. It requires special non-standard discourse decisions from the doctor in order to understand the strength of his character and the incorrectness of previous decisions.

Emotional balance tactics are important as a means of influencing a patient's overall mood. To do this, the doctor uses attachments - remarks that are not related to the general topic of conversation, reminds of small statements. A characteristic element of the approach tactic is to address the patient by name. Using this tactic is typical for the entire period of communication with the patient, which, of course, helps to establish and maintain contact.

Explanatory tactics are inherent in all strategies of medical discourse. The main task of explanatory tactics is to help the patient to overcome the discomfort and to show the doctor's attitude to the patient. Another function of this tactic is to increase the physician's willingness to prepare the patient for diagnosis. The strategy of medical discourse treatment consists of discourse accompaniment of certain medical manipulations. The goal of the strategy is to provide effective, painless, and convenient treatment. Let's analyze the doctor's most typical tactical steps in implementing a treatment strategy.

Bemor: – doktor axvolim og'irimi? (tushkun holatda)

Shifokor: – Gulnozaxon? Siz ziyoli, tushungan ayolsiz. Kasallik sizni yengib qoyishga yo'l qo'ymang. Aslo yelgilmang! Siz jamiyatga kerakli insonsiz! Amalga oshiradigan ishlaringiz hali juda ko'p. (ohista tushuntirish orqali)

Bemor: – Xo'p. Sog'ayib ketishim uchun nima maslahat berasiz? . . .

This is an example of the above explanatory and comforting tactics.

The consolation tactic is to "remove the depressed moral burden from the patient, return him to his normal state." The communicative purpose of the tactic is to weaken or eliminate the

patient negative emotional state. The effective direction of tactics is important to change the patient's psychosomatic state.

With the successful implementation of this communicative tactic, the patient is subject to discourse and changes his emotional state. Comfort tactics can be implemented through the following communicative actions:

1. Minimize the problem.
2. Refer to someone else's experience.

The structure of comfort tactics is characterized by the presence of emotional-expressive explicatives. With their help, the doctor expresses his conclusion, assumptions, and substantiates them in various ways, and ultimately convinces or persuades the patient.

Thinking tactics and threats are one of the options of general disciplinary tactics. Its essence is to explain to the patient the complexity of the situation (but don't despair!). For example:

The doctor: - This disease can overcome you. You have to be careful. Following these tips will help you avoid anxiety. You should always see a doctor. Don't despair in any case!

Often, the patient is unable to make a realistic assessment of his physical and mental condition. The doctor's communicative competence, the ability to select and apply the best from the arsenal of linguistic tools, helps the doctor to "educate" the patient and prevent mistakes in his behavior. So it is no coincidence that complex sentences with explanatory clauses and clauses about causes, conditions, preferences remain a discourse tool representing enlightenment tactics. The doctor uses threatening tactics to draw the patient's attention to the negative consequences of his inaction.

The strategy recommended in a medical discourse can be oral, written, or a combination of the two. His choice is determined by the purpose of a clear communication between the doctor and the patient. For example, counseling a patient, offering treatment at a hospital or clinic.

Doctor: - To prevent the disease from getting worse, you need to stay in the hospital for a while, under the supervision of doctors and receive treatment. Then we'll let you in, depending on your situation.

The main tactics of the recommendation strategy - the tactics of focusing on the patient's financial capabilities - are characterized by advice, recommendation, instruction, prohibition, order.

The recommended strategy is to explain the sequence of actions through instructions.

Discourse tactics are based on the method of the task, and the higher the level of culture of the doctor, the more subtle the form of recommendations, the wider the range of advice.

In conclusion, we have analyzed what the concept of discourse is and its types and strategic tactics. We also looked at the views of world scholars on the concept of discourse. These analyzes show that discourse is a platform for boundless communication.

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