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DIFFERENTIAL DIAGNOSTICS — THE INITIAL PHASE OF INTEGRATED EDUCATION

Abstract. The article describes the optimal conditions for integrated education. It argues that one of the important conditions of successful education is the differential diagnostics as the initial phase of integrated training.

Key words: integration, inclusion, differential diagnostics, special education.

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Two kinds of educational integration are being developed in Russia nowadays: internal and external. Internal integration means teaching children with various disorders of psychological or physical development inside the system of special education. One can speak of the given kind of integration when, for example, a class of a special school includes children with intellectual disability and children with impairments of the musculoskeletal system. More often than not, internal integration has a forced character when education institutions oriented towards assistance for chil-

dren with a certain kind of developmental disability are territorially far from the place of his residence.

The essence of external integration consists in the unity of the systems of general and special education, inclusion of children with disabilities in the groups or classes of education institutions of the general type. Several models of integrated education are traditionally singled out in the framework of external integration:

- **combined integration**, when the children whose level of psychophysical and speech development

exactly corresponds to, or is close to the developmental norm go to mass groups or classes (1-2 such pupils per group) and get constant rehabilitation assistance from the teacher-defectologist of the special group (class);

- **partial integration**, when the children who are not yet able to acquire the educational standard like typical children join mass groups or classes only for a part of the day (for example, for its second half – 1-2 such pupils per group);

- **temporary integration**, when all pupils of the special group (class) irrespective of the level of psycho-physical and speech development are united with typical children not less than twice a month for various common events of educational character;

- **complete integration** may be effective for children whose level of psycho-physical and speech development corresponds to the developmental norm and who are psychologically ready for co-education with typical peers. 1-2 such children are included in a typical group of a kindergarten or a school class, and they are to be provided rehabilitation assistance both at the place of learning (for example, children with speech disorders get it at the logopedic facility of a children's institution) or in the group of short-term stay of a special kindergarten or school, or at various centers (for

example, children with hearing disorders get it at surdological consulting rooms of the system of healthcare).

Realization of all these kinds of integration presupposes conduct of differential diagnostics of the initial stage of integrated education design.

The urgency of the problem of convergence of the general and special educational systems today is quite evident. At the same time, the existing situation in implementation of the integrative model of education is absolutely paradoxical.

On the one hand, the idea of integrated education which is based on the principle of just equality for all learners is so convincing from the humanistic point of view that it is practically never criticized on the pages of special literature, nor is it questioned by the pedagogues of general and special education (it should be stressed, that no sharp controversy is brought about by the idea of integrated education proper; as far as objections to the feasible forms of practical implementation of this idea are concerned, there are no such objections because these forms are still little known to practical workers).

On the other hand, even in spite of the fact that the realization of the integration model needs more than one year, and, perhaps, several dozens of years to complete, it is

next to impossible to acknowledge the sluggish character of the modern integration processes as satisfactory. It is common knowledge that viability of ideas urgent for social well-being of people to a large extent depends on the efficiency and effectiveness of their implementation in real life. Any important idea loses its motivational potential primarily because of its unsuccessful implementation. Acknowledging this regularity and being actually worried about the outcome of practical realization of integrated education it is necessary to ask a direct question: What are the main reasons of establishment of the integrated education so poor in result and ambivalent in practical experience?

Can it be that the idea of integrated education of typically developing children and children with disabilities, perfect in its humanistic essence, comes across an irresolvable conflict expressed by the well-known maxim: "The restive steed and timid deer must ne'er be harnessed to one cart" (*trans. by Ch. E. Turner*), which, in terms of pedagogical opportunities of teaching the above mentioned categories of children means their little congruence in the framework of the common school and common class?

Of course, we don't mean that co-education of typically developing children and children with disabilities is impossible in principle.

We mean that reaching maximally high results is rather problematic for both categories of children in the learning environment non-specific for them, and the slogan "New school is a school for all" is least capable of providing the corresponding educational environment for every child simultaneously.

Is it possible that the reason of poor effectiveness of integrated education can be attributed to the absence of a methodologically correct conception on the basis of which the organic fusion of the general and the special education systems should take place?

Really, is it not the fuzziness of conceptual foundations of understanding the opportunities of integrated education and inclusive learning (as a guise of the former) that leads to the situation when much of what is still little known in the sphere of integration is presented as indisputable? For example, many articles and other publications write about integration and inclusion in an easy and natural manner but one can feel that many aspects of the problem are avoided being properly discussed.

The success of inclusive education on the basis of uniform educational space is postulated with enviable ease but there is no convincing answer to the question how to combine different educational routes for the two categories of chil-

dren under the conditions of this uniform educational space. The question about how pedagogues without special defectological education are going to organize the learning process in inclusive classrooms not furnished with the proper psychological tools and equipment for children with disabilities. This list of questions is far from being complete.

Being, nevertheless, optimistic about the possibility of achieving encouraging results of integrated education, let us make a trivial supposition about the necessity to consistently follow the differentiated approach in choosing different forms of education for different categories of children: traditional, inclusive and special. In this connection, early psycho-pedagogical diagnostics of children aimed at differentiation of their psychological personal properties and capabilities is a logically justified initial stage of organization of inclusive education.

At present, a system of psycho-medico-pedagogical support for children with disabilities have been set up in Leningrad Oblast (psycho-medico-pedagogical councils of education institutions, psycho-medico-pedagogical commissions, facilities for children in need of psycho-pedagogical and medico-social assistance – diagnostic and consulting centers, center of psy-

cho-pedagogical rehabilitation, center of social-labor adaptation and career education, etc.).

Alongside solution of other problems, the system allows carrying out psychological observation of children selected for integrated education. In fact, the system of psycho-medico-pedagogical support ensures the conduct of the very initial stage of integrated education. It is impossible to conduct the process of education professionally without the awareness of peculiarities, drawbacks and potentials of the psychological sphere of children with disabilities.

The psychological sphere of children with disabilities was investigated on the base of the state education institution “Leningrad Oblast Center for Diagnostics and Counseling (hereafter “LOCDC”) which represents the interests of all district services of support in the system of education. The tasks of LOCDC connected with the distribution of children in groups with different forms of education, including the integrated one, embrace the following:

- psychological observation of children targeted at revealing their preparation for learning and determination of the content and forms of education according to the peculiarities of their physical and psychological development;
- working out individual rec-

ommendations and programs of education in the family and at institutions of integrated education;

- consideration of problem and difficult cases in determining forms of the child's learning and upbringing, assistance in complex situations with borderline states and making necessary decisions after the expertise;

- provision of the individual-centered pedagogical, psychological, social, medical and legal support for children;

- counseling parents, pedagogues, social workers, educational institutions of Leningrad Oblast and other interested organizations on the problems of integrated learning and upbringing, school and social adaptation of children and teenagers with disorders of psychological and physical development;

- compilation of databases about the children with developmental disorders of Leningrad Oblast;

- holding scientific-practical seminars and conferences for practical workers of schools with integrated form of education;

- co-ordination and organizational-methodological support for the activity of municipal psycho-medico-pedagogical commissions selecting pupils for classes and groups with integrated learning.

The structure of LOCDC includes a number of departments:

diagnostics and counseling department (central psycho-medico-pedagogical commission), administrative department, and methods and rehabilitation department. The department for diagnostics and counseling plays the decisive role in the selection of children for classes of integrated education. This department functions in full correspondence with the Provisions about psycho-medico-pedagogical commission approved by order of the Minister of Education of Russia.

The commission includes a pedagogue-psychologist, teacher-defectologist (in the corresponding profile: oligophrenopedagogue, tiflopedagogue, surdopedagogue), teacher-logopedist, and child psychiatrist. If necessary, other specialist may be invited for membership. Children are observed by the LOCDC specialists in the presence of their parents (or legal representatives).

The procedure of observation at the diagnostics and counseling department works under the principles of complex, holistic and structurally dynamic study of the individual-centered approach.

Realization of these approaches is called upon to ensure detailed investigation of the urgent and potential capabilities of children for sending them to classes of integrated learning, and in the cases when sensory, motor, intellectual, behav-

ioral and other disabilities are manifested too vividly, it is strongly recommended that they go to study at

special (rehabilitation) education institutions.