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SPEECH THERAPY SUPPORT FOR CHILDREN AT EARLY AND PRESCHOOL AGE WITH SPECIAL EDUCATIONAL NEEDS IN INCLUSIVE EDUCATION

Abstract. The article presents the main changes in the field of preschool education taking place at the present stage, including limited opportunities for getting early comprehensive support for young children with special educational needs at preschool education institutions, reorganization of preschool institutions of compensatory and combined types into general development organizations and implementation of inclusive education as an alternative to special education.

These changes substantiate the urgency of the problem of organization of logopedic support for children at early and preschool age with special educational needs. The aim of this paper is to define organizational and methodological aspects of logopedic work with children at early and preschool age with special educational needs which need total reconsideration in the new inclusive educational environment. This article dwells in detail on new approaches to the provision of speech therapy and training logopedic personnel in the framework of reform of the system of preschool education. Taking into account active introduction of interactive technologies in all spheres of education, special attention is paid to interactive support for cooperation between professionals and parents of children with special educational needs and typically developing children in a common educational environment. In new conditions and requirements specific of inclusive education of children at early and preschool age with special educational needs, the professionals providing logopedic support for this category of children should not have a narrow logopedic profile, but possess broad defectological training.

Keywords: inclusion; children at early and preschool age; special educational needs; speech therapy support; preschool education institutions.

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Cardinal changes that have taken place in the education policy of the Russian Federation during the last 15 years led to restructuring the system of school education. Beginning with the early 2000s, interest to psychopedagogical work with children during the first years of life with developmen-

tal disorders has considerably grown.

Active development at this period of theory, methods and practical aspects of the system of early complex support for children with special educational needs (SEN) allowed radical changes in the approach to early diagnostics of deviations in the devel-

opment from ontogenetic indicators to remedial developing work with children starting with the first years of life aimed at stimulation of social, cognitive, communication and sensory skills [10; 11; 13; 14].

It was a period of active formation of theoretical foundations of support for the main lines of early complex assistance to children with SEN and testing various methods worked out by different specialists in this sphere: E. R. Baenskaya, O. E. Gromova, I. Yu. Levchenko, N. N. Malofeev, K. L. Pechora, G. V. Pantyukhina, O. G. Prikhod'ko, Yu. A. Razenkova, E. A. Strebeleva, N. D. Shmatko.

Local education authorities initiated opening of such centers for infants, early childhood and junior preschool children with developmental disorders and without them as groups of temporary stay, centers for support of children's playing activity, services of early assistance, lekoteks and counseling centers on the basis of preschool education institutions.

The creation of the given centers was rather urgent in connection with the growing birth rate and the corresponding proportional growth in the number of children with deviations in development including children with neurological pathology [1]. Active inclusion of children at the first years of life and their parents in the system of psycho-pedagogical support at this stage allowed overcoming insignificant and mild deviations in development or maximally smoothing pronounced symptoms of dysontogenesis at later ages – at preschool and junior school age, and preventing secondary devel-

opmental disorders.

Unfortunately, subsequent reconsideration of approaches to the budgetary financing the sphere of preschool education and re-orientation of preschool educational institutions towards the priority of provision of educational services for typically developing children significantly limited the chances of getting the necessary systematic psycho-pedagogical assistance by children with SEN during the first years of life [11].

Many preschool institutions of combined and remedial kinds were reorganized into general development educational institutions which was followed by closure of a considerable part of remedial groups, centers for support of children's playing activity, services of early assistance, lekoteks, etc. As a result, the number of children with SEN who could get psycho-pedagogical support at the early and preschool age from support specialists of various profiles also declined. Special education became neglected; the approaches to early psycho-pedagogical support provision in a united education environment including logopedic assistance on the basis of preschool institutions have changed [11].

Recent years have seen an initiative to merge preschool and school institutions into large general education complexes which led to engulfing the majority of the remaining special remedial organizations and their losing the status of separateness and independence. At present, a promising line of work in such educational complexes is *inclusive education* of children with SEN which has become an alternative to the system of special

education [5; 15].

Analysis of the literature on the methods and practical activity about implementation of inclusive education in educational institutions shows that the following aspects of inclusive education as a promising line of work in the systems of foreign and domestic education have been worked out more thoroughly: theory and methods of inclusive education (N. N. Malofeev [7]); general problems of the conception of inclusive education (S. V. Alekhina, T. P. Dmitrieva, P. R. Egorov, N. M. Nazarova, O. G. Prikhod'ko, N. Ya. Semago, M. M. Semago, N. D. Shmatko); and principal aspects of psycho-pedagogical support for the process of school education of children with SEN alongside with their typically developing peers (S. M. Alekhina, T. G. Bogdanova, N. M. Nazarova, O. G. Prikhod'ko, D. E. Sheveleva, I. M. Yakovleva). Inclusion of children with SEN at early and preschool ages is a perspective topic for investigation and discussion at the present moment and needs active research.

At an early age a baby with special educational needs displaying a delay in psycho-motor development does not stand out on the background of his typically developing peers as evidently as a preschool and school child. At early childhood children acquire cognitive, speech and motor skills at their own pace. According to specialists, about 83% of all children have perinatal damage of the central nervous system as a result of influence of various negative factors during fetal development, birth and early development [1].

As a result, children during the

first years of life often display various deviations in development which can take the form of *non-specific* or *specific* delay of one or several lines: cognitive, speech, motor and social (O. G. Prikhod'ko [2]).

It should be noted that it is possible to single out among children with SEN such categories that show vivid symptoms of developmental deviations even in the first years of life. They stand out on the background of their peers due to the peculiarities of behavior and communication, and display marked problems in the development of cognitive and speech spheres and in their appearance. They include children autism spectrum disorders, Down syndrome and expressed sensory disorders (auditory and visual malfunctions).

Thus, the contingent of the children at early and junior preschool ages is represented by the following categories of children who are taken care of by the support specialist taking into account the specificity of their development:

- children developing according to the age norm;
- children of the “group at-risk” as a result of influence of various negative factors during perinatal development;
- children with mild deviations in development due to perinatal damage of the central nervous system;
- children with marked deviations in development (with cerebral palsy, Down syndrome and other genetic disorders, autism spectrum disorders and with clearly expressed sensory disorders: auditory and visual ones).

For seven years we have observed more than forty children at early and junior preschool ages with various deviations in development and different degree of their manifestation in structural units of educational institutions of Moscow: at groups of temporary stay, services of early assistance, centers for support of children's playing activity, and nursery and junior preschool groups. Inclusion of such children in the environment of typically developing peers needs individual approach in each concrete case.

Realization of inclusive education in reference to children with special educational needs should be based on the conception of "inclusive society" and presupposes a change in the society's and its institutes' consciousness and mentality, on the one hand, with the purpose of creation of conditions for effective inclusion of persons with SEN into the surrounding community, and, on the other hand, with the aim of preparation of the community to accept such persons on equal conditions with other members without developmental problems [5]. Inclusive education of children at early and junior preschool ages with SEN makes it possible to concentrate attention on the formation of their personality by means of providing more favorable and comfortable conditions for their socialization, adaptation and self-development.

Inclusion of children with SEN in early and junior preschool ages in the environment of typically developing peers with correctly organized psychopedagogical support makes adaptation and socialization of children of this category significantly easier at the time of

their transition to school education, lowers the level of their parents' anxiety, and facilitates the formation of tolerant attitude to them of typically developing peers and their parents. It is necessary to note that many parents of typically developing preschool and school-children believe that the presence of a child with SEN in the group has a negative influence on the process of education in general, lowers the quality of education of their typically developing children and worsens the psychological environment in the class.

In this case, it is necessary to carry out counseling both with the parents of children with SEN and with the parents of typically developing children.

Counseling should be aimed at the formation of psycho-pedagogical competence of the parents in the sphere of questions connected with deviations in psycho-physical development of children, acceptance of the situation of inclusion of children with SEN in the children's collective and tolerant attitude to the families bringing up children with developmental problems. Thus, it is necessary to carry out specially organized preparatory work while realizing inclusive education of children at early and junior preschool ages with SEN in an educational institution with the following participants of the educational process: children with SEN and their parents, typically developing children and their parents, and specialists and pedagogues working in the given educational institution.

Analyzing manifestations of deviations in the development of children at early and junior preschool ages

we would like to note that speech dysontogenesis is considered to be the most widely spread variant of problematic development of a child. Many parents of children at an early age when turning to support specialist point out first of all the problems of the child's acquisition of speech habits, the absence of means and sometimes even need of speech communication. Such problems of the early age are qualified as *delay of speech development*. At preschool age, apart from a severe speech disorder when speech impediment is primary, any other variant of dysontogenesis (intellectual disability, locomotor disorders, sensory disorders (impairments of visual and auditory functions), autism spectrum disorders or severe multiple developmental disorders) is associated with systemic speech underdevelopment as a secondary deviation in the structure of defect.

Thus, one of the special educational requirements of children at early and junior preschool ages with SEN is the need of logopedic assistance taking into account the peculiarities of cognitive, communication (including speech) and motor development [3; 4]. Without speech communication inclusion of children with SEN in the group of typically developing children is practically impossible.

It should be pointed out that organizational-methodological aspects of logopedic work with children at early and junior preschool ages with SEN in new inclusive educational conditions need global revision. Let us consider some aspects of logopedic support which need new approaches to their realization in the conditions of

preschool education reform.

1. *Diagnostics of children at early and junior preschool ages with SEN* needs to be re-considered due to the fact that diagnostic procedures carried out with children with SEN on the basis of an educational institution cannot be limited to logopedic observation only as detailed diagnostics of the state of all basic lines of development is necessary for the assessment of the structure and mechanism of disorder [2]. The teacher-logopedist should have a good command of complex psycho-pedagogical diagnostics technologies for determination of the general picture of development of the child with SEN as the general education institution may not have a teacher-defectologist on the staff. Logopedic diagnostics is an inseparable part of complex psycho-pedagogical observation but its results are not enough for the formation of a concrete psycho-pedagogical conclusion corresponding to a concrete situation. An important aspect of psycho-pedagogical diagnostics for children at early and junior preschool ages with different variants of dysontogenesis is not the assessment of the state of speech development but rather revealing first deviations or preservation of cognitive development, and only then the formation or deficiency of the speech and motor spheres. Practice shows that the logopedist should expand the field of diagnostics activity and function as a logopedist-defectologist in response to the requirements of the situation and the parents.

2. Special approach is necessary to the process of *working out a special individual-oriented program of*

remedial developing work with children at early and junior preschool ages with SEN [3; 4], included in a group of temporary stay or a center for support of children's playing activity, in a group of typically developing peers or a preschool general development group. Such program should be a constituent part of the adapted program of training and upbringing for the given child at an educational institution. The adapted education program is worked out by a joint effort of teachers (kindergarten teachers, heads of pastoral team) and support specialists (logopedists, psychologists, defectologists and social pedagogues). The program is aimed at the adaptation of the child with SEN to the preschool structural unit of an educational institution, at his socialization in a children's group of typically developing peers, at overcoming or smoothing developmental disorders, stimulation of various lines of development, formation of universal learning actions necessary for teaching children and preparing them for school.

While making up the individual-oriented program of remedial developing logopedic work the logopedist should take into account the child with SEN's structure of defect. With different variants of dysontogenesis it is necessary to lay accent on not just speech development, but on the formation of motivation to communication and development of non-verbal and verbal skills of communication of the child with SEN [3; 4]. It is especially important while working with children at early and junior preschool ages when the given skills begin to be formed and the level of their development will in-

fluence the communicative behavior of the child in his future life [12].

Further on, over the whole period of inclusive education, individual education of children with SEN is carried out in accordance with the corresponding sections of the remedial developing program. Inclusion of children with SEN in the group of typically developing peers at group activity sessions and in free play activity is effected in accordance with the general education program of the structural unit (a group of temporary stay, center for support of children's playing activity, or general development group) on the basis of a preschool educational institution.

3. An important aspect of inclusive education of children at early and junior preschool ages with SEN is made up by *specialty organized work with typically developing children with the purpose of teaching them the techniques of non-verbal and verbal communication with children with SEN* who have problems with communication. While working in an inclusive group the logopedist should work not only with the children with SEN but must also carry out special training of typically developing children to communicate with their peers with special educational needs.

The logopedist (if possible – in partnership with the psychologist) should form the children's motivation to communicate and stimulate the typically developing pupils to interaction with the children with SEN. It is necessary to teach pupils to exhibit tolerant attitude to such children, to understand and correctly interpret the communicative means used by the child

with SEN, to adequately react to the attempts of the child with SEN to get in verbal and non-verbal contact.

4. Special approaches are necessary to *counseling parents, and not only those of children with SEN, but also parents of typically developing peers*. A special role in remedial developing process is allotted to the parents of children with SEN [4; 12; 14]. In the framework of individual counseling of the child with SEN and the members of his family, the specialists (logopedists, psychologists, defectologists and social pedagogues) instruct the parents to correctly communicate with their child, form their motivation to actively participate in a long enough remedial development process and prepare the parents for re-orientation of their system of values taking into account the child's problems and needs. While working together with the parents of the child with SEN, at their first lessons specialists should explain the expediency and suitability of each play-based technique, and provide recommendations for consolidation of a certain speech, cognitive, or motor skill at home.

At the initial stage of remedial work parents must form a motivation to do home assignments in a compulsory manner, and to systematically review the lessons material at home. The next stage in psycho-pedagogical counseling parents is their training which is aimed at acquiring new knowledge and skills necessary for the realization of the individual-oriented program of remedial developing work with the child with SEN in order to prevent the deviations he has.

At this stage, it is absolutely necessary to teach parents the techniques of formation of the child's non-verbal means of communication (looking an adult in the face, understanding various gestures (pointing, inviting, welcoming, saying goodbye, etc.), embracing, etc.). The logopedist provides methods counseling in stimulation of cognitive, speech and motor activity of children, offers the most effective techniques of development of the children's need of speech communication, their adaptation in the society, regulates the communication and interaction between the child and the parents at the lessons on the development of cognitive activity and speech, makes recommendations about the communication between the family members and the child at home.

Special attention should be paid by the parents to the development of the child's addressed speech comprehension (which is a most important basis and pre-requisite of emergence of active speech). The development of visual, auditory and motor-kinesthetic analyzers may serve a positive pre-requisite for the formation and development of speech comprehension. The correct image of surrounding objects is worked out on the basis of visual-motor-kinesthetic perception. Activization of sensory perception facilitates better memorizing those objects and toys which the child actively feels, touches and manipulates.

The logopedist acquaints the parents with the stages of formation of addressed speech comprehension (taking into account certain sequence, growing complexity, level of devel-

opment of impressive speech and cognitive activity). Speech development in the process of formation of the child's cognitive sphere is especially important for the young children with delay of cognitive development and junior preschool children with intellectual disability.

Special attention should be paid by the specialists (pedagogues-psychologists, teachers-logopedists, teachers-defectologists and social psychologists) and kindergarten teachers to the *work with the group of parents of typically developing pupils* of the inclusive school. While working at Moscow educational institutions we found out from practice that at those structural units of educational institutions (e.g. at centers for support of children's playing activity) where parents attend lessons together with the children no conflicts take place. The parents of typically developing children accepted the situation of children with SEN attending lessons together with their children, got very quickly used to it and adapted to it. The majority of mothers of typically developing children very soon began to help the mothers of children with SEN, became initiators of interaction and helped their own children get closer to the children with SEN. In the given parents-children collective there quickly formed amiable attitude to each other and the level of anxiety was rather low.

A somewhat different picture was observed in groups of temporary stay. At the beginning, the pair "child with SEN – his mother" was treated warily on the part of other parents of

typically developing children. As far as possible, they tried to be present at the lessons, and ask questions to specialists and care providers. It was necessary to carry out psychopedagogical counseling of the parents of typical children in this group aimed at the formation in them of tolerant attitude to the child with SEN and his parents. Due to this, it was possible to avoid conflicts between the parents and manifestation of negative behavior on the part of the children. But the wary atmosphere stayed in the group for quite some time.

5. An important aspect of inclusive practice is made up by *the effectively organized interaction between the logopedist and the parents of the children with SEN and typically developing peers*, as well as other pedagogues and specialists working in the inclusive group. Interactive support of all members of the parents and the pedagogical collectives in a united educational space is one of the methods of activization of such interaction [6]. A counseling site oriented to the support of families whose children attend an inclusive school may become one more form of interaction between pedagogues and parents. Various support specialists and pedagogues, including logopedists may provide interactive patronage (or tutoring) of the parents of children with SEN and typically developing pupils of the inclusive group with the help of this site. We used such form of work for three years while working on the basis of Moscow educational institutions. The tasks of the site included the following: improvement of psy-

cho-pedagogical competence of the parents, formation of their preparation for, and stimulation of their active participation in the remedial developing process together with their children, lowering the level of their anxiety and improvement of the psychological climate in the inclusive group.

6. It should be noted that *training pedagogical specialists, and first of all teachers-logopedists* for the new conditions of the process of education and upbringing at a preschool institution *needs other approaches and technologies, different from the old ones* [8; 10]. It is vitally important to form in future teachers-logopedists professional skills and habits in accordance with the new Federal State Standard of Preschool Education and the Professional State Standard of Social Pedagogue and provide knowledge of the content of the Federal State Educational Standard of Primary School General Education for Children with SEN [9]. It is necessary for the logopedist for planning their professional activity at a preschool educational institution; it is primarily imperative while preparing children with SEN for school education, because one of the main tasks of the teacher-logopedist in the process of support of preschoolers with SEN on the basis of a preschool educational institution is their preparation for general primary education. Modern logopedists should possess skills in the field of complex psycho-pedagogical diagnostics, knowledge of the specificity of development of children with different variants of dysontogenesis and the peculiarities of logopedic

work with different categories of children with SEN.

All that has been said argues the necessity of the global reconstruction of the system of providing logopedic assistance to children at early and preschool ages with SEN in general and training logopedic specialists for preschool education in particular. It is necessary to take into account that not all children at early and preschool ages with special educational needs may be included in general education institutions but all should be provided the necessary complex psycho-pedagogical assistance. Consequently, special education ought to keep its positions in the system of preschool education alongside with inclusive education. This will give the majority of children with SEN a chance to get the obligatory education and become adapted to the surrounding society.

It is necessary to ensure early beginning of psycho-pedagogical and logopedic remedial support by specialists having diverse defectological education. A teacher-defectologist capable of providing logopedic support for different categories of children with SEN at early and preschool ages should replace a teacher-logopedist possessing only skills of working with children with primary speech pathology.

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