

# STUDY AND EDUCATION OF PERSONS WITH SPECIAL EDUCATIONAL NEEDS

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## THE MODEL OF FORMATION OF VALEOLOGICAL COMPETENCE OF SENIOR PRESCHOOL CHILDREN WITH GENERAL SPEECH UNDERDEVELOPMENT

**Abstract.** Ensuring successful social adaptation and socialization in the surrounding world and development of the ability to individually complete the tasks and solve the problems connected with the healthy lifestyle to children with disabilities is one of the priority tasks of special education. That is why the formation of the valeological competence of the children of this category becomes especially urgent. The article provides an authored definition of the given competence including the cognitive, motivational-value-oriented and behavioral components.

The authors worked out and tested a complex person-centered model of formation of the valeological competence in senior preschool children with speech impairments. The article describes the aim, tasks and principles of rehabilitation-educational intervention, determines the methods, approaches and content of work towards the formation of the cognitive, motivational-value-oriented and behavioral components in senior preschool children with general speech underdevelopment.

The authors argue that the socio-pedagogical conditions of education in the family and the preschool education institution influence the formation of the valeological competence in children with general speech underdevelopment; that is why the model under consideration includes work with the pedagogues and parents targeted at their education in the issues of health and healthy lifestyle.

**Keywords:** preschool logopedics; children with speech impairments; speech impairments; valeological competence; children's health; senior preschoolers; general speech underdevelopment; valeology; cognitive component; motivational-value-oriented component; behavioral component; formation of the valeological competence.

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The problem of competence and its formation is urgent nowadays due to the new requirements of the “Conception of Modernization of the Russian Education” and the implementation of the competence-based approach. The essence of the competence-based approach and the etymology and definition of the notion of “competence” have been dwelt upon in the works of the Russian researchers, such as V. V. Davydova, I. A. Zimnyaya, G. I. Ibragimova, V. A. Kal'ney, M. V. Pozharskaya, A. V. Khutorskoy, S. E. Shishova, etc. and the foreign scholars R. Barnett, J. Raven, W. Westera and others [5; 14; 15].

Formation and development of the valeological competence stimulated by the need of the modern society of health promotion through developing personal traits facilitating healthy lifestyle, and in connection with the problem of the negative impact of educational environment on the children's health become one of the priorities of the competence-based approach. Children with general speech underdevelopment (GSU) grow up on the background of the diagnosed health problems: the majority of them demonstrate general somatic disability, disorders of various organs and organism systems, and underdevelopment of the motor sphere. And it is only natural that formation of

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the valeological competence is vitally important for these children. The valeological competence is defined in this paper as an integrative personal characteristic including the knowledge about healthy lifestyle, rational value-oriented relation to one's health and the health of the surrounding people, and ability and readiness to achieve the tasks of healthy lifestyle and safe behavior in everyday situations on the basis of social and personal experience. The given competence has a complex structure and consists of the cognitive, motivational-value-oriented and behavioral components.

**The cognitive component** includes the preschool pupil's knowledge about man as a living organism, about its body parts and internal organs, about the components and rules of healthy lifestyle, about the interaction with the social and natural environment and the dependence of one's health on the state of environment.

**The motivational-value-oriented component** reflects the child's acceptance of health as a value, as a need to preserve and develop his health and the health of the surrounding people, and as the presence of a positive attitude towards one's own health preservation.

**The behavioral component** reflects the ability and readiness to

achieve the tasks of healthy lifestyle and safe behavior, activity and independence in health promoting, hygienic and health improving activities, the use of one's creative potential in the work targeted at health promotion.

The model of formation of the valeological competence of senior preschoolers with GSU was worked out and tested in 2012-2016 in the course of an experimental study at the preschool education institution Moscow Secondary General Education School with advanced teaching of English # 1352. The sample included preschool children between the ages of 5 and 7: 100 children with GSU and 20 children with typical speech development or insignificant speech disorders, 65 parents and 18 pedagogues.

The pedagogical model is focused on formation of the valeological competence in senior preschool children with GSU. The outcome of education and upbringing is believed to consist in the child's ability and readiness to realize in practice the knowledge obtained through learning, to solve everyday life problems and to deal with problem situations.

This goal may be achieved via completion of a number of tasks:

- professional advancement of the specialists of a preschool institution and education of parents in the problems of preservation and promotion of health, development

of children with speech underdevelopment, and formation of their valeological competence;

- organization of sustainable and developing environment at the preschool education institution;

- formation of the cognitive, motivational-value-oriented and behavioral components of the competence in children.

The model was designed on the basis of the following **principles**.

1. *The principle of humanization* – focus on the personality of each child as the highest social value, which determines the formation of the personality traits that enhance its self-activity and social activity, ability to communicate, orient towards healthy lifestyle, ethical norms and aesthetic ideals.

2. *The principle of democratization* presupposing that the relations in the social and public systems of the rehabilitation-pedagogical process and valeological education expand cooperation and responsibility of the participants for the spiritual and physical development of children, make the creative activity of the pedagogue free from excessive regulation, and involve the children, family, education institution and society in the uniform process of cooperation.

3. *The principle of differentiation and individualization* – the rehabilitation-pedagogical process is oriented towards individual peculiarities of personal and cognitive

development of each preschooler and the group as a whole.

4. *The principle of integrity* – organization of the rehabilitation-pedagogical process which would stimulate active development of the personality on the whole, facilitates focus on formation of the general, valeological and physical culture of preschool children in the unity of knowledge, skills, beliefs and creativity.

5. *The principle of health promotion* being one of the most important principles of the rehabilitation-pedagogical process and of formation of the valeological competence in preschool children, and consisting in obligatory motivation towards achievement of the best and unquestionably health preserving effect (health promotion).

6. *The principle of complex and integrative approach* – formation of the valeological competence is effected via various kinds of activity of preschoolers in the system of rehabilitation-educational and pastoral processes; it presupposes the use of different forms and kinds of work with the children, parents and pedagogues, completeness of each kind of work and monitoring results.

7. *The principle of scientific approach* presupposing that the content of work on formation of the valeological competence is matched to the level of development of science and technology and the experi-

ence accumulated by the world civilization in questions of children health preservation and promotion.

8. *The principle of accessibility* – the information provided should be adapted for comprehension by the children with GSU.

9. *The principle of visual support* – it is important that the learning material should arouse the children's interest, bring about emotional response and facilitate the formation of clear ideas about health and healthy lifestyle.

10. *The principle of nature-sensitive approach* meaning that formation of the valeological competence in preschool children should be based on the whole psycho-pedagogical knowledge about the child with GSU and on the scientific understanding of interrelation between natural and social processes. In accordance with the given principle it is necessary to develop the children's ethical motives in relation to nature, as well as resource-saving and nature-sensitive thinking and behavior.

The specificity of the model consisted in the work on formation of the cognitive, motivational-value-oriented and behavioral components of the valeological competence. Each of the components was realized on a specific vector of the competence formation.

**Formation of the cognitive component**

Educational work included

providing children with information about the human organism (exterior and interior peculiarities of constitution), about the specific features of its functioning and the components of healthy lifestyle (dieting, daily timetable, physical culture and sport, recreation, health improving, disease prevention, etc.) and the health ruining factors, about safe behavior in everyday life, society and nature, about healthy interaction with the peers and adults, about the way man preserves nature; the formation of lexico-grammatical categories on the material of the topic; the development of coherent speech; and the skills to formulate the rules of preservation and promotion of one's health. Rehabilitation-educational work included the development of cognitive interests; the skills of establishing causal-consecutive relationships between health and lifestyle; and the development of the motor sphere.

#### **Formation of the motivational-value-oriented component**

The educational tasks consisted in consolidation of the vocabulary on the topic of healthy lifestyle, development of the lexico-grammatical categories and coherent speech, acquaintance with health preserving and promoting technologies (finger and articulation gymnastics, breathing exercises, eye gymnastics, etc.). Rehabilitation-educational tasks embraced the development of thinking, attention,

creative capabilities, skills to make vital decisions independently; improvement of the adaptive potential of the children's organism. Pastoral tasks were realized along with the development of value-oriented attitude to one's health and the health of the surrounding people, responsibility for one's health and the mode of life in general, and the motivation to and the need of healthy lifestyle.

#### **Formation of the behavioral component**

Educational work included activation of the vocabulary on the topic "Healthy lifestyle", development of the lexico-grammatical categories and coherent speech, acquisition of health preserving and promoting technologies (finger and articulation gymnastics, breathing exercises, eye gymnastics, etc.), solution of the problems of healthy lifestyle and safe behavior on the basis of social and personal experience. Rehabilitation-educational intervention consisted in development of the motor sphere (coordination, speed and accuracy of action performance), improvement of the adaptive potential of the children's organism, creative capabilities and independent thinking. Pastoral work presupposed formation of the personal traits helping to preserve and promote health, independence, responsibility and moral properties.

The forms, methods, techniques and tools were chosen in accord-

ance with the level of formation of the valeological competence of the child, his individual characteristics and the component of the above mentioned competence which is to be formed. For example, preschoolers were offered game-based tasks of different levels on the topic "Healthy lifestyle". *Tasks A* were aimed at perception, comprehension, remembering and reproduction of the knowledge on the topic "Healthy lifestyle". *Tasks B* – at conscious application of the knowledge and skills in a familiar situation according to a model. *Tasks C* demanded the use of creative approach in a new situation.

The socio-pedagogical background of education in the family and the preschool education institution (specialists and parents' competence, their interaction turning into cooperation, organization of health-preserving environment, etc.) influence the formation of the valeological competence of children with speech impairments; that is why the suggested model included work with the pedagogues and the parents.

**The work with the kindergarten specialists** was targeted at enrichment of their valeological knowledge and acquisition of practical methods of its realization in professional activity. We used various forms of advancement of the professional competence of the members of the pedagogical staff in

the sphere of health preservation of preschool children with speech impairments (scientific-practical conferences, consultations, talks, master-classes, open lessons, seminars-practicals, etc.).

It is possible to single out the following areas of **work** of the specialists of a preschool institution (logopedist, tutor, and psychologist) **with the family**:

- observation and analysis of the families and the conditions of education and health promotion by way of questionnaire;
- education of the parents on the issues of development of children with GSU, health and healthy lifestyle;
- conduct of events, sports festivals, outings, exhibitions, and the like together with the parents;
- individual work with the family in accordance with demand or request.

In order to figure out the effectiveness of the suggested model, we carried out a follow-up experiment which embraced 60 preschoolers with GSU who had been included in the formative test and 40 children with GSU who took part in the summative experiment only. The experiment results testified to the positive dynamics of formation of the valeological competence of senior preschoolers with GSU. The changes had a qualitative and quantitative nature and were significant, which made it possible to draw a

conclusion about their dependence on implementation of the model of formation of the valeological competence in senior preschool children with speech impairments in the rehabilitation-educational process of the preschool education institution.

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