**Ural State Pedagogical University** 

Institute of Special Education

## **SPECIAL EDUCATION**

### 1 (37) ` 2015

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Ekaterinburg 2015

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### ALEKSEY NIKOLAYEVICH GRABOROV: AN OUTSTANDING RUSSIAN OLIGOPHRENOPEDAGOGUE (TO 130<sup>TH</sup> BIRTH ANNIVERSARY OF THE SCHOLAR)

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In March 2015, we are going to celebrate the 130<sup>th</sup> anniversary of the birth of the outstanding Russian oligophrenopedagogue, Doctor of Pedagogy, Professor Aleksey Nikolayevich Graborov (1885—1949).

A.N. Graborov is rightfully considered as the founder of the Russian oligophrenopedagogy and special school for children with intellectual disability. The scholar's

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scientific legacy is still urgent; his printed works include textbooks, articles in collections of papers on defectological problems, and reports at different symposia.

The name of Aleksey Nikolayevich Graborov is closely connected with Saint Petersburg – Petrograd – Leningrad, where the scholar worked and lived most of his life and made a great contribution to the formation and development of the Faculty of Special Pedagogy (the former Defectological Faculty) of the Herzen State Pedagogical University of Russia, and the foundation of the Department of Oligophrenopedagogy (the department of education of children with intellectual disability).

Aleksey Nikolayevich Graborov was born on March 15 (March 2 by the Julian Calender) 1885 in Roslavl, Smolensk Province [1]. He went to the Roslavl six-form City School and finished it in 1901; he began to give private lessons at the age of 15. Thus, the working career of the young man began rather early. His thirst for knowledge helped him to pass the graduation exams as an external student: in 1903 - for the degree of a parochial school teacher, in 1906 - for the degree of a county school teacher. But the real teacher's career of A.N. Graborov was continued in Saint Petersburg.

In 1906 he entered the P.F. Lesgaft Higher Free School where he studied until its closure in 1907. The life of Aleksey Nikolayevich was not an easy one. In order to pay for his board and tuition, he worked as a teacher at a school for children of unemployed parents and at evening courses for workers of the Kolomna literacy society.

In 1908 A.N. Graborov entered the Petersburg Psychoneurological Institute founded by V. M. Bekhterev in 1907 and became student of the Natural Department of the Pedagogical Faculty, but continued to work to be able to pay for his study.

A.N. Graborov was a student of such famous scholars of that time as professors V. M. Bekhterev, A. S. Griboedov, A. F. Lazurskiy, P. F. Lesgaft and D. V. Fel'dberg. During his study, he got acquainted with the work of special educational institutions for children with intellectual disability opened in Saint Petersburg by E. K. Gracheva, I. V. Mvalvarevskiv and his wife E. Kh. Myalyarevskaya and, later, with the activity of famous pedagogues and doctors: V. P. Kashchenko, N. P. Postovskiy and M. P. Postovskaya, and N. V. Chekhov. Thus formed Aleksey Nikolayevich his theoretical knowledge and accumulated his practical experience of work with children with intellectual disability.

In 1909-1914 A.N. Graborov taught at the courses of primary education, at children's clubs, and in summer, his activity was connected with out-of-school education of children; he worked as a tutor of children with intellectual disability who included children with severe intellectual disability. Private lessons helped A.N. Graborov to better understand the peculiarities of the psyche and behavior of such children, to study their developmental potential and to work out the methods of teaching intellectually disabled children.

From 1912, Aleksey Nikolavevich worked as a teacher of gymnastics and manual labor at a school for children with intellectual disability opened by the staff of the Psycho-neurological Institute. Unfortunately, the school was closed because of lack of funding in 1915. Then A.N. Graborov opened a private boarding school for children with intellectual disability. It was the beginning of his scientific, practical and public activity in the field of oligophrenopedagogy. After the October revolution of 1917 the school was handed over under the jurisdiction of the Soviet state and renamed into the Central Special School. Soon it became a base institution for conducting practice of the Defectological Faculty students. Being the School Headmaster, Aleksey Nikolayevich gave brilliant lessons himself demonstrating outstanding pedagogical skills of work with children with intellectual disability. Later, A.N. Graborov will sum up the experience of the school activity in his book "Special School (school for children with intellectual disability)" published in 1923 and 1925.

Beginning with the year 1914, Aleksey Nikolayevich Graborov often took part in conventions and conferences which discussed the issues of providing social assistance to children with disabilities, clarified the notion "a disabled child". considered the causes of intellectual disability of children and put forward propositions about creating various types of institutions necessary for education and upbringing of such children. At a number of such symposia, A.N. Graborov made reports on the problems of the essence of intellectual disabilities. their classification and social-labor education of children with intellectual disability. Thus, in 1919 he made a report at the First All-Russian Congress on Protection of Childhood about labor education at the new special school. In the future, he took an active part in the work of scientific congresses on the issues of teaching children with intellectual disabilities and difficult children.

From the first days of the Soviet power, A.N. Graborov paid special attention to establishing institutions for disabled children, carried out tremendous work towards training personnel for newly opened institutions for education of such children. He took part in the organization of various courses and gave lectures in labor education at a special school. A.N. Graborov's lectures were published in the threevolume collection "Education and Upbringing of Disabled Children" (KSO, Petrograd, 1918).

Aleksey Nikolayevich was a

member of the medico-pedagogical consulting board of the People's Commissariat for Education; he took part in the work of the I All-Russian Congress of Pedagogues on Childhood Protection (1919), the I All-Russian Congress for Overcoming Child Disability and Crime (1920), the All-Russian Conference on Overcoming Child Disability (1921), etc. He worked out a number of projects and programs for institutions caring for children with intellectual disability on the assignment of the People's Commissariat for Education and the People's Commissariat for Social Welfare of the RSFSR and the Regional Department of People's Education.

In his speeches and in the work of the medico-pedagogical consulting board at the Department of Childhood Protection of the People's Commissariat for Education, A.N. Graborov propagated theoretical foundations of the new pathological (therapeutic) pedagogy later described in the book "Special School". The Author writes in the foreword to the first publication (1923) that the expansion of the number of special schools after the October revolution brought about radical increase of the teaching personnel by engaging people untrained for education and even incapable of getting the necessary knowledge either from literature or practical experience even if they wished to do so. "The given paper presents guidelines for those who work in the sphere of child disability and devote themselves to the exceptionally difficult task of education of children with intellectual disability" [2, p. 4]. Thus, the book by A.N. Graborov "Special School" was the first publication for teachers-defectologists dealing with the issues of education and upbringing of children with intellectual disability.

Aleksey Nikolayevich Graborov is not only a scholar in the theory of the system of special education, he was also one of the founders of the higher defectological education in the country. In October 1918, the Faculty of Training Personnel for Education of Disabled Children (called Disabled Children Faculty for short) was opened in Petrograd at the Institute of Preschool Education. The Faculty was organized by Prof. A. S. Griboedov (the first Faculty Dean who held the position for some time). Prof. D. V. Fel'dberg (became Faculty Dean after A. S. Griboedov) and A.N. Graborov (Deputy Dean, Head of Department of Education of Children with Intellectual Disability).

In the 1920/21 school year, the Faculty was relocated at the Petrograd Pedagogical Institute of Social Education of typical and disabled children organized under the initiative of A.N. Graborov, A.

S. Griboedov and D. V. Fel'dberg, and received the name of the Faculty of Pathological Pedagogy; later it was renamed into the Faculty of Child Disability. In May 1921 the Institute was renamed into the Institute of Pedology and Defectology, and the Faculty of Child Disability began to be called the Defectological Faculty. After the 1925 merger of this Institute with the Leningrad Pedagogical Institute named after A.I. Herzen, A.N. Graborov was one of the founders of the Department of Education of Children with Intellectual Disability (later the Department of Oligophrenopedagogy), and became Head of this department. In 1925, by the decision of the State Learned Council of the People's Commissariat, A.N. Graborov was conferred the degree of professor in the course of "Intellectual Disability". He had been the scientificmember of the methodological committee of the Leningrad City Department of People's Education till 1925.

The Department of Education of Children with Intellectual Disability existed up to 1938; its faculty made a great contribution to the development of oligophrenopedagogy and training personnel for special schools. As a result of the closure of the Department, A.N. Graborov was dismissed. In 1938, he was offered the position of Head of Department of Oligophrenopedagogy at the Moscow State V. I. Lenin Pedagogical Institute, where he had worked up to 1941.

In co-authorship with N. F. Kuz'mina and F. M. Novik, A.N. Graborov wrote the first textbook for students-defectologists "Oligophrenopedagogy" to be published in the Soviet Union (1941). This textbook defines oligophrenopedagogy as a science about education, upbringing and teaching of children with intellectual disability in connection with the tasks of rehabilitation of developmental disorders and formulates its basic principles. Rehabilitation is looked upon as an inseparable aspect of educational activity of a special school. An exceptional place in the system of rehabilitation activity is allotted to labor which is considered not only as a means of vocational training of the pupils but also as a tool of general education.

During the Great Patriotic War, A.N. Graborov continued his pedagogical activity in evacuation, first in Gorky and then in Bashkhir Autonomous Soviet Socialist Republic, where he worked as Head of Department of Pedagogy at Birsk State Pedagogical Institute. In 1943, the Scientific-Research Institute of Defectology of the Academy of Pedagogical Sciences of the RSFSR was established, and A.N. Graborov was asked to come to Moscow to work at this Institute. He was also invited to teach the course of oligophrenopedagogy and the course of methods of teaching Russian at special schools in the *Moscow State V. I. Lenin Pedagogical Institute.* 

In June 1946, A.N. Graborov successfully defended a doctoral dissertation in Pedagogy summing up the achievements of the theory and practice of education of children with intellectual disability in the Soviet Union.

The further activity of Aleksey Nikolayevich was again connected with Leningrad. In August 1946 he was employed as Head of the Section of Oligophrenopedagogy at the Leningrad Scientific-Research Institute of Special Schools of the Academy of Pedagogical Sciences of the RSFSR and Head of Department of General Pedagogy at the First Pedagogical Institute of Foreign Languages.

Much was done under the guidance of A.N. Graborov in the study of children with intellectual disability; he organized a clinic which facilitated the determination of psychological peculiarities of such children and realization of the differentiated approach to them in the process of education. Simultaneously, A.N. Graborov was a scientific adviser of post-graduate students, gave consultations for teachers of special schools on teaching methods and carried out extensive work with the parents of children with intellectual disability. He organized the first course of lectures on intellectual disability and gave lectures to the parents of children with intellectual disability himself. In addition to this, the scholar gave lectures for teachers and pupils of senior forms as he considered propagation of pedagogical knowledge among people to be a matter of his social duty and an obligation of each teacher.

Aleksey Nikolayevich Graborov was a highly gifted person. From the time when he was a student he was keen on musical and theatrical art and took an active part in performing activity. He was distinguished by many talents: he was very good at drawing, went in for photography, was good at clay modeling and taught it to his pupils, and had skills of carpentry and bookbinding. He was always eager to pass his labor habits and skills to other people.

A.N. Graborov was an energetic and creative scholar whose activity was urgent and always in demand. In his works, he raised many critical issues, but premature death did not let him realize all his plans. Aleksey Nikolayevich died on April 24, 1949 and was buried at the Volkovo Lutheran cemetery in Leningrad. A.N. Graborov left a rich scientific heritage, but, unfortunately, many of his works have not been published.

The analysis of the published works demonstrates the problems and mistakes in the development of the new science of oligophrenopedagogy which could be attributed, to a certain extent, to the historical situation. The further scientific analysis of theoretical conceptions of A.N. Graborov can make it possible to throw light upon many issues of the history of development of the special school and the Russian oligophrenopedagogy.

Stressing the significance of A.N. Graborov's activity, G. M. Dul'nev wrote: "A.N. Graborov had gone a long and difficult way along the road of creative investigation, hesitation and success. He was one of the first creators of our home science about the education of children with intellectual disability... The works by A.N. Graborov are still to be deeply analyzed with the aim of both using his achievements in practice, and writing a chapter in the history of Soviet oligophrenopedagogy" [3, p. 11].

At present, when so many years have passed, we have every right to say that A.N. Graborov's activity makes up a whole chapter of not only Soviet but common Russian oligophrenopedagogy. "A brilliant pedagogue and scholar, Aleksey Nikolayevich Graborov created special systems of methods of teaching and upbringing pupils with intellectual disabilities. In his lectures and publications, he answered many questions which interested researchers and practical workers both in the past and in the present." [4, p. 17].

The cause of Aleksey Nikolayevich Graborov is being continued at the Herzen State Pedagogical University of Russia today: the Department of Oligophrenopedagogy, once created by A.N. Graborov was reopened in 1965. This became possible due to ceaseless effort of his former post-graduate student, and later Dean of the Defectological Faculty, Candidate of Pedagogy, Associate Professor Nataliya Petrovna Dolgoborodova. At present, the conduct of Graborov readings and scientific-practical conferences devoted to the life and scientific activity of the scholar and his contribution to the development of Russian oligophrenopedagogy at the Faculty of Special Pedagogy has become a good tradition.

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## STUDY AND EDUCATION OF PERSONS WITH SPECIAL EDUCATIONAL NEEDS

UDK 376.356-053«465.07/.11» BBK Ю972.2 GSNTI 14.29.27 Code VAK 19.00.10

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### REGULATION OF GENERAL ACTIVITIES OF PRIMARY SCHOOL CHILDREN WITH HEARING DISORDERS IN ADVERSE CONDITIONS

**Abstract.** The article presents the results of a study of the peculiarities of arbitrary regulation of behavior of younger primary school children with hearing disorders in achieving a goal in adverse conditions (satiety) in comparison with children with good hearing. The ability to perform certain activity in conditions of mental satiety is largely determined by the motivation and, due to it, ability to overcome difficulties. The results show the existence of similar trends in the arbitrary regulation of activity of both groups of children and peculiar manifestations of arbitrary regulation in primary school children with hearing disorders.

**Key words:** arbitrary regulation, primary school children with hearing disorders, mental satiety, monotonous activity.

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The study of arbitrary regulation of behavior of children with disabilities including those with hearing disorders in the new conditions of work of the modern school becomes especially significant. The introduction of the Federal State Educational Standard aimed at ensuring diversity of design of educational activity on the basis of individual properties of each child shifts the accent from the diagnostics of a disorder and sending children to the corresponding institution to the diagnostics of developmental peculiarities with the purpose of working out an individual educational rout. Nevertheless, educational activity in new conditions does not exclude the absence of certain efforts in acquisition of new learning skills. Long ago, K. D. Ushinskiy noted that "if you make your lesson interesting, you may hope not to become boring, but please remember that not all things can be interesting in learning; there are, and surely must be, uninteresting things in learning. So, teach your child to do not only things which are entertaining but also those which are dull - to do them out of the pleasure to perform one's duty" [10, p. 252].

Learning activity demands from the child hard effort, much time and, sometimes, even giving up more attractive activity. In her study of these processes, L. S. Slavina stresses that "learning activity is a kind of labor activity", and it presupposes the presence of efforts to achieve the goal. Building education process on interest alone does not give due results. The solution of educational problems needs reaching a number of intermediary aims which may turn out unattractive and tiring but quite necessary [9].

Our research is urgent because it is necessary to expand our understanding of the peculiarities of arbitrary regulation of activity of children with hearing disorders. Arbitrariness is a systemic property characterizing higher psychological functions as true psychological systems [5]. Analysis of the peculiarities of arbitrary regulation in childhood in the conditions of safe and impaired hearing is important for the study of regularities of development of the mechanisms of activity control.

For any kind of activity, arbitrary regulation includes both common and specific components. The common components embrace indirect nature of behavior, its focus on the search for such actions that can lead to the achievement of the goal under the given circumstances. Arbitrary regulation presupposes the presence of the psychological processes which enhance the motivations issuing from the set goal and

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inhibit the opposing ones. It is at the junior school age that the children learn to overcome instant desires and control their own behavior. Achievement of success in the learning activity is a complex task associated not only with the acquisition of learning skills but also with the development of the person as a whole.

The purpose of our research is to study the peculiarities of arbitrary regulation of activity in children with safe and impaired hearing while they try to achieve the aim (obtain the result) in adverse conditions – monotonous activity leading to mental satiety.

The state of mental satiety was first studied by the school of Kurt Lewin. It is defined as the state emerging in the process of monotonous activity or long subjectively insignificant work. A. Karsten noted that in this case the person first loses interest and feels like giving up the activity and has an inclination to use different methods of performing the work; in case he continues doing it, he gets annoyed, sharply rejects the activity and tries to stop doing it by all means.

The Russian researchers looked at the problem under study in the framework of the motivational approach [4]. During junior school age, the development of arbitrariness itself which is based on motivational-demand education is in the center of psychological development. Determination of the mechanisms of development of arbitrary processes and the search for the means stimulating to activity even in the case of low attractiveness of the process of goal achievement takes place in the context of the imperative force of consciousness [3].

Modeling situation in which the ability to regulate activity in adverse conditions would manifest itself is possible in the situation of mental satiety. Researchers have often stressed the influence of the amount of work on the goal achieving results: the larger the volume, the stronger the desire to give up the work. The capacity to go on with unattractive activity is preserved due to the changes in the motivational-semantic sphere of the person [6]. A really strong motive is necessary to inhibit the existing situational motives. In this case, the person follows consciously set goals and suppresses immediate urgings [4].

The studies in the sphere of relationships between motivational regulation of intellectual activity and goal setting of persons with hearing disorders show that "in the situations of more significant motivation those tested set themselves aims dealing with the quality [1, p. 177]. The choice of interrelationship between motivation and goal setting determines the effectiveness of the problem solution. To achieve the result, it is necessary that the actor should accept the task and include it in the general hierarchically organized system of motives [2].

Continuation of the work over a task in the situation of monotonous activity leading to mental satiety demands for the person certain efforts and takes place in the actor's inner sphere by way of mobilizing his or her reserves. The degree of effort is determined subjectively: the higher the strain, the stronger the needed effort. An externally successful effort reveals itself in the effectiveness of the action, which is based on the concentration on the action being performed regardless of the obstacles occurring on the way to the goal achievement [6; 7]. If the person experiences positive emotions connected with the goal achievement, they will act as a means enhancing the motivational tendencies facilitating the continuation of the activity performance.

The power of arbitrary regulation of behavior in adverse conditions is determined by various factors, among which it is possible to single out the manifestation of personality traits. The system of these properties and the level of their development determine the level of arbitrary behavior of a person [6]. The highest level of development of arbitrariness is reached when the person has formed sustained personal interests, stable purpose, inner concentration and organization [3].

In our research, the situation of mental satiety was modeled on the background of long monotonous activity with the help of the modified method worked out by A. Karsten. The testing procedure included three successive stages. The child under test was offered a sheet of grid paper, similar to a chess board, and was asked to cover all squares with tokens of unattractive color in a chequered pattern. switching from a brown token to the white one. The instruction was accompanied by a demonstration. At the first stage, the sheet contained 64 squares; at the second stage it consisted of 130 squares. At the third stage, which was held after the successful completion of the second one, the sheet of paper was unfolded revealing one more row of squares, then another row and so on: i.e. the children could not see the whole amount of work to be done. The continuation of activity in the case of loss of interest was possible due to preservation of the motive and the goal of activity, and realization of the necessity of its performance consisting in the need to follow the given instruction. We chose the following parameters characterizing the sate of mental satiety: time of the task completion, involvement in activity, accuracy of task completion, responses to unwillingness to perform the activity,

variation of the methods of activity and speech responses in the process of activity. In addition, we used the method of expert assessment of the personality traits characterizing the opportunities of arbitrary regulation of behavior such as persistence, determination. independence and self-discipline. The experts were offered a sheet of paper with descriptive attributes of personality traits and an assessment form to evaluate each trait on the five-point scale. The common evaluation of each personality trait is an average one and was calculated by dividing the sum total of evaluations of the given property by the number of persons providing evaluation.

Research was conducted on the base of Moscow Special General Education Boarding School of type II #22 and "Gymnasium # 1596". The sample included 148 children of the junior school age: the control group consisted of 38 pupils of the 1-4 forms with safe hearing, and the experimental group included 98 schoolchildren with partial hearing loss and 12 deaf pupils of forms 1-5.

The computer program "PASW Statistics 18.0" was used to process the research results. The results of observation of children with safe hearing were compared with those of children with hearing impairments using the nonparametric Mann–Whitney U test.

Significant differences be-

tween the children with safe and impaired hearing in task completion were obtained for to the following parameters: emotional involvement in activity (p < 0.005, p < 0.001), accuracy of task completion (p < 0.038), and speech responses in the process of activity (p < 0.005).

We have registered similar tendencies in task completion of the children of junior school age with safe and impaired hearing for emotional responses to unwillingness to perform monotonous activity, for variation of methods of activity and capacity to cover the squares in additional rows. There are no differences between the children with safe hearing and the children with hearing disorders in the choice of activity methods in performing monotonous activity (the differences between the groups are not statistically significant).

Both demonstrated groups three stable types of choice of the method of activity. The first type is characterized by accurate execution of instruction: laying the tokens by rows, in due order, alternating brown and white tokens. The given method radically hampers the process of task completion and needs high concentration of attention and ability to switch over. The choice of this method of activity indicates the children's accurate understanding of the instruction.

The solution of the problem in

a different way may mean the change of goal. It is important here to see what the child understands under goal achievement in adverse conditions: just to cover all squares or to follow the instruction to the letter. Accordingly, the second and the third types lead to the achievement of the goal symbolically, as it is achieved via different variants of the methods of task completion. The second type consists in the following: the children classify the tokens into two groups and first place only white and then only brown tokens. The third type of laying out the tokens is the fastest one: the children collect all tokens in their hands and lay them out on the squares randomly without observing any sequence. The second and the third types of task completion are more often used immediately after they have placed several rows of tokens in accordance with the instruction. The appearance of variations of the methods of task completion testifies to the emergence of mental satiety. The increase of the volume of work brings about the desire to finish it as soon as possible, and then the details connected with the quality of the work go to the background. In this case, work completion becomes the leading motivational tendency, and the accuracy of following the instruction does not matter much.

Children with safe and impaired hearing demonstrate common tendencies while working under the conditions of satiety. In the first experimental situation, first and second form pupils prefer to complete the task closely following the instruction in correspondence with the given model of activity - they lay out the tokens one after another in rows. The children of forms 3-5 do not keep to the instruction closely and act according to their own plan of activity. The fourth form schoolchildren with safe hearing use the first type of task completion in 33% of cases, and the pupils with impaired hearing - in 25% of cases.

A common tendency is also observed when the children are given the second task sheet: the children change the method of task completion and achieve the goal symbolically. The third form pupils with safe hearing (77%), the same as the pupils with hearing disorders of the fourth and fifth forms (81% and 75%) prefer the fastest third type of task completion.

Increase of mental satiety is accompanied by the growth of negative attitude to monotonous activity and desire to give it up. Anyway, the work is not stopped immediately when such feelings appear. This fact is attributed by L.S. Slavina with the fact that the state of mental satiety brings about an inner personal conflict between two opposite tendencies: in accordance with the first tendency it is necessary to stop the activity, but the second one urges to continue working in order to live up to the expectations of the surrounding people (the requirements of an adult). The inner conflict functions as a subjective barrier which consists in feeling inner dissatisfaction with own success, in experiencing failure and in emergence of frustration. The emotional complex adds to the state of mental satiety and changes the whole future behavior of the child [8].

The children with safe and impaired hearing showed differences in the work in conditions of satiety. Thus, we observed different responses to unwillingness to continue the task performance. Among them, we can see speeding up of the activity, signs of fatigue, surprise, refusal or absence of response. The children with safe hearing demonstrate fewer emotional responses and higher stability in performing monotonous activity. Beginning with the second form, the pupils get surprised when they see an additional task sheet, and then go on with the work in the same tempo (from 44% to 66%). Quiet continuation of activity is the second most frequent response. The children do not look tired and do not change the tempo of activity (44 %).

The most typical response of children with impaired hearing consists in speeding up the activity. These children do not look tired, but they feel like finishing the uninteresting work as soon as possible. The children cannot find a motive or resource in the work itself. Then the tempo is slowly restored to normal, and the child finishes work in the usual tempo. The frequency of such response varies from 16 to 50%. Surprise at seeing additional rows of squares is less evident; it amounts to 38% in the third form. Quiet continuation of activity is less characteristic for children with hearing loss and amounts to 5-25% (the peak of manifestation is observed in the fourth form). The signs of fatigue (less than 25%) appear in response to the inner resistance to activity. The children begin to wrinkle up their forehead, sigh, gasp and show that they are very tired, they are about to give up the work, but if the adults motivate their activity its effectiveness grows up considerably.

The differences in accuracy while working on a small number of squares are significant (p < 0.038). The schoolchildren with loss of hearing of forms 1-5 show better indices of accuracy (from 31% in the first form to 50% in the fifth form). The highest results were registered in the first form. The children with safe hearing show lower indices of accuracy in all experimental situations (11 and 22% in the third and fourth forms). And it is only in the second form that the children with safe hearing have better results of accuracy of work performance (44%).

In the children with hearing disorders, the requirement to follow

the instruction to the letter provokes aggravation of the state of mental satiation and rejection of activity more often than in the children with safe hearing. Using a larger number of variations and symbolical goal achievement the children with safe hearing can avoid the state of mental satiation. Rejection responses were registered in 50% of first formers only. Beginning with the second form, rejection responses were not registered. Absence of rejections is achieved due to the ability to control emotions, active use of variations and persistent search for the meaning of the task.

Rejection responses in the children with impaired hearing were registered in the first form in 40% of cases; the number of such responses gradually goes down and reaches zero only by the fourth form.

Increase of the number of verbal utterances not connected with the activity in progress is one of possible variations of task completion leading to alleviation of the state of satiation. The differences between the groups by the given parameter are on the level of significant (p < 0.005). In the second and fourth forms, the given phenomenon is demonstrated by 55.6% of all utterances of the children with safe hearing. The children ask additional questions about the details, make suppositions, and if the experimenter pays no attention to their words, they tell about their hobbies, brothers, sisters, etc. Thus, speech does not allow them to go back to the monotonous, senseless and unattractive activity again. Search for the task meaning is especially important for the children with safe hearing. The children try to figure it out persistently and make different guesses and suppositions: "Anyway, why do we do it? It may be a new kind of draughts". The indices differ with age from 33% to 55%.

The children with hearing disorders, the same as the children with safe hearing, speak on abstract topics but practically never try to figure out the meaning of the task. They more often use utterances of self-regulating orientation. This can be seen not only during accomplishment of more difficult and time-assuming tasks but also in covering the squares on a smaller field. Depending on the form and the volume of activity to be performed the indices vary from 6.4 to 25%. The children say out loud the colors of the tokens and comment on their actions. The use of this technique allows the children with loss of hearing to keep their attention on the story of the task and to closely follow the task instruction.

At the third stage, after completion of a large amount of work, the sheet of the grid paper is unfolded so as to show an additional row of squares. The new rows ap-

peared in such a way that the children did not know what amount of additional work they were to do. The first formers with safe hearing showed high mental satiety and inability to continue work under indefinite conditions. The majority of children (60%) could not fill in more than 3-5 rows. In 20% of cases they refused to complete the task; in 10% of cases they could lay out only 1-2 rows. Beginning with the second form, the children with safe hearing demonstrated better capability to monotonous activity, resilience in the conditions of satiety. which shows that their arbitrary regulation has been formed. Two groups of children are clearly distinguished. The children of the first group (from 33% in the second form and 55% in the fourth form) could lay out from two to five additional rows. The children of the second group (from 44 to 66%) could do more than 6 rows.

The pupils of the third and fourth forms with safe hearing demonstrate a high level of development of arbitrariness when they are offered additional rows. Such pupils look concentrated and selfpossessed, the tempo of task completion is high enough; they perform the task silently and do not try to begin a dialogue. They do not seek assistance from adults in the process of work. Independence is a distinguishing feature of activity of children with safe hearing. On reaching about the third additional row their annoyance grows. But it is not associated with an external change in their activity, i.e. it is not manifested by a change of tempo, concentration or other parameters. The children with safe hearing are capable of setting a limiting goal independently. In the case the children wish to stop performing the task their refusal is final and additional stimulation does not lead to their resuming the activity.

The process of task completion in children with hearing disorders under the complex conditions of indefinite perspective differs from that of children with good hearing. On the one hand, the capability of children to fill in more than six additional rows grows gradually: in the first form, such pupils make up 40%, and in the fifth form -87%. On the other hand, increased emotionality, especially in the first and second formers, is a specific feature of their behavior. The appearance of each additional row is accompanied by a storm of emotions. Externally, the emotions are manifested very vividly. The children are surprised: "What? More rows?", then say that "they are too many". The children look as if they did not wish to continue the activity. Poor capability to control their own emotions provokes the greater part of refusals. Additional stimulation may urge to go on with the task completion. Any bright object disconnected with the

activity performed by the child may serve as a stimulus to switch over from monotonous activity. Such alternation of the periods of refusal and going back to activity may take place from one two eight times. The motivating role of the adult is also significant. Under the adult's support, the children are capable of completing a large amount of work. Active stimulation makes it possible for the children with hearing disorders to perform the work comparable to the work completed by the children with safe hearing. But the children with impaired hearing still demonstrate inaptitude to the search and definition of the motive of their activity. The children try to figure out the volume of their work, how many rows are still to be done and count the remaining squares and the number of the rows already done.

Thus, the fourth form schoolchildren with hearing disorders correspond to the second form pupils with safe hearing by the level of development of arbitrary regulation of activity.

Significant differences are observed according to the parameter of emotional involvement in activity (p < 0.005, p < 0.001). The emotional coloring of the task and its acceptance or rejection to a large extent determine the capability to work for a long time performing monotonous activity.

The dominating emotional response in the group of children with safe hearing during the whole period of junior school age is stable unemotional attitude to the task, which tells on the stability of their work in all experimental situations. The given type of response becomes dominant: from 40% of first formers to 77.8% of fourth formers demonstrate it. The increase of the number of such responses manifests the forming ability of the children to regulate and control their emotions and to preserve the wish to follow the instruction for a long time (see Table 1).

Table 1

	Form								
		1		2		3	4		
Parameters	Field of 64 squares	Field of 130 squares	Field of 64 squares	Field of 130 squares	Field of 64 squares	Field of 130 squares	Field of 64 squares	Field of 130 squares	
Unemotional acceptance of the task	40.0	40.0	44.4	55.6	66.7	66.7	77.8	88.9	
Involved in the task	50.0	10.0	55.6	33.3	22.2	11.1	22.2	11.1	
Not involved in the task	10.0	50.0	—	11.1	11.1	22.2	_	_	

Indices of emotional involvement in activity in the children with safe hearing, %

Expansion of the checquered field in the second experimental situation brings about increase of the number of negative emotional responses. The volume of the work to be done influences the emotional attitude to the task. The children see the expanded field, and the wish to begin activity declines radically. The highest indices were shown by the pupils of the first form: they amounted to 50%; the children take their time and do not start performing the task right away.

The children with hearing disorders demonstrate more diverse emotional responses. It is possible to single out three stable types of emotional responses which are almost evenly revealed during the whole period of junior school age. The first type is emotional involvement. The children accept the task and quickly start completing it. The second type of emotional response is unemotional acceptance of the task, but the children with hearing disorders are less likely to display it than the children with safe hearing. By the third form, the second type of response is identified in 33%, and then the frequency goes down to 12%. The typical feature of the children with hearing disorders consists in rigidity of emotional response, sticking on a certain type of response and absence of positive changes (Table 2). The third type of emotional response is characterized by non-involvement, which increases with the expansion of the number of squares to be covered.

The dominating type of emotional response is preserved during the whole junior school age, whereas the children with safe hearing demonstrate dynamic changes.

A similar tendency is observed under the conditions of negative attitude to the task. The percentage of similar responses is higher in the children with impaired hearing. In the first form it makes up 25%, when the children with safe hearing show only 10%; in the second form -21%, and the children with safe hearing have none.

### Table 2

Indices of emotional involvement in activity in the children with impaired

hearing, %

					$\mathcal{U}'$						
	Form										
		1	1	2		3		4		5	
Parameters	Field of 64 squares	Field of 130 squares	Field of 64 squares	Field of 130 squares	Field of 64 squares	Field of 130 squares	Field of 64 squares	Field of 130 squares	Field of 64 squares	Field of 130 squares	
Unemotional acceptance of the task	15.0	15.0	44.7	27.7	22.2	33.3	37.5	12.5	37.5	12.5	
Involved in the task	60.0	45.0	34.0	17.0	55.6	11.1	43.8	31.3	50.0	50.0	
Not involved in the task	25.0	40.0	21.3	55.3	22.2	55.6	18.8	56.3	12.5	37.5	

### Table 3

Correlation between the time of task completion and the level of development of personality traits

Parameter	Persistence	Self- possession	Determi- nation	Indepen- dence	Organi- zation	Sense of purpose
The value of Spearman's rank corre- lation co- efficient <i>r</i>	-0.216	-0.383	-0.241	-0.339	-0.342	-0.268

The dominant emotional response in the second experimental situation, when the field of 130 squares is presented, was a negative attitude to the task resulting in its rejection.

The comparison of the data in order to determine the correlation was carried out with the help of Spearman's rank correlation coefficient r. The research revealed significant correlation between the results of activity in the conditions of satiety and the development of personality traits. The analysis was conducted by way of comparison of the time of the task completion with the outcomes of expert evaluation. We can state that there is inverse relationship between the time of the task completion on the field of the size of a usual chessboard and the development of such personality traits as persistence, self-possession, determination, independence, organization and sense of purpose (Table 3). The children possessing these personality traits spend less time on the task completion, which corresponds to the high level of development of arbitrary regulation. The children are attentive and concentrated in the process of task completion.

The second experimental situation also demonstrates significant negative relationship with the personality traits – with independence (p = -0.269) and sense of purpose (p = -0.189).

The results of work under complicated conditions (the third situation) showed the presence of positive relationship with such personality traits as self-possession (p= 0.295) and organization (p = 0.266). And, on the contrary, inability to lay out more than one-two rows demonstrated significant negative correlation with the development of such traits as poor organization (p = -0.219) and absence of the sense of purpose (p = -0.285).

Our research allowed us to single out specific peculiarities of development of arbitrary regulation of activity in the conditions of mental satiety of children with hearing disorders in comparison with their peers with good hearing. Work under the conditions of monotonous activity is equally difficult for the children of both groups. The use of a large number of variations of activity performance is, on the one hand, an indication of such a state, and, on the other hand, allows the pupils to symbolically achieve the set goal in the long run. If the children with safe hearing are capable to optimize their activity independently and to use different variations and set limiting goals, the children with hearing disabilities need active assistance of adults both to create and to support the corresponding motivational tendencies and to organize their activity until they are fourth form pupils.

The main differences concern the quality of task completion. The children with safe hearing try actively to understand the essence of the task and the purpose of activity; they are distinguished by independence and organization. They produce more mature forms of emotional responses and are able to control their emotional state.

The children with hearing disorders are characterized by underdevelopment of arbitrary regulation which embraces the motivational sphere and the ability to regulate and control the emotions as well. At the time when the task becomes boring, the growing resentment to activity completion cannot be subject to complete arbitrary control. The external motive of activity the volume of the work - is important for the children with impaired hearing. The difficulties of these children in regulation of emotional states enhance mental satiety and the emotions they feel are contrastive: improvement of the emotional background and acceleration of the activity tempo alternate with periods of depression.

The peculiarities we have revealed testify to the lag in development of arbitrary regulation in children with hearing disorders and the need to carry out rehabilitationeducational work. This work should be designed on the basis of the individual approach taking into account the zone of proximal development of each concrete child. The work will be complex and multifaceted due to the complexity of the property itself. Development of the motivational sphere of children with hearing disabilities will be one of the urgent issues to investigate in the future. Formation of the cognitive motivation based on the need for new impressions is the most important one [3]. The presence of the corresponding hierarchy of motives is necessary for the development of arbitrary regulation of activity. Multiple motivation and hierarchy are the basic characteristics of the motivational sphere of man. Some motives are directly connected with activity; others are aimed at the result in terms of its external utilitarian significance. Thus, for instance, enhancement of motivation does not only lead to the increase of effectiveness of intellectual activity of children with impaired hearing manifested by the growing number of ideas produced by the children, but also to a change of the qualitative characteristics of solutions their originality, depth of design, etc. [2].

Goal achievement in education is often possible only in case of performance of a number of actions which may include those unattractive and uninteresting to the child due to

various reasons, for example, monotonous actions that need considerable effort and concentration. The child can perform these actions only if he is able to control his behavior.

Formation of the education activity itself - which is the leading activity at the junior school age - in the unity of all its structural components is an important area of rehabilitation-educational work. It is necessary to form learning-cognitive motivation in children with impaired hearing matching the content and the learning activity facilitating the creation of stable interest to this activity. School education has special social significance, new level of relations with adults and the need for acquisition of the rules of social behavior and following them. These peculiarities of education activity influence the intellectual development of children, the structure of their personality and the arbitrary regulation of behavior

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### SOCIO-COMMUNICATIVE POTENTIAL OF PATIENTS WITH SPEECH DISORDERS DUE TO ORGANIC BRAIN LESIONS OF VARIOUS ORIGINS

Abstract. The article deals with the problem of socio-communicative potential of patients with speech disorders due to organic lesions of the central nervous system of various origins. It considers differentiation of strategies of correction and predicting the effectiveness of speech therapy in the rehabilitation of patients with various speech disorders based on their potential socio-communicative abilities. The authors analyze the organizational and substantive aspects of improvement of correction and rehabilitation care, including speech therapy services to patients with stuttering and other speech difficulties caused by consequences of stroke, traumatic brain injury, neuroinfections, etc.

**Key words:** neurorehabilitation, speech disorders, stuttering, aphasia, focal brain injury, rehabilitation potential, differential strategy of correction, social and communicative capability.

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Over many years, the issues of investigation of the communicative function of man have been in the focus of attention of the leading scholars and specialists in the field of psychology (G. M. Andreeva, A. A. Bodalev, L. S. Vygotskiy, V. N. Kunitsyna, V. A. Labunskaya, A. N.

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Leont'ev, M. I. Lisina, B. F. Lomov, A. K. Markova, V. N. Myasishchev, B. D. Parygin, L. A. Petrovskava, S. L. Rubinshteyn, etc.), psycholinguistics (I. N. Gorelov, N. I. Zhinkin, I. A. Zimnyaya, A. A. Zalevskaya, V. A. Kovshikov, A. A. Leont'ev, A. D. Slobin, T. N. Ushakova, A. M. Shakhnarovich) and neuro-psychology and logopedics (A. G. Arushanova, T. V. Akhutina, L. Z. Arutyunyan, E. S. Beyn, L. I. Belyakova, N. A. Vlasova, T. G. Vizel', L. N. Galiguzova, A. N. Kornev, R. E. Levina, A. R. Luriya, G. D. Netkachev, V. V. Oppel', V. K. Orfinskaya, N. M. Pylaeva, V. I. Seliverstov, T. A. Fotekova, M. E. Khvattsev, L. S. Tsvetkova, V. M. Shklovskiv. M. K. Shokhor-Trotskava, etc.) not by chance, as communication has a considerable impact on the whole process of psychological development of man, which is the basis and the means of formation of his or her special relationships. Most specialists note that the person's social disadaptation and poor effectiveness of the system of his social functioning are the most important consequences of speech function disorders.

Persons with speech disorders of various geneses demonstrate malformation of the socialcommunicative behavior, which determines the urgency and practical significance of the problem under consideration. In the framework of our research, we look at the sociocommunicative potential of patients with speech disorders as a significant integrated parameter determining the purpose, tasks, content-organizational and methodological aspects of neurorehabilitation and the main criteria of evaluation of effectiveness of rehabilitation intervention.

Working out the scientificmethodological foundation of the concept "socio-communicative potential of patients with speech disorders" we referred to the theoretical positions presented in the Russian conception of communication by B. G. Anan'ev, G. M. Andreeva, A. N. Leont'ev, M. I. Lisina, L. A. Petrovskaya, S. L. Rubinshteyn, etc. This approach fully takes into account the social orientation of communicative activity. Thus, for example, M. I. Lisina considers communication as a process of people's interaction aimed to unite and match the efforts with the purpose of establishing relationships and achieving a common result (M. I. Lisina, 1985).

Considering the notions of "communication", "communicative activity" and "social communication" as synonyms, the authors brought their semantic, regulatory and demand-motivational components (preservation of emotionalpersonal and volitional regulatory preconditions of communication,

social-communicative intention, content, leading form of communication, regulation and control of realization of the program of sociocommunicative interaction) to the forefront. Another important constituent of socio-communicative activity is its operational component determining the effectiveness of using certain (verbal and nonverbal) means, correspondence of the strategies of interaction to the social and moral-ethical norms, and preservation of cognitive preconditions of socio-communicative interaction.

The comparative study of the socio-communicative potential of patients with various forms of speech disorders (stuttering and aphasia) was carried out during the period from 2007 to 2013 on the base of the Center of Speech Pathology and Neuro-rehabilitation of the Moscow City Department of Health Protection where unique opportunities for conducting а most complex patho-genetically grounded process of complex multi-professional intervention based on the combination of high-tech medical aid with a complex of neuro-rehabilitation procedures including, apart from purely medical, medico-psychological, medicopedagogical medico-social and intervention have been created. This process is targeted, first of all, the personal-communicative at

potential of the patient and at restoration of his social activity.

The sample included two groups of patients with different forms of speech impairment (aphasia and stuttering).

The first group consisted of 120 patients aged 18-75 undergoing treatment at in-patient departments #2 and #3 of the Center of Speech Pathology and Neuro-rehabilitation of the Moscow City Department of Health Protection with speech disorders caused by organic lesions of the brain. All patients of this group had logopedic diagnoses "Complex motor aphasia of predominantly efferent type" and "Complex motor aphasia of predominantly afferent type".

The second group included 120 patients aged 18-75 undergoing treatment at the logoneurosis ward of the Center of Speech Pathology and Neuro-rehabilitation of the Moscow Department of City Health Protection. The patients of this group had logopedic diagnoses "Severe logoneurosis (stuttering) of tonal-clonic type; of breathingvoice-articulation form", "Moderate logoneurosis (stuttering) of tonal-clonic type; of breathingvoice-articulation form". "Mild logoneurosis (stuttering) of tonalclonic type; of breathing-voicearticulation form"

Our research was carried out in the framework of the modern concep-

tion of neuro-rehabilitation (E. S. Beyn, T. G. Vizel', E. N. Vinarskaya, O. A. Krotkova, A. R. Luriya, L. I. Moskovichyute, V. L. Naydin, L. G. Popova, V. Ya. Repin, E. G. Simernitskaya, E. D. Khomskaya, V. M. Shklovskiy, M. K. Shokhor-Trotskaya, etc.) which formed during the period from 1959 to 1987 on the base of the Scientific Research Institute of Neurology of the Russian Academy of Medical Sciences. Later, in 1987-1992 the scientific guidance of the process of elaboration, approbation and implementation of innovative technologies of rehabilitation of patients with aftereffects of organic lesions of the brain took place on the base of the Center of Speech Pathology and Neuro-rehabilitation. At present, the Center of Speech Pathology and Neuro-rehabilitation is the central link in the uniform system of neuro-rehabilitation of patients with speech disorders caused by organic lesions of the brain in Moscow (Figure 1)

As a result of joint activity,

the scientific-methodological and organization center and the Department of speech pathology and neuro-rehabilitation of the Moscow Scientific Research Institute of Psychiatry of the Ministry of Health and Social Development of Russia, the Center of Speech Pathology and Neuro-rehabilitation of the Moscow City Department of Health Protection and city practical healthcare institutions worked out guidelines for the neurorehabilitation service. adopted standards and technological maps of neuro-rehabilitation of patients with speech disorders at different stages of impairment. The unique technologies of diagnostics and rehabilitation of higher psychological functions (HPF) disorders in persons of various ages with aftereffects of lesions of the central nervous system (CNS) which were approbated and implemented in the practical activity of the neurorehabilitation service are especially valuable.



Departments for patients with favorable prognosis who need long stay, treatment and neurorehabilitation Boarding houses for patients who need constant stay and care

Figure 1. The structure of the neuro-rehabilitation service of Moscow

Logopedic rehabilitation which is treated in the light of expansion of the existing and creation of new speech abilities, optimization of the communicative activity formation of the and sociocommunicative potential enhancing the opportunities of the individual to take an active part in social interaction is an important constituent part of complex rehabilitation of persons with various speech disabilities.

Logopedic rehabilitation is a complex process primarily aimed at rehabilitation and compensation for disorders of speech activity. The process of logopedic rehabilitation presupposes the development of sensory functions; motor skills, especially articulatory ones; development of cognitive activity, and, first of all, thinking, memory, and attention; formation of personality with simultaneous regulation of social relations; impact upon social environment.

Modern technologies and programs of logopedic rehabilitation of persons with various forms of speech pathology are designed on the basis of consideration of the correlation between safe and impaired components of the speech functional system and the cognitive preconditions for its realization. The study of the structure of impaired function and potential capabilities of the patient constitutes a significant stage and part of any rehabilitation process (E. S. Beyn, T. G. Vizel', L. S. Vygotskiy, S. D. Zabramnaya, I. Yu. Levchenko, A. R. Luriya, V. I. Lubovskiy, L. I. Moskovichyute, V. L. Naydin, N. B. Shabalina, V. P. Shestakov, V. M. Shklovskiy, etc.)

The technologies and methods of investigation of the structure of rehabilitation potential had been worked out over a number of years, but until the early 21<sup>st</sup> century there were no scientifically grounded methodology of complex evaluation of safe and impaired functions that would allow assessing the severity of the existing functional limitations and correlating them with the safe potential and level of social disadaptation.

Among the diagnostic methods worked out in 2000-2012 making it possible to solve the problems of prediction and monitoring effectiveness of the rehabilitation process, special attention should be given to the "Method of evaluation of the degree of limitation of life activity of patients of psychoneurological profile by the coefficient of their functional state" (T. I. Burmistrova, V. N. Luchaninova, S. V. Osmolovskiy, 2010) a modification of which can be used to evaluate the effectiveness of rehabilitation process. The method of evaluation of the functional state and rehabilitation effectiveness demonstrated its efficiency in the process of experimental approbation on a representative sample of those tested (913 patients of psychoneurological profile of various ages), which allowed us to consider the algorithm suggested by the authors as optimally matching the tasks of our research.

As part of our experimental work, we made up a program of study of experimental sociocommunicative potential of persons with speech disorders which is an integrative parameter reflecting the peculiarities and degree of manifestation of disorders and safe links of the demand-motivational and operational components of the sociocommunicative sphere of patients with speech disorders caused by organic lesions of the brain of various geneses.

We used the method of evaluation of limitations of sociocommunicative functioning of the members of the experiment in order to achieve the aim of our research. Determination of the degree of manifestation of limitations of socio-communicative functioning was carried out on the basis of testing and subsequent evaluation of the data obtained in points. Then we calculated the general coefficient of the socio-communicative potential with the help of the formula which took into account the following functional disorders:

- disorders of cognitive preconditions of social communication including impairment of attention, memory, visual, auditory and tactile gnosis and praxis;
- disorders of emotionalpersonal preconditions of social communication;
- disorders of psychological functions, thinking, and tempo of psychological development;
- disorders of the speechcommunicative sphere;
- disorders of social interaction and behavior.

Each functional disorder (i) is divided according to tables 1-5 into five levels (j) depending on the severity of manifestation of the disorder, and evaluated on a five-point scale (bj) from bj = 0 – high degree of disorder manifestation, where j = 1 to bj = 1 – absence of disorder, where j = 5.

Then we calculate the coefficient of the functional state of the socio-communicative potential according to the formula:

 $|\times b_j|$  $\times 100$ m

where n – number of impairments in each type of functional disorder, m – total number of evaluated disorders, B – type of functional disorder, Bi – presence of the given kind of disorder: yes – 1, no – 0; bj – evaluation score calculated in the following way: given j = 1, b1 = 0; given j = 2, b2 = 0.25; given j = 3, b3 = 0.5; given j = 4, b4 = 0.75; given j = 5, b5 = 1.

If K is more than 75%, we register a mild degree of limitation of socio-communicative functioning; if K is more than 50% but less than 75% – a moderate degree, if K is less than 49% – a severe degree.

The suggested method of evaluation of the degree of limitation of socio-communicative functioning of patients with speech disorders of various geneses allows for objective evaluation of the level of the patient's socio-communicative capabilities and his ability to integrate in the society. In addition, on calculation of the coefficient of socio-communicative functioning before and after the logopedic rehabilitation procedures, the method makes it possible to objectively evaluate the effectiveness of the logopedic measures both on the whole and for each type of functional disorder.

Our research allowed us to determine significant objective criteria for evaluation of the degree of limitation of the socio-communicative functioning of patients with various forms of speech disorders. Based on the coefficient of sociocommunicative potential, we have singled out three levels of limitation of socio-communicative functioning.

I degree (mild limitation) more than 75%. Patients with insignificant manifestations of sociocommunicative disadaptation. In most cases, they had mild neurodynamic, emotional-personal and speech disorders and typical level of intellectual development; they did not practically need anyone's assistance, their behavior and actions were conscious and corresponded to the social norms, and their verbal and non-verbal means of communication were successfully used for socio-communicative interaction. It is typical of this group to show total absence of minimum presence of manifestation of personal and communicative disorders; average statistical indices of social status; conscious interest in communication; skills to orient in partners and

communication situations; slight inadequacy of the means of communication and cognitive sphere.

II degree (moderate limitation) - from 50% to 75%. Because of marked impairments of the demandmotivational and operational components, the patients of this group demonstrated stable personal and communicative disorders; medium and low status in social hierarchy; avoiding communication on the basis of verbal means, difficulties in social awareness, problems with the choice of the strategy of interaction with different partners in various communication situations, pronounced lack of means of communication: stable manifestations of underdevelopment of the cognitive preconditions of the communication process.

III stage (severe limitation) less than 49%. The given group comprised patients with severe disorders of socio-communicative functioning. They were characterized by sociopersonal immaturity or inadequacy; low status in social hierarchy; absence of the need to communicate; presence of clearly expressed stable communicative difficulties; salient inadequacy of speech competence, sharp limitation in the use of verbal and nonverbal means of communication: stable and evident symptoms of complex underdevelopment of higher psychological functions.

A variable program of logopedic rehabilitation accompanied by

a complex of other neurorehabilitation technologies was made up on the basis of the revealed tendencies.

The leading role in the process of rehabilitation belongs to the Department of Clinical Psychology of the Center of Speech Pathology and Neuro-rehabilitation which is the coordinating center of the specialized service providing assistance for adult persons and children with disorders of higher psychological functions (including speech) with focal lesions of the brain as a result of cerebrovascular accident, craniocerebral trauma and other diseases of the central nervous system. The specialists of this Department in partnership with the doctor carry out objective evaluation of rehabilitation potential of the patients on the basis of a complex analysis of results of neuro-psychological observation of the state of the higher psychological functions complemented by the data of X-ray and functional diagnostics, the data of laboratory analyses and program the rehabilitation rout engaging specialists of other departments if necessarv.

In the course of realization of the individual program of rehabilitation, the specialists monitor all changes and in case of need correct the content of rehabilitation procedures.

The structural divisions of the

Center of Speech Pathology and Neuro-rehabilitation work in close partnership ensuring continuity of the rehabilitation process at all stages of the compensation treatment and socialization.

Table 1

Degree of limita-		Type of speech disorder										
tion of socio-	Motor aphasias					Stuttering						
communicative	efferent		afferent		severe		moderate		mild			
functioning	Ν	= 60	= 60 N = 60		N = 55		N = 42		N =2 3			
I degree (mild limitation)	10	16.67%	14	23.34%	_		2	4.76%	19	82.61%		
II degree (moderate limi- tation)	34	56.67%	38	63.33%	3	5.46%	38	90.48%	4	17.39%		
III degree (severe limita- tion)	16	26.66%	8	13.33%	52	94.54%	2	4.76%				

Peculiarities of the socio-communicative potential of patients with speech disorders caused by organic lesions of the brain of various geneses

As a rule, the beginning of reprocess immediately habilitation after the patient's coming out of a coma. stabilization of his vital functions and emergence of conscious activity takes place in the early rehabilitation ward (sometimes, in the reanimation department or intensive care unit) at in-patient clinics of the neurological or neuro-surgical profile. And the list of rehabilitation procedures includes both obligatory medical measures (medicamentous therapy, physiotherapy, therapeutic physical training, massage, etc) and specialized work on incremental stimulation and actualization of the swallowing function, restoration of the damaged functions of cognitive (gnosis, attention, praxis, memory, etc.) and speech spheres (disinhibition of speech with the help of the means of non-verbal communication and other logopedic techniques) in accordance with urgent and potential capabilities of the patient. This work is first carried out in early rehabilitation wards. and then at specialized surgeries of therapeutic physical training, massage and logopedics by neuropsychologists, logopedists, specialists in neuro-motor training, etc. Multiprofessional interaction is coordinated at this stage by the doctor in charge of the case.

Depending on the somatic and physical state of the patient, the peculiarities and degree of manifestation of disorders of the motor, speech and
cognitive spheres of the patient and other circumstances, the specialists decide upon the optimal conditions for his further neuro-rehabilitation. The optimal neuro-rehabilitation rout after leaving the in-patient clinic is formed by the commission of the Center of Speech Pathology and Neuro-rehabilitation which includes specialists of various profiles, logopedists and psychologists.

The necessary volume of rehabilitation procedures is determined after complex observation of the patient at the consultingdiagnostic department of the Center by a psychiatrist, neurologist, cardiologist, therapeutist, physical training therapeutist, logopedist and neuro-psychologist.

On the basis of analysis of the observation results, the specialists of the selection commission evaluate the patient's referral to a subdivision of the Center of Speech Pathology and Neuro-rehabilitation (day inpatient department, davtime inpatient facility for teenagers and adults with stuttering, in-patient facility at home, children's department for logo-neuroses, in- and out-patient complex for children or specialized surgeries of territorial policlinics, psycho-neurological dispensaries, etc.).

Interdisciplinary complex treatment at the Center includes high-tech neuro-psychological methods of diagnostics and programming the processes of rehabilitation, neuro-sensory and neuromotor programs, overcoming the disorders of the body schema and special awareness, individual and group sessions with neuropsychologist or logopedist, physical training therapy, robotics (Lokohydro-kinesthetic mat), therapy (therapeutic swimming), use of antigravitation suits, sole stimulators, etc. Creation of motivation and stimulation to specialist care is a most important task of work with the patient at all stages of treatment and neuro-rehabilitation.

The duration of treatment in each department of the Center is determined by the commission depending on the diagnosis. And the volume of complex rehabilitation measures for each patients provided by the Center departments or other divisions of the service (diagnostics, medicamentous treatment, physiotherapy, therapeutic physical training, massage, psychotherapy, logopedic lessons, neuro-sensory and neuro-motor training, work with computers, socio-therapy, etc.) are determined collegially.

The patients who have passed a course of intensive therapy and neurorehabilitation at the Center departments are sent to continue rehabilitation therapy at specialized logopedic consulting rooms of territorial policlinics, policlinics of rehabilitative treatment, psycho-neurological and physical culture dispensaries at the place of residence or in-patient facilities at home. Thus, long-term continuing treatment and neuro-rehabilitation are provided as fully as possible.

Such system makes it possible to realize the most critical principles – continuity, duration and intensity and ensures consistency of multiprofessional interactivity of specialists, which improves the effectiveness of treatment and neuro-rehabilitation and facilitates fastest restoration of the social functioning of the patient.

As a result of assessment of the indices of socio-communicative potential of the experiment participants at different stages of realization of the program of neuro-rehabilitation we have obtained the following data (Table 2).

Table 2

Dynamic indices of effectiveness of neuro-rehabilitation of patients with various forms of speech disorders, %

Degree of	Type of speech disorder									
limitation of	Motor aphasias				Stuttering					
socio- communicative functioning	efferent N = 60		afferent N = 60		severe N = 55		$\begin{array}{l} moderate \\ N = 42 \end{array}$		mild N = 23	
I degree (mild limita- tion)	16.67	50.00	23.34	48.34			4.76	52.38	82.61	100
II degree (moderate limitation)	56.67	38.34	63.33	41.66	5.46	52.72	90.48	47.62	17.39	
III degree (severe limita- tion)	26.66	11.66	13.33	10.00	94.54	47.28	4.76			

Thus, our research shows that the suggested system of differentiated complex neuro-rehabilitation of patients with speech disorders and the method of evaluation of their sociocommunicative potential have proved its practical significance and can be recommended for application at various rehabilitation institutions.

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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-

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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 teacherdefectologist 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 wellknown 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 routs for the two categories of children 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 (psychomedico-pedagogical councils of education institutions, psychomedico-pedagogical commissions, facilities for children in need of psycho-pedagogical and medicosocial assistance – diagnostic and consulting centers, center of psycho-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 awareness the 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 individualcentered 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 psychomedico-pedagogical commissions selecting pupils for classes and groups with integrated learning.

The structure of LOCDC includes a number of departments: diagnostics and counseling departpsycho-medicoment (central 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, teacherdefectologist (in the corresponding profile: oligophrenopedagogue, surdopedagogue), tiflopedagogue, 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, behavioral and other disabilities are manifested too vividly, it is strongly recommended that they go to study at special (rehabilitation) education institutions.

UDK 376.1:159.923.2-053«465.07/.11» BBK Ю972-72+Ю984.14-72 GSNTI 14.29.09 Code VAK 13.00.03

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## RESEARCH OF PECULIARITIES OF SELF-CONSCIOUSNESS OF 7—8 YEAR OLD CHILDREN WITH DISABILITIES IN ARTISTIC ACTIVITIES AS A SOCIO-CULTURAL COMPONENT OF PERSONALITY

**Abstract.** The article presents a comparative analysis of specific of manifestations of self-consciousness in artistic activities as a sociocultural component of the personality of 7—8 year old children with disabilities (HIA) and their normally developing peers.

**Key words:** self-consciousness; socio-cultural components of identity; children with disabilities; art; artistic activity.

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Today, the problem of development of children with disabilities in the context of socio-cultural formation of personality needs special attention and meticulous study from the point of view of socialization and formation of subjectness of children of the given category.

The scientific school of L. S. Vygotskiy regards the process of personality development, on the one hand, as a process of acquisition of social experience, and, on the other,

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as a process of acquiring more and more independence as a result of which each person creates their unique image [10, p. 155].

D. I. Fel'dshteyn notes that these two directions are inseparably connected with each other. And the process of individualization is impossible without formation of selfconsciousness, development of selfconcept, perfection of own personality characterized by the fact that the person is aware of his own self and acts as the subject of activity [16]. Self-consciousness is one of the components determining the socio-cultural development of personality and the necessary condition of performance of any kind of conscious human activity.

Quite a number of studies have been devoted to consideration of selfconsciousness both in Russian and foreign psychology (R. Berns, L. I. Bozhovich, N. M. Borozinets, I. S. Kon, O. G. Kulish, M. I. Lisina, O. A. Mitina, M. A. Mosina, V. S. Mukhina, A. Kh. Popova, S. L. Rubinshteyn, O. V. Selezneva, V. I. Slobodchikov, V. V. Stolin, etc.). The majority of authors believe that self-consciousness is primarily a process with the help of which man cognizes himself and works out the attitude to his own self. There is no unanimity in determining the structure of self-consciousness, and the grounds for identification of structural components vary greatly. In most cases, specialists (R. Berns, I. V. Vachkov, I. S. Kon, K. K. Platonov, V. V. Stolin, P. R. Chamata, I. I. Chesnokova, etc.) the composition view of selfconsciousness as a unity of three components: cognitive, emotional and regulatory.

The development of selfconsciousness of a person is connected with inclusion of selfconsciousness in the culture of common activity both with peers and adults.

The child does not reach a

proper level of development of selfconsciousness at the junior school age. In order to become a real subject of self-development (this may happen only at teenage age) it is necessary to purposively create the conditions for the development of the child's self-consciousness, and, namely, to start forming knowledge about one's own "self", attitude to one's "self" and control of one's "self" from the very moment of the child's inclusion in the systematic learning activity [1].

The problem of selfconsciousness is dealt with not only in general and developmental psychology but also in special psychology. The corresponding researches are devoted not only to the issues of development of self-consciousness of children with disabilities on the whole but also to its certain parameters: self-consciousness (Yu. Z. Zamaletdinova, V. S. Probylova, A. V. Shevchenko), self-attitude (Al'shavea Nabila Ali Akhmed, N. Yu. Zelenina, A. A. Izvol'skaya, O. A. Talipova), self-image (I. A. Koneva), self-conception (V. V. Ipatova, T. I. Kuz'mina, E. V. Svistunova, I. A. Chistogradova). The problem of self-evaluation in children with various forms of dysontogenesis is one of the most thoroughly studied aspects of special psychology and pedagogy: with disorders of psychological development (N. L. Belopol'skaya, G. V. Gribanova, N. A.

Zhulidova, I. V. Korotenko, L. V. Kuznetsova, A. I. Lipkina, E. A. Medvedeva, E. I. Savon'ko, V. M. Sinel'nikov, E. S. Slepovich, S. I. Smirnova, I. V. Sychevich, R. D. Triger, etc.), with intellectual disability (A. D. Vinogradova, Ya. L. Kolominskiy, M. I. Kuz'mitskaya, O. S. Nazarevich, Zh. I. Namazbaeva, S. Ya. Rubinshteyn, Zh. I. Shif), with hearing disorders (V. G. Petrova, V. L. Belinskiy, M. M. Nudel'man, A. P. Gozova, T. N. Prilepskaya, I. V. Krivonos), with speech disorders (L. S. Volkova, O. N. Usanova, V. I. Seliverstov, O. A. Slin'ko), with visual impairments (D. Jarvis, T. V. Rozanova, T. Rupponen, T. Maevskiy, I. N. Nikulina). with disorders of the musculoskeletal system (M. V. Vagina, E. S. Kalizhnyuk, I. Yu. Levchenko, E. M. Mastyukova) [3; 5; 7; 9; 10; 11; 12; 14; 16 etc.].

Being a unique and extremely special phenomenon, evolution of the personality of a child with disorders of psychological development is possible only through realization of himself and through movement towards his own self – it is only in this case that the personality can function as the subject of socialization [10, p. 29].

According to E. A. Medvedeva, development of selfconsciousness in artistic activity can be achieved via artistic means in the process of communication with peers and adults in the educational environment. Achievements in the artistic activity and in the interaction with peers and adults may enable such a child to find the source of cognition of his own self, to accept his own self and to form a positive attitude to himself [11, p. 122].

But the opportunities of development of self-consciousness of children with disabilities by means of art under the conditions of additional education have not been dealt with as a separate area of research.

In this connection, **the aim** of our research is to reveal the peculiarities of self-consciousness as a socio-cultural component of the personality of 7-8 year old children with disabilities in artistic activity.

A total of 150 children aged 7-8 (100 of children with disabilities and 50 typically developing peers) were recruited for the experimental study. We designed a diagnostic block including two tasks (a talk "Tell me about yourself" by A.S. Pavlova and a modified variant of experimental game "Round the dance" by E. A. Pan'ko) based on analysis of psycho-pedagogical literature and review of research procedures.

Our study of the peculiarities of self-consciousness of the children of the experimental group was based on analysis of quantitative and qualitative indices.

The quantitative analysis

was carried out on a three-point scale within each parameter.

The Mann-Whitney U test that allows evaluating the significance of differences for certain parameters while comparing groups of typically developing children with children with disabilities was used for statistical procession of results.

The qualitative analysis of the peculiarities of self-consciousness was carried out according to the following criteria:

• personality traits;

• *attitude to oneself in activity* (abilities, habits, skills, knowledge, achievements);

• socio-behavioral manifestations (position in the social environment; the attitude of other people – parents, pedagogues, peers; behavior).

We have worked out and used **level-sensitive qualitative parameters** in order to reveal the peculiarities of self-consciousness as a socio-cultural component of the personality in typical children and children with disabilities in artistic activity more detail.

The comparative data of diagnostic study targeted at revealing the peculiarities of self-consciousness as a socio-cultural component of the personality of junior schoolchildren with disabilities and their typically developing peers in artistic activity are shown in figure 1.



*Figure 1.* Comparative indices of self-consciousness as a socio-cultural component of the personality of 7-8 year old children with disabilities and their typically developing peers in artistic activity. *Note:* 1 – high level; 2 – medium level; 3 – low level.

Our analysis of experimental data allowed us to register differences with high level of statistical significance in the typically developing children and the children with disabilities in all criteria: *personality traits* (p < 0.010), *attitude to oneself in activity* (p < 0.010), and *sociobehavioral manifestations* (p < 0.010).

Quantitative and qualitative analyses of the peculiarities of selfconsciousness as a socio-cultural component of the personality of 7-8 year old children with disabilities and their typically developing peers in artistic activity showed differences and possibility to differentiate them in three levels (high, medium and low).

The high level was manifested in the qualitative assessment of selfconsciousness as a socio-cultural component of the personality of 7-8 year old children with disabilities and their typically developing peers in the following way: only 60% of typically developing children demonstrated salient ability to analyze their **personality traits** (I am a good girl, I always share my toys with other children; I am not a very strong-willed boy, sometimes, cannot fight back; I am honest, but not in all cases, I may lie to my parents). 66% of typically developing children and 8% of children with disabilities could express a wellargued attitude to themselves in

learning and artistic activity, give independent judgment an about their abilities. habits. skills. knowledge and achievements (I can dance well; I can't sing well, though I try to; I do not always solve problems correctly; sometimes I make mistakes). The sociobehavioral manifestations. adequacy and differentiation of social belonging (I am a pupil because I go to school; I am a daughter of my parents; I have a grandmother, and I am her granddaughter), the independence of judgment about the attitude of adults and peers to the child (The teacher often praises me for correct answers; the parents scold me if I forget to feed the cat), and about the child's own behavior (I often fight with my younger brother; I have many friends) were observed in 64% of typically developing children.

The medium level was observed in 26% of typically developing children and 66% of children with disabilities in evaluation of their own personality traits. The children of this group had unclear images about themselves, and they needed the help of an adult to single them out. The attitude to themselves in activity while evaluating their own abilities, habits, skills, knowledge and achievements, was characterized by the use of unextended utterances. The sociobehavioral manifestations in 28%

of typically developing children and 56% of children with disabilities were characterized by sheer enumeration of their social roles (*"son", "pupil", "sportsman"*, etc.), and by very simple utterances about the attitude of adults and classmates to the child and about his own behavior.

The low level of evaluation of one's own personality traits was found in 14% of typically developing children and 34% of children with disabilities, and the own personality traits were not singled out; there was a certain conceptual limitation. 12% of typically developing children and 30% of children with disabilities demonstrated a superficial nature of judgment about their own abilities. habits, skills. knowledge and achievements in activity. socio-behavioral The manifestations in 8% of typically developing children and 44% of children with disabilities showed problems in naming their social status even with the help of an adult and inadequacy in evaluation of the child's own behavior (I often fight but still I'm a good boy).

Summing up the data about the peculiarities of selfconsciousness as a socio-cultural component of the personality of 7-8 year old children with disabilities we can single out the following specific features of the children of the given category:  predominance of the medium and low levels of selfconsciousness;

- marked difficulties in evaluation of their own personality traits, abilities, skills, achievements and socio-behavioral manifestations without the help of an adult;

- inadequate and undifferentiated self-evaluation;

 fuzzy assessment of their own personality traits, character and behavior;

– superficial ideas about themselves.

Based on the data of our study of the peculiarities of selfconsciousness of the personality of 7-8 year old children with disabilities in artistic activity, we can draw the following conclusions.

1. The diagnostic block made up and used by us to reveal the peculiarities of self-consciousness makes it possible to study its specificity in 7-8 year old children with disabilities.

2. The results of our experimental study demonstrate immaturity and malformation of selfconsciousness as a socio-cultural component of the personality of 7-8 year old children with disabilities in artistic activity, heterogeneity and domination of the medium and low levels in all parameters under observation.

3. Comparative analysis of the experimental data allowed us to

obtain level-sensitive qualitative characteristics of development of self-consciousness as a sociocultural component of the personality of 7-8 year old children with disabilities in artistic activity.

The revealed peculiarities of self-consciousness as a sociocultural component of the personality of 7-8 year old children with disabilities in artistic activity determined the necessity to work out technologies and content of lessons aimed at their development by means of art under the conditions of general and additional education.

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# ON THE FORMATION OF LINGUISTIC COMPETENCE IN ADOLESCENTS WITH SEVERE VISION IMPAIRMENTS

**Abstract.** The article presents a method of formation of linguistic competences on the basis of universal educational actions, growing feeling experience and developing hearing perception.

**Key words:** universal educational (cognitive, regulatory) actions, linguistic competence, model, Russian language lessons, pedagogical conditions. **About the author:** Polyakova Nadezhda Petrovna, Degree Applicant.

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The modern Russian language teaching programs are based on the communicative process-focused approach facilitating the formation of meta-subject and subject skills in schoolchildren.

Teaching Russian at special schools for blind children and children with vision impairments is held on the basis of general education programs. Hence, children with severe vision impairments, the same as children with typical vision, should acquire communicative, cognitive and regulatory learning actions and, on their basis, develop communicative, linguistic and culturological competences in the framework of the given process.

The author of the given article presents an educational rout of formation of linguistic competences on the basis of the new FSES and the requirements of typhlodidactics.

The notion "linguistic competences" includes knowledge of the pupils with severe vision impairments about the discipline "Russian Language" in general, about its parts and purposes of scientific study of a language; elementary information about the methods and stages of development of the science about the Russian language, about outstanding linguists working in the sphere of this science; learning linguistic habits and skills facilitating the development of the pupil's personality which are formed on the basis of all safe analyzers activating their cognitive activity.

Development of universal learning actions, and namely, the cognitive and regulatory ones, facilitates the acquisition of linguistic competences.

Universal learning actions are certain learning skills; i.e. they reflect the capacity of the pupils with severe vision impairments for selfdevelopment and self-perfection formed as a result of conscious and active acquisition of new relatively objective social experience on a limited sensory basis.

Different skills, such as ability to formulate the learning problem, its acceptance and solution; performing various operations with linguistic means (analysis, synthecomparison. classification): sis. formulation of reasoning, conclusion, summing up in a verbal, schematic and model form: awareness of the essence of the actions performed and of the sequence of necessary operations; and control of one's activity are developed on the basis of these actions.

Formation of linguistic competences should take into account the peculiarities of children with severe vision impairments and their special educational needs: character of the visual analyzer defect, time of vision loss, the quality of secondary deviations; the need for attenuated schedule; the need to form the basic concepts; capability to control, correct and evaluate the character of the learned material.

Formation of linguistic competences in general is a system comprising the simultaneous processes of enriching sensory experience and development of auditory comprehension, acquisition of linguistic concepts and mastering practical learning actions. Its functioning is ensured by realization of relatively consciously constructed external circumstances, factors and unity of the necessary measures influencing it to a large extent.

One of such conditions is represented by the level of formation of cognitive and regulatory univerlearning actions: meaningsal establishing connection making, between the content of academic disciplines and cognitive interests of the learners; regulatory actions of control (attention. self-control): sign-symbolic cognitive skills to differentiate between the plane of signs and symbols and the real objects plane (object and speech reality).

The process of formation of the above mentioned qualities is based on the stimulating approach. This approach is based on the axiological activity co-realized by the teacher and the pupil in which the latter is an active participant, exercises control, correction and evaluation of the learned material. All this stimulates intellectual independence, interest to learning, substantial approach to the task under completion (reaching the set goal and choice of means of achievement), and self-regulation.

The work is carried out using active and interactive methods of teaching in combination with special techniques organizing the process of learning (involving safe analyzers and bisensory perception of material), accessibility of the learning information and its structuring (work with handout material, activity algorithm, distribution of visual aids, selection of information, registration of reproductive activity, perception of re-coded information, singling out significant properties, systematization of images, correlation, comparison, generalization, finding analogues, concretization), the use of typhlotechnology.

Formation of universal learning (cognitive and regulatory) actions is based on the stages of acquisition of primary experience and motivation for further activity; mastering new methods of activity; training accompanied by its inclusion in the learning activity, selfcontrol, correction of its performance; control. Thus, for example, the teacher creates the conditions for the teenagers' acquisition of primary experience and motivation for further activity (problem description and goal setting) at the first stage while mastering signsymbolic cognitive skills. Then, on the basis of the experience thus obtained, the teenagers master the general method of application of the skills under formation. At the next stage, the learners begin to independently use the skills, specify and adjust them. The teenagers exercise self-control based on self check according to a model. It is at this stage that the final acquisition of the skills under formation takes place. The teacher controls the level of development of sign-symbolic cognitive skills and universal learning actions on the basis of evaluation criteria designated for general education schools.

The process under realization is found in all key elements of structural organization of lessons: introduction of special propedeutic periods; alternation of various kinds of activity; the tempo of the learning activity and the character of rehabilitation habits and skills.

The propedeutic stage prepares for acquisition of primary experience and further activity. The specific features of the future work are clarified and the children are acquainted with the Braille characters, symbols and mapping and encoding signs. Mastering the general methods of activity and independent application of the acquired skills by teenagers takes place in the situation of alternation of visual and tactile work with auditory perception. Quite often, the teenagers of the same class differ in the tempo of activity and the level of formation of rehabilitation skills, which influences the quality of acquisition and self-control. This fact accounts for the differential approach to selection of the learning material.

The structure of the given process is determined by three complementary conditions: formation of universal learning actions as the goal of education defines its content and organization; their acquisition takes place in the context of various academic disciplines; the qualities and properties of these actions determine the efficiency of acquisition of meta-subject and subject skills. The goal of activity consists in the formation of cognitive and regulatory actions. The learning program material in Russian specially selected for the purpose and containing tasks and exercises facilitating the acquisition of linguistic skills, and the set of methods (active and interactive) of teaching lead to the achievement of the goal. In connection with the fact that universal learning actions should be formed in the context of acquisition of all disciplines, a common rout of their formation is designed. The qualities and properties of these actions determine the efficiency of development of linguistic competences.

The activity is realized in close connection with the development of rehabilitation skills (awareness in micro-space, use of impaired (partial vision) and safe perception), and in some cases determines it.

The process is based on the FSES requirements towards the results of acquisition of the basic educational program in Russian on the systemic process-focused approach.

The problem situation presupposing the existence of several variants of solution of the problem task is created the stage of selfat determination (inner preparation of the learner for learning activity and actualization of knowledge). For example, short pre-topic texts containing both the already known and the new material are offered at the beginning of the lesson. The pupils are to figure out what they already know and what is to be worked at during the lesson. As a result, the teenagers concentrate their attention on what they have already acquired and define its character and quality. They are stimulated to master new actions and begin

to realize the necessity to perform them. They select means adequate to the situation which would let them solve the presented problem independently. This leads to the formation of the skills to independently single out and formulate cognitive goals, to determine difficulties in their own activity, to reveal the causes, to set the aim of further activity, to choose the means and methods of goal attainment and self-regulation.

Search, analysis and structuring of information are performed at the stages of setting the learning task and provision of new knowledge. Efficiency of these stages of the lesson is ensured by group or pair work (constant or temporary). For example, the task based on the work with a new rule "Read the rule, then read two texts and figure out what they differ in; give reasons and prove your answer on the basis of the rule and examples from the text" based on the use of information search methods facilitates the formation of the skills to look for the necessary information, to compare, analyze, and formulate own conclusion, opinion and position, and to coordinate various positions in interaction.

Individual work targeted at bridging the pupils' knowledge gaps on the basis of self-control and mutual control is carried out at the stage of inclusion of new knowledge in the system of revision. It is based on correction of mistakes and skills to follow the instructions and enables the pupils to evaluate the gaps in the material already learned.

In the process of marking individual learning exercises, the teacher writes special symbols in the margin which signal a mistake in the given line (orthographical, punctuation or grammar mistake). Then the notebooks are handed pound to the pupils. They are to find the mistakes, to correct them and to explain their using this or that rule.

In pair work, while doing exercises on consolidation of the known material the pupils exchange their notebooks. Then they either mark the mistakes with pencil (in case they are teenagers with partial vision loss) or write down the fragment in which they were found (teenagers using the Braille system) and explain them with references to the rules.

In individual-collective work, the pupils are offered texts with the same set of mistakes (semantic, orthographical and punctuation ones). The exercises are first done individually, and then in a group on the basis of reading the completed tasks and comparing the results with subsequent choice of the correct variant and explanation.

The exercises forming the skills to fulfill the instructions and to follow the model closely include, for example, the task "Use the verb in the form of the second person according to the model (bit' — b'esh', b'esh'sya)" and tasks giving a chance to form the skills of structuring knowledge and choosing the most efficient methods of solving problems depending on concrete conditions.

At the stage of generalizing the knowledge obtained and reflection of learning activity, the pupils are offered tasks allowing the teacher to assess the quality of the material acquired and the actions learned, for example, short tests. For two or three minutes, the pupils answer questions, and then the papers are looked through by the teacher and handed round. The task with a mistake is marked with a special sign. At home, the pupils compare their answers and actions with the information from the textbooks: as a result, reflection of the pupils' own activity takes place.

The level of formation of cognitive and regulatory actions in teenagers influences their activity in the outer world cognition. The nature of performance changes, the system of feedback is qualitatively organized; formation and development of mental operations and conceptual thinking; perfection of the skills to search for and single out information and make up utterances.

Observance of this condition guarantees self-development of the personality, reinforcement and enrichment of cognitive and regulatory actions in the process of formation of linguistic competences. As a result, the teenagers get a chance for further socialization and integration on the basis of their linguistic reflection and activization of cognitive activity.

The process of formation of linguistic competences takes place alongside the first one. It contains closely connected mutually determining stages.

The first stage presupposes creation of the foundation - replenishing sensory experience and development of hearing perception. The following aspects are formed on its basis: images of objects, qualities of images reflecting the surrounding world; skills to generalize on the ideas formed and ability to logically explain their adequacy; skills to understand abstract notions: skills to listen to recorded or orally presented texts; skills to remember and keep in memory what one hears (general content, particular details, short and long texts, suggested order of the parts, semantic changes connected with rearrangement of the parts); skills to single out the most important and secondary information in the text: skills to title the comprehended text; skills to single out parts and determine their role in the context of the whole text: skills to understand semantic changes in the text (rearrangement of the parts, division into parts, syntactic restructuring of sentences, inclusion of new information in the text).

The formation of the basis takes place via realization of the developing approach. Exercises and tasks embedded in its structure and based on the linguistic material learned by the teenagers, and on their training from the position of maximum activity of all safe analyzers ensure replenishing the sensory experience and development of the hearing perception. Their proper application facilitates good acquisition of the program material and rehabilitation of secondary deviations. For example, while learning the topic "Prepositions", the pupils are offered the following exercise: "Choose the preposition with the right meaning and use it in the sentence. Explain your choice.". As a result, the pupil learns the spelling and develops his space awareness.

In studying parts of speech taking into account the signsymbolic cognitive skills to differentiate between the plane of signs and symbols and the plane of real objects, the children enrich their scope of concepts about the surrounding reality and develop the objective reference of the word. For example, when the pupils study the topic "The Noun", the sphere of their concepts about the surrounding reality expands. When they study the topic "The Adjective" the area of their concepts about the qualities of the surrounding objects becomes deeper.

The tasks based on purposive observation, work with pictures, etc. involving the regulatory actions of control (attention and self-control) promote correction of the methods and techniques of the pupils' intellectual activity due to algorithmization. For example, the pupils are given exercises on differentiation and recognition (work with words of the same root, synonyms, antonyms, paronyms, etc.). Tasks based on reproduction of something comprehended or seen from memory (composition, reproduction based on a picture, composition on the topics (Seasons", "My House", "My School", etc.).

Exercises meant to develop auditory memory and attention form the skills to listen to an audio text. to sort out and systematize information, self-regulation, self-control, differentiating between object and speech reality. At the same time, this work guarantees the development of skills to use the methods of information search, semantic reading, finding the necessary information. differentiating between basic and secondary information. For example, the pupils are given the exercises: "Listen to the text. title it, define the main theme or problem, determine the author's position on the problem, find out the expressive means used in the text and give examples, write a reproduction of the text. Listen to the text (more often, it is an article containing additional information on the topic), find the linguistic terms in it using reference literature, define their meaning, etc.".

When the pupils complete tasks based on auditory support, they get new auditory impressions on the basis of self-control and sign-symbolic cognitive actions. For example, audio dictations allowing the teenager to visualize not only the graphical image of the word but also its auditory contour help him to overcome underdevelopment of phonemic and speech awareness. The quality of written tasks completion is raised in this case.

While expanding sensory experience and developing auditory perception, we observe the formation of linguistic competences on the basis of the knowledge acquired in the course of work and completion of creative and practical tasks; reinforcement of the cognitive and regulative actions promoted by their involvement in the process of activity.

The second stage includes formation of linguistic competences: knowledge about the works and discoveries of linguists, about the history of Russian linguistics; skills of analyzing, comparing, classifying and grouping language facts; recognition skills; analytical skills; spelling and punctuation skills; skills of working with reference literature.

The process is subdivided into two interconnected blocks: acquisition of linguistic notions and mastering practical learning actions.

It is built on the principles of special pedagogy, particular didactic principles (historical, extralinguistic, systemic, structural-semantic and functional ones) in relation to the discipline "The Russian Language".

The historical principle is based on providing knowledge about the historical changes that have taken place in literary Russian and are preserved in it in this or that form. This facilitates the development of scientific views on the language and understanding of the essence of linguistic phenomena on the basis of additional tasks completed by the pupils (review, report, etc.).

The extralinguistic principle enhances the pupils' understanding of connection between language and the extralinguistic world. For example, studying lexicology provides new ideas about the role of polysemantic words, homonyms, synonyms and other lexicological and phraseological phenomena, and enriches the sensory experience.

The systemic principle leads to the formation of the pupils' views on linguistic units as a system of inter-

connected elements. For example, the ties between vocabulary and morphology are considered in the process of word form derivation (*list* — organ rasteniya, *list'ev* ??? to zhe samoe!!!— ploskiy kusok, sdelannyy iz kakogo-libo metalla, listov). It results in understanding the essence of the phenomenon, prevents various mistakes and enriches sensory experience.

The structural-semantic principle facilitate acquisition of the skills of work with linguistic units not only from the point of view of their formal expression but also in terms of their meaning. The pupils' attention is focused on the fact that there are meaningful units at practically all levels of the language morphemes, words, sentences - in other words, on the dual nature of the linguistic sign. For example, while studying the morpheme the teenagers are told that morphemes are the smallest meaningful parts of the word, and that is why morphemic analysis cannot be carried out mechanically.

The functional principle allows the teacher to demonstrate the functions of the units of different levels to the pupils, for example, the significative function of speech sounds in strong positions (phonemes).

We begin with the pupils' acquisition of linguistic notions on the basis of information, discussion and creative activity.

Information provision is aimed at expansion of knowledge about the history of linguistics, translation of new information, acquaintance of the pupils with new information with the help of various sources. The work is based on the methods of information search, reading popular science materials about linguists and their scientific discoveries, retelling what they have read, preparing reports, free form dictation, reproduction, talk, lecture and independent text analysis. The activity is built on the basis of the skills which are being formed: meaning-making, establishing connection between the content of academic disciplines and cognitive interests of the learners, conscious and spontaneous construction of an oral or written utterance; extracting necessary information from the orally comprehended texts; distinction between primary and secondary information; good awareness in and perception of scientific texts.

Development of discussion skills is based on the pupils' regulatory actions of control (attention, self-control), and on discussion of debatable issues revealed at the stage of acquaintance with new information. As a result, there forms the personal world outlook position and worldview. The given paper uses the method of discussion of a debatable topic.

In the framework of creative

activity, the pupils learn about the contribution of certain linguists to science, are taught to evaluate the works of famous linguists and to give proper estimation of the history of Russian linguistics, develop skills of text interpretation. The work is conducted on the basis of signsymbolic cognitive skills to differentiate between the plane of signs and symbols and the real objects plane, methods of narration with elements of essay (expression of attitude and evaluation). essavreasoning, episode, sketch, imaginary interview, independent formulation of a rule (table, scheme, text).

Theoretical concepts formed in the framework of the above described aspects ensure solid and conscious understanding of the learning material.

Then, as part of practical realization, the pupils acquire practical learning actions. The pupils develop their linguistic learning skills and habits: recognition skills (to distinguish sounds, letters, parts of the word, morphemes, parts of speech, etc., to differentiate one phenomenon from another), classification skills (ability to classify linguistic phenomena into groups), and analytical skills (to carry out phonetical, morphemic, word-formation, morphological, syntactical and stylistic analysis).

The work is organized on the basis of differentiation of signs and symbols, solution of didactic problems and practical methods (exercises, tests). As a result, the pupils master practical actions ensuring acquisition of linguistic competences.

Thus, the suggested educational rout includes the formation of significant cognitive and regulatory universal learning actions and the linguistic competences proper. where the second process represents a model consisting of interconnected mutually determining stages. The first stage develops sensory experience and auditory perception. The second stage is aimed at development of linguistic competences and is subdivided into two blocks. The first block deals with acquisition of linguistic notions on the basis of information, discussion and theoretical lines of activity. The second one promotes mastering practical learning actions and is based on practical activity. As a result, teenagers with severe vision impairments get a chance to use the acquired knowledge, habits and skills in everyday life, and become able to use their native language as a means of getting knowledge in other academic subjects.

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## INFLUENCE OF TEMPO-RHYTHMIC ORGANIZATION OF SPEECH OF CHILDREN SUFFERING FROM STUTTERING UPON THEIR COMMUNICATION

**Abstract.** The article presents a theoretical overview of the issue of formation of communicative competence in the development of tempo-rhythmic aspects of speech in preschool children with stuttering. It shows the relationship of these components to each other and presents the views of various researchers on this issue.

**Key words:** preschool children, stuttering, tempo-rhythmic aspect of speech, communication skills, communication.

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According to some authors (N.A. Vlasova, V.I. Seliverstov), 2-3% of the population suffer from stuttering; in most cases these are preschool children aged 2-5 in whom this form of speech disorder acquires the features of "developmental stuttering" when they get older [4, p. 21; 15, p. 43].

In accordance with the definition of one of the founders of logo-

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Special Education. 2015. № 1

pedics I.A. Sikorskiy, stuttering is a sudden disruption of speech fluency caused by spasms in one of the groups of speech muscles (articulation, breathing or vocal) which make up one whole [16]. According to the data provided by N.A. Vlasova and E.Yu. Rau, spasms result in violations of the tempo, rhythm and fluency of expressive speech predominantly appearing in the process of communication [4; 8].

R.E. Levina believes that a speech disorder does not exist on its own; it always presupposes the personality with all its specific features [6].

Many researchers report variously marked psychological peculiarities in stuttering preschoolers: in some children it is shyness bordering on timidity, striving for solitude, speech phobia, and anxiety; in others it is disinhibition, ostentatiously loose behavior, harshness, and rudeness [1; 2; 8; 12, etc.].

T.A. Boldyreva notes that "anxiety associated with the process of speech realization is the most vividly expressed specific personality trait of a stutterer" and that "there is dependence between the level of specific speech anxiety and the level of general anxiety of stuttering people" [3, p. 65].

In recent years, researchers have often addressed psychological peculiarities of stuttering persons to substantiate psychotherapeutic orientation of logopedic work [3; 8; 12; 15, etc.].

Deficiencies of overconcentration on the speech defect in persons with stuttering have been shown in the works of N.A. Vlasova, N.P. Tyapugin, V.I. Seliverstov and others [4; 17; 15].

Yu. B. Nekrasova argued that the stuttering person's awareness of his disorder and the resulting "apprehensive state" [8, p. 40] played the leading role in the structure of stuttering. She believed that the essence of stuttering as a "psychoneurosis" was fearful feeling, fixed idea, phobia and the whole lot of inhibiting emotions in the face of dangers in the past, present and future.

E. L. Nosenko saw the essence of stuttering in disorders based on mental affecting processes [10]. He stressed the inseparable connection between the impairment itself (stuttering) and the personality of the stutterer. This connection was characterized by the leading role of stuttering upon the personality development of the stutterer, deformation of communication and, as a consequence, by disharmonic development of the person. With age, correlation between the impact of personality and speech deformation changes towards prevalence of personality changes.

V. I. Seliverstov states that "overconcentration on one's defect is the basic factor which determines the character and complexity of psychological peculiarities of stuttering people and thus becomes part of the structure of this speech disorder" [15, p. 14].

S. S. Lyapidevskiy defines speech phobia as "a typical symptom of stuttering" [7]. Logophobia includes obsessive feelings and fear of speech spasms that is enhanced in some situations, in connection with which stuttering persons develop a response of avoiding certain speech situations and demonstrate the presence of communicative barriers [7, p. 89].

Communication is one of the basic functions of speech. Stuttering impairs it dramatically, which explains the fact that quite a number of works have been devoted to the study of this issue [1; 4; 8; 9; 14, etc.].

Observation of stuttering children aged 4-7 [4; 6; 11; 12; 13; 14; 15; 20] reveal underdevelopment of the skills of group communication and social behavior. Reduced play activity is especially evident. As early as preschool age, stuttering children become accustomed to perform secondary roles. Imitation, typical of preschoolers, is underdeveloped in children with stuttering. These features, if neglected, may stay or even become worse at school age.

Studies of adults with stuttering show that not only psychological components of verbal communication but also means of non-verbal communication both in the plane of self-expression and perception (i.e. interactive and perceptive aspects of communication) are impaired in these persons [8; 16; 17; 18]. T. A. Boldyreva highlights that "interactive and perceptive aspects are underdeveloped; they are inhibited and suffer from personality traits of the stutterer artificially narrowing communication experience, consciously choosing the position compensating for speech defect. The para-communicative aspect of communication suffers from stuttering indirectly. The communicative aspect is directly connected with speech and is the result of communication development under the conditions of speech disorder. Information exchange has a narrow, one-way character" [3, p. 56].

Describing communication hampered by stuttering, L. M. Krol'notes that "the stutterer does not like his speech and, as a rule, tries to hide his speech problems from the surrounding people. Conscious and subconscious tendencies of the stutterer are targeted at reducing the speech impairment (at least symbolically) and to localize it" [5, p. 89]. "While observing the non-verbal components of interaction in the process of natural communication, our attention is drawn to the fact that facial expressions and body language of the stutterer often do not reflect his response to the interlocutor but to his own feelings associated with speech problems (i.e. have an auto-communicative nature). And the visual contact with the partner or audience is often severed, many means of expression are not used, and non-verbal components of communication are kind of "in the background". As a result of

overconcentration on one's own feelings, perception of the real interlocutor and his responses is also weakened, and contact with him becomes loose as it is not supported by the whole visual volume of communicative behavior. Precision of perception and interpretation of the listener's expressiveness are also lowered due to the fact that observation is, to a large degree, oriented towards possible evaluation of the speaker's utterance but not towards potential dialogue" [5, p. 90].

We believe that the temporhythmic organization of speech is a dynamic system controlled by the speaker which represents a complex of the speech flow properties and is characterized by stable rhythm and variable tempo adequate to the given age.

E. S. Kazbanova and E. Yu. Rau believe that speech disfluency of preschool children is a risk factor of stuttering [13]. L. I. Belyakova and E. A. D'yakova consider child speech disfluency to be is a stage in the development of the speech function in general [2]. Oral speech at this time is characterized by ontogenetic pauses which appear during the period of phrasal speech forphysiological mation, iterations (repetition of sounds and word parts), breathing iterations and exclamations within a word and a phrase.

With time, speech disfluency is reduced, and by school age is manifested in structurally complex utterances in the form of various iterations and pauses (E. Yu. Rau, E. N. Sadovnikova) [14].

Numerous iterations, breathing and sound-syllable casual pauses which appear during emotionally charged communication are characteristic of stuttering on the whole. The difference is that in stuttering they are reinforced and strongly associated with the situation that psychological stress and, which is still more important, are spasmodic, i.e. are accompanied by muscle contraction in various parts of the vocal apparatus: breathing, voice producing and articulatory.

That is why studying issues about influence and interconnection of communicative-psychological peculiarities of preschool children with stuttering on the specificity of the tempo-rhythmic organization of their speech processes is important.

It is worthy of note that violations of tempo and rhythm of oral speech may be also observed in people without stuttering – both adults and children. The psychologist E. L. Nosenko reports that tempo-rhythmic disorganization of speech may occur in communication under the conditions of high responsibility and significance (for example in students during examination), on the background od emo-

tional strain and excitement which automatically leads to quickening speech tempo, distortion of voice timber and appearance of speech dysrhythmia and, as a consequence, to problems of utterance coherence and inadequate realization of the communicative event as a whole [10]. In children, the phenomena of tempo-rhythmic speech disorganization are caused by underdevelopment of the processes of coordination of semantic, articulatory and emotional-regulatory mechanisms in the communicative process of the child in general (R. E. Levina, L. I. Belyakova, E. Yu. Rau, E. S. Kazbanova, etc.) [6; 2; 13].

Some researches focusing on the study of speech tempo-rhythmic processes in stutterers (Yu. B. Nekrasova, I. F. Pavalaki, E. Yu. Rau, Yu. O. Filatova, etc.) single out some features of speech disfluency both in children and adults. These are iterations of one and the same element (sound, syllable, word) associated with the clonic component of speech spasms, and delays and stops in pronunciation caused by the tonic component of speech spasms; deliberate pauses, distortion of pausation in general, embolic-phrasal insertions, speech tricks, etc. [8; 9; 11; 12; 18].

Speech spasmodic condition proper (in the form of various kinds of stuttering) is manifested periodically depending on a number of factors – communicative-situational and communicative-semantic. Communicative-situational factors provoke enhanced stuttering under certain communicative conditions, at moments of emotional strain (speech in an unfamiliar situation, public speech. talking with strangers, with adults, with other children while playing, speech demanding quick verbal response, etc.). They may reduce stuttering up to its complete disappearance in the state of emotional comfort (speech to oneself in a spontaneous game, while communicating with the toys, Communicativepets. etc.). semantic factors provoke enhanced stuttering when the child uses difficult by degree of independence kinds of speech (story-telling, retelling, and answering questions) in communication. They may reduce stuttering up to its complete disappearance when using easy less independent kinds of speech (reciting poems by heart, pronouncing automated rows, mated reflected elements, singing). According to R.E. Levina, the author of a psychopedagogical classification of speech disorders, increased complexity of speech activity in children is itself accompanied by emotional strain caused by thinking over its content and difficulties of planning the scheme of utterance [6]. This leads to general instability of the neuropsychological apparatus and vegetative dysfunction of the child; stuttering manifestations are reinforced according to pathological conditioned reflex mechanism (Yu. B. Nekrasova, E. Yu. Rau) transforming into stable pathological states (L. Z. Arutyunyan) [8; 9; 12; 1]. As a result, all symptoms of speech disfluency and dysrhythmia are enhanced and complicated in the speech of stuttering persons. They affect the utterance intonation contour, violate the syntagmatic speech division caused by absence of the so-called breathing pauses and other kinds of speech pausation (logical, psychological and hesitation). The communicative purpose of the utterance is not realized because of disorganization of the utterance cohesion, and, as a result, the communicative function of speech on the whole is violated. This is most vividly manifested in the speech of stuttering preschoolers with speech underdevelopment and immature processes of coordination of sense-articulatory and emotional-regulatory mechanisms (E. Yu. Rau) [12].

Alongside verbal elements in the structure of stuttering in children, many authors register specific problems of non-verbal character: uncommunicativeness, negativism and irritability (R. E. Levina, V. I. Seliverstov, N. A. Cheveleva, A. V. Yastrebova, etc.) manifested in reserved speech behavior (posture, look, facial expressiveness, body language) and excessive impulsiveness or inhibition of the stuttering child in the process of communication [6; 15; 19; 20].

According to the data provided by E. Yu. Rau and E. S. Kazbanova who study the peculiarities of tempo-rhythmic organization of speech of stuttering preschool children and the conditions of carrying out preventive measures for elimination of speech disfluency, there are a number of genetic and socially determined risks of stuttering:

• disorganization of temporhythmic motor speech processes connected with prevalence of the properties of hyperactivity and hypererethism;

• high emotional reactivity prolonged by the child's readiness for salient expression of his neurotic responses in communication with the surrounding people;

• development of features of impulsive speech behavior in the process of communication and poor speech self-control;

• specific conditions of the communicative-linguistic environment of the child's family education causing development and automation of the speech anxiety reflex connected with activization of indicators of speech disfluency [13].

Thus, it is evident that there is interdependence between formation, development and automation of the processes of tempo-rhythmic organization of speech and not only development of linguistic means of communication (acquisition of arbitrary forms of building utterance) but also development of communication skills in general. The special role of tempo-rhythmic organization of speech in the formation of communicative stereotypes and the urgency of the topic under discussion are also evident.

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UDK 364-787.2-056.24 BBK C993.3 GSNTI 14.29.27 Code VAK 13.00.03

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## SOCIO-CULTURAL REHABILITATION OF PERSONS WITH HEARING DISORDERS BY MEANS OF AMATEUR THEATRICAL ACTIVITY

**Abstract.** The article demonstrates the importance of amateur theatrical activity as a major factor of socio-cultural rehabilitation of people with hearing disorders on the basis of long-term experience of work in the amusement and recreation department of the Regional rehabilitation centre of the All-Russian Society for the Deaf.

**Key words:** rehabilitation, socio-cultural rehabilitation, recreation activity, amateur theatrical activity, persons with hearing disorders, the deaf, gesture speech.

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Social integration of people with disabilities is one of the major tasks of development of the modern society. Social integration presupposes provision of equal rights and opportunities real of coparticipation to persons of this category of the population, together with other society members, in all kinds and forms of socio-cultural activity (education, recreation, labor, socio-political activity, etc.) under conditions compensating for

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their disabilities [4]. The social policy of the state with rehabilitation as its priority area becomes one of the major factors of inclusion of the people with disabilities in broad socio-cultural interaction.

Special place in the complex of rehabilitation measures is occupied by socio-cultural rehabilitation which is one of the most urgent and in-demand spheres of social practice and an object of particular attention of researchers in the sphere

of socio-cultural activity of people with disabilities of different age groups. Determining the essential characteristics of socio-cultural rehabilitation, researchers treat this area of rehabilitation as a complex process of interaction of a person with the social environment aimed at meeting the needs of the people with disabilities in getting information. socio-cultural services. chances of self-realization and participation in accessible kinds of creative activity [9]. Socio-cultural rehabilitation is also viewed upon as targeted personal assistance to a person with disability, as a process aimed at revealing their spiritual interests and needs, looking for and mobilizing the existing personal reserves which would help them realize their potential and integrate in the surrounding socio-cultural environment in recreation, communication and creative activity in the long run [8].

One of the tasks of sociocultural rehabilitation is to involve persons with disabilities of various ages to cultural and moral-spiritual values and to healthy life style by means of introduction into the world of art and culture. Culturalrecreational activity is looked upon as one of the main components of the given task [7]. The content of cultural-recreational activity gives man a chance to experience feelings and emotions through different occupations in spare time and thus satisfy their needs of understanding the perceived information, artistic images, and general cultural context that comes in the focus of their attention and assessment [1]. Organization of recreation activity (leisure, self-education. festivals. creative activity, etc.) is especially significant for persons with disabilities because of their life limitations and problems with communication brought about by disorders of physical and psychological development. And inclusion of the person in various kinds of creative activity is considered to be a most significant kind of recreation, which also includes amateur theatrical activity [5].

Different forms of amateur theatrical activity perform various functions: informational. educational, relaxation (relaxation of tension, anxiety, etc.) and socialization [6], which is of prime importance for persons with disabilities of various categories. By its nature, theatre combines various kinds of art (literature, music, choreography, vocal art, etc.). Organization of amateur theatrical activity is extremely important for development of various aspects of personality of the participants of amateur performances (cognitive, communicative, emotional, etc.). This idea is corroborated by the pioneer experience of many years of work of the culture and recreation department of the Regional rehabilitation centre of the All-Russian Society for the Deaf.

The experience of functioning of amateur theatrical societies or clubs for persons with hearing disorders disproves a widespread belief that complex ambiguous works of fiction are not suitable for staging in such groups. We believe that the given approach to the choice of repertoire for deaf actors radically limits their potential opportunities. All literary works (plays, short stories, etc.) staged at the Regional rehabilitation centre for persons with loss of hearing are dubious in nature, touch upon deep worldview problems, and discover subtle psychological characteristics of the literary characters. The repertoire of amateur theater groups should facildevelopment itate the of the worldview orientations of the deaf person and develop their ability to critically address social phenomena, ambivalence of life situations, etc. Our experience shows that persons with hearing disorders can successfully perform in dramatic works of any genre: from deeply psychological to strongly biased ones, from socially charged pieces of drama with salient civil pathos to satirical, comic and clearly parodic ones. This is demonstrated by the list of works of fiction which includes both home and foreign literary works: M. Karim "Do not Leave the Fire, Prometheus!", F. G. Lorca

"The House of Bernarda Alba", A. Ostrovskiy "The Storm", B. Gorbatov "One Night", A. Salynskiy "The Fame", B. Brecht "Señora Carrar's Rifles". A. Miller "Death of a Salesman", A. Galin "Stars in the Morning Sky", A. Dudarev "The Garbage Dump", V. Kudryavtsev "Ivan and Madonna", V. Tendrya-"Paranya", kov Р. Mérimée «Matteo Falcone», "Heaven and Hell", "The Temptation of St. Anthony", "Carriage of Holy Gifts", M. Gor'kiy "Chelkash", M. Servantes "The Divorce Court Judge", "The Cave of Salamanca". V. Mavakovskiy "The Bug", "The Bath House", A. S. Pushkin's fairy tales «The Tale of the Priest and of his Workman Balda", "The Tale of the Golden Cockerel", N. Nekrasov "General Toptygin", N. Leskov "Levsha", K. Chukovskiy "Mukha-Tsokotukha". M. Zoshchenko "Nervous People", L. Ustinov "Oldfashioned Miracles" and many others.

Amateur theatrical activity of patients with hearing loss should be organized taking into account the specific features of their cognitive and communicative activity and emotional sphere of personality, and ought to be based on compensatory capabilities of persons with hearing disorders, usage of their visual, sensory and vibration sensitivity and written speech. Interaction between specialists of different profiles –

logopedists, teachers of gesture language, psychology, Russian, and specialists in theatrical disciplines is one of the basic principles of amateur theatre groups for persons with hearing disorders.

During staging, special attention is paid to the preliminary stage - work on the text of the play ("table work" period) and its literary analysis. An important condition of staging a play cast by amateur actors with hearing loss consists in conducting regular sessions in the art of direction by a hearing pedagogue. Lessons of direction help the deaf actor understand the motives of behavior of a character, see causative-consecutive relationships between phenomena instead of separate facts, and approach emotionally intensive life of the character via logic of their actions. The hearing teacher leads the deaf student to understand the life of the character impersonated on the stage through associations connected with the situations seen or lived through by the performers in their own lives. This is especially significant for determining moral positions and helps get in indirect contact with complex social problems. While analyzing the play by A.N. Ostrovskiv "The Storm" at a lesson of direction, the students were asked to assess one and the same phenomenon, for example, the scene near the church at the moment of Katherine's confession through the eyes of all characters. Such analysis should not boil down to ready-made definitions of a character's features or to clichés like *good – bad, kind – angry* and the like. The deaf person should realize the ambiguous nature of reality and the complexity of the concrete character's psychological portrait combining sometimes polar ambivalent features which are unveiled in line with emerging circumstances and actions of other characters.

In the process of staging a play, it is urgent to reach agreement between the dramatic material, oral speech and visual associations. In the work of direction, the teacher should orient towards actively visual character of the play. At the lessons of direction, the hearing pedagogue should lay the main stress on visual perception of the surrounding world by the deaf students. At the same time, plastic means of movement based on kinesthetic feelings acquire special significance. This radically helps to create visual images of the scenes. The persons with loss of hearing are offered main and secondary imagery scenes which may express the author's intention in plastic forms. Each direction session is connected with a dynamic theatrical action; it does not only explain the essence of the play with the help of a specialist in expressive gesture language but also trains the deaf actors to rehearse the whole performance in a plastic active way. On the basis of the fact that feeling vibration has considerable compensatory significance for the deaf, the performers achieve wonderful results in dances of various genres, in gesture singing, in plastic pantomimes, etc. Matching light and music accompaniment to the main idea of the work of art has primary importance for staging the play. Thus, the compensatory potential of the persons with hearing loss connected with functioning of the safe analyzer systems help to discern the sociopsychological traits of the character and their behavioral motives, see causative-consecutive relationships between phenomena instead of separate facts, and approach emotionally intensive life of the character via logic of their actions.

It is a well known fact that underdevelopment of the ability to discern emotional states of other people is a significant problem of persons with hearing loss. As research shows, it is characteristic of the deaf people to have difficulties in understanding literary works, reasons, causes and consequences of the actions of certain characters. in determining the emotions and relationships between characters, and inadequate capability to show sympathy towards certain literary characters. All this emasculates the emotional world of persons with hearing disorders, creates barriers in understanding emotional states of other people and simplifies the emerging interpersonal relationships [3]. Amateur dramatic activity has indisputable significance for the development of the emotional sphere of deaf actors. Theatrical activities project various life problems and emotions of literary characters. Influencing persons through their emotional sphere, literary characters make one experience emotions, suffer and exult; their impact is often stronger than real life collisions [2]. Many real life problems and emotions are seen by deaf persons as soluble after they have been looked at through the prism of theatrical imagery. Penetrating into the world of literary characters and scenic impersonations, and beginning to live their lives, persons with hearing loss develop their own involvement in sorrows, sufferings and joys of other people. Empathy with another person will be more complete if the observer is acquainted with the situation in which the perceived emotional state appeared, and presupposes generalization of already witnessed similar states and their verbal expressions. As long as emotional states are reflected in facial expressions, gestures, body language and verbal response, analysis of literary works is accompanied by the work on imagery gestures and

facial expressions and expressiveness of the speech of the characters.

Staging plays with persons with hearing disabilities as actors present difficulties which need special attention of the teachers. For example, direction of gestures and facial expressions comes across difficulties in translating the text of the play in the gesture language because it is not easy to find exact equivalents for the verbal material which would be equally expressive and adequate in semantic characteristics. In the process of work with deaf performers on compositions of such poets as A. Pushkin, N. Nekrasov, A. Blok, S. Esenin, V. Mayakovskiy, E. Evtushenko, A. Voznesenskiy there appear problems connected with necessity to convey most subtle nuances of individual poetic style through the language of gestures and facial expressions. In this connection it is also critical to match imagery scenes to verbal characteristics. Although it should be noted that text material should by no means be a mere supplement to pantomimic scenes. At the same time, visual images cannot be simply illustrations of gesture and facial expression language. Ideally, the process of staging should represent a dialectical unity of the language of gestures and facial expressions the visual imagery presentation of the dramatic scenario. The pedagogue should help the performer to find the necessary intonation which would allow the actor to bring out the inner state of the character. Thus, participation in amateur theater groups and in staging literary works of different genres, themes and character teaches persons with hearing disorders to convey their emotional content with the help of facial expressions, gestures and posture.

The diversity of genres also facilitates the formation of independent thinking of deaf performers; each kind of creative activity used in cultural-recreational activity of persons with hearing disorders has its specific impact on their spiritual and intellectual world. For example, the genre of farce perfectly matches the specificity of the deaf people's perception of the surrounding reality phenomena and demands absolute sincerity from the person with loss of hearing. Brilliant acting of buffoons and the ability to improvise need perfect voice control skills. Farce performers must be able to convey the traits of the characters (such as blandness. guile, hypocrisy and cowardice of the Priest from the stage version of the well known tale of A.S. Pushkin; lust for power and voluptuousness of Tsar Dadon; audacity and gumption of the workman Balda, etc.) with their voice and gestures. Deaf performers face equally complex intellectual creative tasks in the

process of staging such literary works as "Levsha" by N. Leskov, "The Legend of a Magic Whistle" by N. Shergin, "Koschei the Deathless" by V. Belov, "Mister-Twister" by S. Marshak, "All Mice Like Cheese", "The Wild Squire" by M. E. Saltykov-Shchedrin and others. These works of fiction do not only create opportunities for the performers to demonstrate their dramatic talent and achieve certain results in oral speech development but also facilitate removal of psychological restraint and relaxation of emotional tension.

the technologies Thus. of amateur theatrical activity integrate pedagogical, psychological, social and culturological aspects. Amateur theatrical activity is an important means of widening the horizon of persons with hearing disorders, bringing them closer to cultural and spiritual values, and formation of their civil position. Inclusion in amateur theatrical activity facilitates stabilization of sensibility of the safe and impaired analyzer systems and represents a major factor of compensation for secondary deviations in psychological development brought about by the primary defect. Lessons of direction and acting contain a strong potential for improving speech development of the deaf due to constantly emerging situations which enhance the need to use new words, terms or phrases. Staging literary works creates possibilities for activization of the emotional vocabulary of the deaf person, to perfect the auditory culture of speech, its intonation, grammatical structure and dialogic communication. Theatrical activity is a source of development of feelings and deep emotions, and presents an important tool for expanding the scope of means of expressing emotions and feelings and for widening social experience.

Artistic creativity, being part and parcel of the system of culturalrecreational activity of persons with hearing disorders, is one of the active significant factors in the sphere of moral-esthetical education of a person. The special role of culture in the development and self-realization of a person, and the positive experience of work on organization of amateur theatrical activity of persons with hearing disorders allow us to regard socio-cultural rehabilitation as an independent area in the system of rehabilitation of persons with hearing loss. At the same time, further study of psycho-pedagogical and compensatory potential of culturalrecreational activity of the deaf and the significance of amateur theatrical activity for the development of the adaptation-rehabilitative potential of such people is especially urgent.

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## SOCIALIZATION OF CHILDREN WITH SPECIAL NEEDS IN A MULTIFUNCTIONAL ENVIRONMENT OF A SPECIAL (CORRECTIONAL) EDUCATIONAL ESTABLISHMENT FOR PUPILS WITH HEARING IMPAIRMENTS

**Abstract.** The article deals with basic methodological principles of successful socialization of children with complex hearing impairments in conditions of multifunctional educational environment of a special (correctional) educational establishment within the ecological paradigm. It highlights the general methodological foundations for scientific monitoring and identification of the components of the multifunctional educational environment, necessary the maximum self-development of a pupil with complex hearing impairments.

**Keywords:** ecological paradigm, children with complex hearing impairments, correcting and developing environment, health and social conditions, accreditation indicators.

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Socialization is considered today within the framework of pedagogy. The essence of the modern interpretation of the process of socialization consists in the theory and practice of transition of experience from one generation to another. From the practical point of view socialization of a deaf pupil with a complex structure of defect (CSD)

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is viewed upon as a regular feature of modern special education stemming from special educational needs of various categories of persons with hearing disorders necessary for them in case they cannot receive such education under the modern pedagogical conditions of inclusive schooling.

From the theoretical point of view, modern socialization should be approached from the positions of the personalistic approach (J-P. Sartre, M. Heidegger, K. Jaspers, etc.) based on two definitions: worldview definition existential interpretation of personality. and social definition - idea about personal development as a result of socialization of a person acquiring the traditions and the system of value orientations worked out by mankind. Both definitions exist as a dialectical unity. Thus, for example, the personalistic approach with reference to solution of problems of developmental disorders presupposes perception of a person with disabilities as an autonomous self-regulating system which is in dynamic balance with the surrounding world. This self-regulating system independently determines the nature of the processes which are going to take place within it under the influence of social interventions.

Over a long period of time education of children with developmental disorders (I.D. Georgens, G.M. Deinahard, etc.) has been treated only as a medico-pedagogical problem aimed at reparation of the consequences of the physical defect. Humanization of the social and pedagogical consciousness with reference to persons with disability facilitated the emergence of the socio-ecological conception (L. S. Vygotskiy). This humanistic philosophical tendency was based on optimistic prediction and belief in man's healthy potential. This is assurance in successful development of every person and their unlimited opportunities in perception and cognition of the surrounding world. This is the right of every develop their person to own worldview and to occupy their own niche in it. Such interaction with society is considered to be a certain "bridge" - dialogue between the person and other community members and a basis of creation of every person's habitat (A. Maslow, K. Rogers).

Unique and inimitable nature of each personality proclaimed by the personalistic approach (E. Husserl, A. Camus, J-P. Sartre, M. Heidegger, K. Jaspers) is characteristic of the existential philosophical interpretation of personality on the basis of which phenomenological (humanistic) pedagogy (K. N. Venttsel, P. D. Zen'kovskiy, M. Montessori, E. Segen, L. N. Tolstoy, K. D. Ushinskiy, N. F. Fedorov, R. Steiner, O. Shpek and others) singles out a new notion – "pedagogical environment"

in the habitat of a person. This environment includes interaction within the dvad "pedagogue - schoolchild) which promotes the formation of the child's personality. The center of this environment is occupied by the development of the child's personal world under the guidance of the adult; it is the place of formation of the fundamentals of interpersonal communication and dialogue, facilitating growth of the child's personality. This environment should be "ecologically clean", i.e. adequate (comfortable) for maximum selfdevelopment. In this context, the notion "oikos" (O. Shpek) is used in the meaning "home" - the place most comfortable for living. The humanistic reform-oriented pedagogy provides each subject of the pedagogical process with a free choice of means of education and upbringing (J. Piaget, K. Rogers (cognitive constructivism), L. S. Vygotskiy (zone of proximal development), J. Dewey (pragmatic pedagogy)) taking into account individualpersonal interests and capabilities of children.

As different from other paradigms (cognitive-informational, personalitycentered, culturological, competencebased, etc.) it is the ecological one (G. B. Kornetov, N. M. Nazarova, J. Forrester, O. Shpek, E. A. Yamburg, etc.) that facilitates the creation of a friendly pedagogical environment for children with disabilities. This paradigm primarily focuses on the child's social environment (I. Yu. Levchenko, E. A. Medvedeva, V. B. Nikishina, O. G. Prikhod'ko, V. V. Tkacheva, U. V. Ul'enkova) which is not just a sum total of various factors but their systemic unity. Within such worldview context, the ecological paradigm is interpreted as pedagogical activity necessary for making a deaf child with a complex structure of defect feel comfortable in his social habitat notwithstanding his "sound isolation". creating new holistic subsystems of his own world and establishing life interrelationships between them (T. G. Bogdanova, U. Bronfenbrenner, G. L. Zaytseva, N. M. Nazarova). Such interaction is realized to the greatest degree in the polyfunctional educational environment of a special educational institution for pupils with hearing loss where special conditions are created for maximum self-realization of the child with hearing impairment.

Modern special education institution for children with hearing disorders (MSEI) realizes common goals and tasks of the basic general education in accordance with adaptive educational programs. While organizing the work of a pedagogical collective, the administration of an education institution providing education for children with developmental disorders believes that MSEI is a self-developing open

system. It is a new form of relationship between the members of pedagogical community united by common problems of joint activity, its values and perspectives, facilitating the creation of pedagogical space on the basis of common axiological factors.

Polyfunctional pedagogical environment is created inside the pedagogical space of the "oikos". In its turn, this environment has comfortable pedagogical conditions for the maximum development and personality formation of each deaf pupil with CSD. And the environment, in its own turn, may be considered as a pedagogical system of interaction between the child and the adult. A pedagogical system is a complex open socio-cultural (polyfunctional) process-based self-developing system capable of preservation and perfection of its organization depending on interior and exterior conditions (ecology); it represents a holistic complex of selectively attracted resources determining the potential of its total socio-psychopedagogical activity:

• deaf schoolchildren, surdopedagogues and doctors, parents of deaf children;

• sub-system of scientific and methodological knowledge (theories, ideas and conceptions determining the structure, content, didactic conditions and functioning of the systems); • activity of surdopedagogues and other specialists;

• sub-systems of informational, normative, economic, material and technical support and provision;

• sub-systems of management and control, provision of intrasystem and intersystem ties on all levels;

• ties and interactions with macrosystems (systems of higher levels) significant for this system – due to complex network interaction and mutual influence, all this is aimed at achievement of socially significant outcomes.

Considering all aspects of these sub-systems functioning, it is important to single out their mutual contribution to the achievement of final results or the predetermined goal – socialization of the deaf schoolchild with CSD.

Drawing on the materialist cognitive theory, I.M. Sechenov, the author of the Russian school of physiology, created a fundamental conception of the unity between organism and environment: "...the organism cannon live without the environment supporting its existence, that is why the environment influencing the organism should be included in its scientific definition" It was this scientific prerequisite that found its development in the reformist pedagogy (V. P. Kashchenko, K. König, M. Montessori, P. Natorp, P. Petersen, P. Stiner, C.

Freinet, G. Ya. Troshin), and in the new understanding of the school pedagogical space as a part of social environment. This environment should be specially organized to ensure proper didactic and educational effect via the activity realized within it. It was found that specially organized environment of an education institution has a positive effect on the development of intellectual abilities and social skills (A.S.Makarenko, M. Montessori, V. P. Kashchenko, Ya. Korchak, etc.).

Drawing on the theory of affordance by J. Gibson as the main methodological foundation, it is possible to figure out the specificity of personality development in the educational environment where the category of "affordance" may be regarded as a special unity of the educational environment properties and the subject himself, as well as be, in various degrees, an attribute of the educational environment and the subject's behavior. As we have already mentioned, what is meant here is a kind of a "bridge", i.e. dialogic interaction between man and educational environment as the two united subjects of development. The dual nature of this development consists in the following: on the one hand, the environment provides opportunities for the formation of world perception and other structures of the human consciousness: on the other hand, the activity and

the opportunities of the pupil determine the way he will use the chances offered by the environment and the degree of his influence upon it. Interaction presupposes adaptivity of the environment opportunities and of the person. This adaptivity can be characterized as "comfort" of the educational environment, i.e. the environment should be adequate to the opportunities of the deaf pupil with CSD for maximum development of the person's potential and their self-realization.

Resource innovative scientificmethodological means capable of revealing personal potential and improving the cognitive activity of the pupil in his interaction with the educational environment are needed. But the way and the perspectives of interaction within the system "pupil - educational environment" depends, to a large extent, on the quality of the educational environment which can be determined by the regional specificity and traditions of cultural-historical development, the level of development of the special school pedagogical culture and, finally, by the education goals of a particular time, society, group or person. The question of correspondence of the MSEI educational environment under creation to the interests of the personality development of the deaf pupil with CSD is vitally urgent.

In this respect, the eco-

psychological approach is the closest one to understanding the essence of the educational environment. The source of eco-psychological model of educational environment lies in the assumption that the psychological development of a person in the process of their education should be viewed in the context of the system "man - educational environment". So, the problem of psychological development of a person in the ecopsychological model of educational environment appears to be the problem of creation of such interaction between its subjects that would facilitate the emergence of the creative nature of the psyche development in the system "deaf pupil educational environment of MSEI".

According to the ecopsychological approach, axiological, social and physical (spatialobject) components are the basic structural elements of the educational environment.

Analysis of the basic requirements to organization of the spatial structure of the educational environment of the modern system of environment formation allows us to make an urgent conclusion that the main aim of these requirements is to ensure adequate state and development opportunities of the education institution as an educational system providing optimal conditions for the development of the student's personality and corresponding to the individual psychological makeup of the person.

It is possible to include "resource" among the criteria of environment formation. We shall treat "resource" as, on the one hand, a quantitative measure of ability to carry out pedagogical activity, and, on the other hand, as pedagogical conditions that allow achieving successful results of socialization of the deaf pupil with CSD.

Within the frames of the above described problems, we have carried out a scientific research on the topic "Design of a system of indicators of the level of provision of high quality education services for children with disabilities, and succession and continuity of their psychopedagogical support". The research has been performed as part of the program 0302002 "Development and realization of the mechanisms ensuring accessibility of high quality education services of general education for children with disabilities, and succession and continuity of their psycho-pedagogical support", and the subprogram 0302 "General Education" of the Moscow government program for the medium-term period (2012-2016), development of education of Moscow ("Metropolitan Education") in accordance with the government assignment for the state budgetary institution of higher professional education of the city of Moscow

"Moscow City Pedagogical University".

The scientific-research work carried out by our specialists allowed conducting a systemic analysis of the indicators of the potential and opportunities of resource provision of the process of accessibility of the educational environment of MSEI in the education system of Moscow. The procedure of systemic analysis included the following accreditation indicators of MSEI:

• essessment of staff capacity: level of professionalism considered as readiness of the MSEI staff to take responsibility for the education outcome;

• assessment of technological preparedness of the MSEI staff: pedagogues and medical workers, realized both in everyday scientific-methodological provision of the education process and in evaluation of their academic mobility: the need of continuing professional advancement and analytical professional activity (reports at methodological unions, participation in pedagogical forums, etc.);

• readiness for transfer of their own experience and need of adoption of technological experience of specialists-defectologists from adjacent areas of special pedagogy (oligophrenopedagogy, typhlopedagogy, etc.) with the aim of searching for adequate educational routs of support for deaf schoolchildren with multiple impairments of intellectual development and vision;

• organization of academic education of the parents of deaf pupils with CSD in order to improve their pedagogical literacy in the sphere of socialization of schoolchildren.

Such opportunities are provided by the spatial-object environment possessing the following resources (V. A. Yasvin):

1. The environment should be fairly heterogeneous and complex. It should consist of various elements nrcessary for the formation and optimization of all kinds of activity.

2. The environment should be uniform enough to allow the person to pass from one kind of activity to another and complete them as interconnected phenomena of life.

3. The environment should be flexible enough and manageable both by the pupil and the pedagogue. Flexibility and manageability of the environment may allow the pupil to exhibit activity and desire to reconstruct the surrounding world of objects to the full, and will make it possible for the pedagogue to alter the functions of various objects in accordance with the current pedagogical tasks.

Special attention towards the resources of the spatial-object environment within the systemic approach for the personality development is connected with the evident

ambivalence of environment formation exiting in the practical activity of the MSEI under analysis: as a rule, all attention of the administration is concentrated on the organization of the spatial-object environment which is regarded as a tool of educational intervention and formation of the personality of the schoolchild where the functional and the esthetical criteria have primary importance, and the social environment is in the background of the process.

There is a gap between the system of environment formation and the basic ideas of the conception of education on the one hand, and the problems of individualpsychological organization of the deaf schoolchild with CSD, with his own "self", the specificity of his ties with the surrounding world and the character of his interaction with this world – on the other. We tried to neutralize these contradictions in disharmonious environment formation through a harmonious procedure of modeling the spheres of the polyfunctional environment of a special education institution for schoolchildren with hearing impairments.

At present, not less than 40% of the pupils of special education institutions for schoolchildren with hearing impairments are children with a complex structure of defect (CSD). This is connected, to our mind, with a number of objective causes: with technological success in the field of audiology and hearing aids including cochlear implants giving some deaf pupils a chance to go to an inclusive school on the one hand, and, on the other hand, with achievements of clinical medicine including survival of low birth weight infants and reaching school age by children with multiple developmental pathology, etc.

Diversification of the school contingent of the deaf is registered in the works by T. A. Basilova, G. P. Bertvn', L. A. Golovchits, T. K. Gushchina, M. V. Zhigareva, E. A. Zherebyat'eva, T. S. Zykova, E. G. Rechitskaya, T. V. Rozanova, I. L. Solov'eva, and E. Z. Yakhnina. Our monograph "Rehabilitation Boarding School for Deaf Children with a Complex Structure of Defect - a Model of a New Type of Special Education Institution" (2010) is devoted to the problem of organization of education for this category of children.

According to the data of our 1993-2014 research conducted in MSEI of type I – II in Moscow, Belgorod, Kursk, Kaluga, Nizhnekamsk, Taganrog, Tambov, Chelyabinsk and Engels, education institutions carry out considerable work on creation of the foundation of the spatial-object environment: they provide schools with modern special equipment, make efforts to create the technological environment, and try to diversify the social environment.

The polyfunctional environment creating optimal conditions for social-

ization and maximum personal development of each deaf schoolchild with a CSD is interpreted by us as a balanced interaction between three layers as shown in the figure.



The efforts of each education institution objectively depend to a large degree both on the proficiency of the pedagogical system of the MSEI, and on the network interaction within the region. Regional interaction with the MSEI is not always proportional. That is why, special federal educational standards are necessary; their introduction can favorably organize the special school basic resources.

In view of this, we consider

adapted (variable) education of deaf pupils with CSD from the position of the need to construct education (A. G. Asmolov) as social activity ensuring individuality of a person in the changing world. In this respect, the components and spaces of the polyfunctional environment of an education institution may be treated as a systemic unity: of the technological, spatial-object and social environments. Each of these environments should provide the maximum number of services and resources needed for successful socialization of the deaf schoolchild with CSD. We call this systemic unity in the context of our research a polyfunctional educational environment which is expected to possess the following distinctive features:

• physical accessibility of all rooms of the building – classrooms, rooms for individual rehabilitation sessions, recreation rooms, dining hall, gymnasium and assembly hall; their equipment with special technical means of electro-acoustic, light and written indication;

• academic (educational) accessibility – scientificmethodological provision of curricula, programs, didactic aids and other means of information and social information provision, individual programs of support for each deaf pupil with CSD in acquisition of both academic and social competences;

• social accessibility – interaction with the peers and the school staff members, presence of a local branch of the All-Russian Society for the Deaf, presence of deaf pedagogues, and social traditions accumulated by the school;

• ecological accessibility – presence of enough means for creation of the polyfunctional educational environment, chances for the MSEI to become a "home" for successful socialization of the deaf pupils with CSD.

The results of the clinicopsycho-pedagogical longitudinal observation carried out under our scientific guidance made the basis for organization of dynamic longterm observation and subsequent organization of differentiated education and allowed us to single out the following kinds of sensory underdevelopment in deaf children with CSD: peripheral sensory underdevelopment - complex structure of defect; central sensory underdevelopment - complex (multiple, numerous) defects. In this case, we mean deaf children with neurological disorders: asthenic svndromes, compensated hydrocephalus, and deaf children with insignificant impairments of the visual and motor spheres. Deaf children with multiple disorders include those with marked intellectual disabilities. and children with syndromic developmental disorders.

In order to design an adequate (comfortable) **object-practical environment** for compensation of a complex developmental disorder in such children, it was necessary to work out a clear-cut definition of separate obligatory components (spaces) and reveal the modes of their successful functioning facilitating maximum self-realization of each deaf pupil with CSD.

Architectural environment,

designed to guarantee physical accessibility of MSEI, should be equipped with "creeping lines" in the academic and other spaces: recreation rooms, dining hall, gymnasium and assembly halls to provide information in usual and emergency situations. There should be information boards visually informing about the school behavior rules, safety rules, etc.

• Mobile Internet, «Skype», «Veber» for communicating with the parents, peers, and getting the necessary information.

• Familiar technical support (audio- and video-resources, FM-systems, electro-acoustic equipment, etc.).

## **Special equipment:**

• Light indication of beginning and end of lesson in classrooms and all common rooms (halls, recreation rooms, dining hall, library, etc.); light indication of fire alarm and general alarm bells; electronic information boards, creeping lines in all rooms of the education institution.

• Multimedia equipment for group and individual learning: SMART-board, SMART-desk, interactive plasma panel with the necessary software.

> FM-systems; induction loop systems in all classrooms and ensuring their proper performance.

 $\succ$  Presence of microphones, headphones and ensuring their

proper performance.

> Learning and methodological materials and other handouts in accessible formats (electronic and video).

Services (if required) of a surdo-interpreter, surdo-support for schoolchildren with special educational needs (invitation of surdopedagogues as tutors of deaf pupils) to provide psycho-pedagogical support.

The created architectural environment makes it possible to match the opportunities of the universal object-practical environment in the format of the given MSEI to the needs of the schoolchild with disability. To be capable of adaptive approach to satisfying special educational needs of such children, the spatial-object environment should interact in a culturally-sensitive way with the technological environment, the same as in the case of interaction between the material and staff resources, which needs special (rehabilitative) components - compensatory rules and regulations of the technological environment of the MSEI.

It is primarily important to guarantee the deaf child measures for protection and hygiene of his visual function, as its safe compensatory potential to a large extent determines the quality of both education and self-education of the deaf person. That is why it is necessary to

keep to the ophthalmologic hygiene requirements: to use warm light luminescent lamps (LB 40) for lighting classrooms but not cool light ones. Special requirements should be observed in relation to the wall coat of paint: flat paint without flashes is obligatory; light diffusing blinds should be used on the windows. The classroom board should be white; instead of it, it is possible to use a white easel which could be brought closer to the deaf children with refractive disorders. It is recommended to use only black markers for writing on the whiteboard or easel. School hygiene recommends yellow writing paper with blue lines and a black gel pen for lengthy written classroom work. Performing written tasks at a writing-desk may be recommended for children with posture violations, such as kyphosis, scoliosis, etc. It is possible to use the techniques of calligraphic writing.

Strict realization of the **auditory-speech regulations** as one of the components of hearing impairment compensation allows forming speech behavior of fully and partially deaf schoolchildren at frontal and individual lessons, as well as during all schedule events: walks, meals, in the sleeping room, cloakroom, etc. Organization of the **motor activity** presupposes, as we have mentioned above, training correct posture for reading and writing (the recommended posture is "at a writingdesk"), and organization of short physical training sessions (of about 5 minutes) every 20 minutes during the lesson, and physically active events during the first and fourth intervals.

Sanitary-hygiene measures. Washing the floors; quartz sterilization; airing. Carrying out individual medico-rehabilitation programs. Realization of these measures at Special Boarding School No 65 under our supervision facilitated restoration of more than 52 days of training missed due to illness, i.e. it allowed shortening the term of study by one academic term yearly. This non-formal shortening of the term of study later allowed changing the whole period of study of the deaf schoolchild with CSD during the entire year. As far as the person with loss of hearing attends school for as long as 12 years, we have managed to shorten this period by a whole school year and adapt the curriculum for 11-year course of study.

While designing the technological environment, let us look at it as a system of psycho-pedagogical support which includes:

– individual clinico-psychopedagogical approach,

- organization of dynamic observation,

- work of the school medicopsycho-pedagogical council, - design of individual support routs for pupils with various hearing impairments.

The dynamic clinico-psychopedagogical observation organized in the course of our study allowed us to substantiate the necessity of realization of medico-rehabilitation programs for prevention of respiratory diseases, visual impairments, and correction of the locomotor system disorders in the medicosanatorium complex of special education institution for persons with hearing loss on the premises of the boarding school. Health improving activity of such a block may be presented as a connected system of prophylactic measures: screening, vaccination, prevention of colds and infectious diseases, - and also by a block of medical health-preserving procedures including balneotherapy, showers. hydro-massage, baths, physiotherapeutic treatment ("D'Arsonvalization". ionization. ultrasound therapy, quartz, etc.), kinesiotherapy for respiratory diseases. locomotor disorders, central nervous system diseases, and vision and hearing hygiene.

The dynamic observation and the subsequent psycho-pedagogical support for each pupil with hearing loss considering the specificity of the complex structure of defect allowed us not only to determine the severity and complexity of the developmental disorder from the point of view of tendencies of proximal and urgent development and figure our developmental prediction, but also to design the child's learning trajectory. The organization of activity of the school medico-psychopedagogical council allowed us to verify the system of clinico-psychopedagogical support and control the dynamics of the progress (regress) of learning for each pupil with hearing impairment with CSD. This work allowed us to formulate the conclusion that for some deaf children with intellectual disability complicated by sensory or motor disorders, education focuses on the formation of the main social skills constituents: self-service skills. simple labor skills, education of everyday behavior culture, etc.

Resource scientificmethodological and staff provision for medico-psycho-pedagogical support for deaf schoolchildren with CSD is effected through social (academic, rehabilitative and supplementary educational) space. These environments exist both separately and function in harmonious interaction complementing each other.

**Rehabilitation environment** is realized via music and rhythmics lessons; special frontal lessons in the hearing lab; individual sessions in development of speech awareness and articulation formation; options in development of lexico-grammatical generalization skills; additional reha-

bilitation sessions in correction of visual perception, cognitive sphere, and fine and gross motor skills.

Academic environment is represented by organization of adequate comfortable learning and is realized through the **technological** environment resources:

• carrying out individual clinico-psycho-pedagogical approach in class and out-of-class activity;

• organization of psychopedagogical support during classes;

• organization of dynamic observation of efficiency of support provided by the school medicopsycho-pedagogical council;

• design of individual routs of education and socialization scenarios.

Academic environment is based on the principles of:

• Real learning capabilities of each deaf pupil with CSD;

• Level-based differenciation of the educational process via:

- the system of special federal state educational standards (of levels 3 and 4) containing adaptive academic programs for deaf children with intellectual disability;

- selection of pedagogical technologies;

 selection of program content;

• Organization of adequate comfortable learning:

modeling educational process and creation of adequate innovative teaching technologies in the dyad "teacher – pupil";

- continuing realization of the system of accumulation of advanced technologies of education of children with other kinds of disabilities;

 creation of adequate learning materials: pupils' workbooks, textbooks, teaching aids, electronic textbooks written under our scientific guidance by candidates of pedagogy A. V. Varlamova, T. K. Gushchina, E. A. Zherebyat'eva.

1. Variants of technological support for organization of polyfunctional environment and its components are presented in the monograph by I. L. Solov'eva "Ozdorovitel'naya shkola-internat dlya neslyshashchikh detey so slozhnoy strukturoy defekta – model' novogo tipa spetsial'nogo (korrektsionnogo) obrazovatel'nogo uchrezhdeniya". -SPUTNIK+ Publishers, 2010. - 142 pp.

2. Variants of technologies of math education are presented in the teaching aid by E. A. Zherebyat'eva "Sovremennye tekhnologii v obuchenii matematike i informatike detey s narusheniyami slukha". -SPUTNIK+ Publishers, 2011. - 96 pp.

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4. Variants of technologies of the natural science cycle are presented by A. V. Varlamova in her dissertation "Pedagogicheskie usloviya ekologicheskogo obrazovaniya neslyshashchikh starsheklassnikov pri obuchenii khimii". - Moscow, MSPU, 2013 (scientific advisor - I. L. Solov'eva).

**Supplementary educational environment** may be provided by the curriculum for 1320 academic hours estimated at 4 hours per pupil which creates opportunities for realization of about 10-30 artistic, creative and sports orientated programs by both pedagogues-defectologists and the teachers of regional art schools and creative activity centers for children.

Thus, organization of education of deaf children with CSD in special (rehabilitation) education institution for children with hearing disorders may be presented through variable forms of transformation of the educational environment depending on the degree of the developmental disorder and the regional conditions, and should include:

• rehabilitation educational center;

• center for individual (home) education;

• center for distance education.

Each form of the polyfunctional environment may be considered as a sub-system within the system of a special (rehabilitation) education institution for children with hearing disorders creating conditions maximally comfortable for successful socialization of the deaf child with a complex structure of defect.

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# IN MEMORIAM



Perova Margarita Nikolaevna October 9, 1931 — January 15, 2015

Doctor of Pedagogy, Professor, Veteran of the Great Patriotic War, awarded for excellence in public education of Russia and the USSR **Perova Margarita Nikolaevna** died on January 15, 2015 aged 84 after a long illness.

Margarita Nikolaevna lived a successful and rewarding life. She began her pedagogical university career in 1954 at the Department of Oligophrenopedagogy of the Defectological Faculty of the MSPU.

In 1968 she defended a candidate, and in 1986 a doctorate dissertation; from 1974 to 1985 she was Head of the Department of Oligophrenopedagogy; in 1987 she was elected professor of this department.

Margarita Nikolaevna was a highly qualified lecturer and scholar; she was the leading specialist in the field of oligophrenopedagogy and the methods of teaching mathematics in a special (rehabilitation) educational institution of type VIII. She is the author of about 200 scientific and scientific-methodological publications.

Margarita Nikolaevna has always taken up active life position: she carried out enormous social activity, was chairwoman of the academicmethodological committee in special pedagogy and special psychology of the Academic-Methodological Union of higher pedagogical education of the RF at the MSPU.

For her achievements, Margarita Nikolaevna Perova was granted high state and professional awards in her own right.

We are deeply saddened by the loss of Margarita Nikolaevna Perova and express our sincere condolences to her relatives and to those who were close to her.

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All papers have to be written in DOC/DOCX format using Microsoft Office Word for Windows meeting the following requirements:

- article length 8—12 pages (about 20 000 characters including spaces);
- paper size A4;
- font Times New Roman (if the author uses rare fonts it is necessary to attach separate files with these materials);
- font size 14;
- margins 2 sm;
- line spacing 1,5.

References to the literature are given in the body of the text in square brackets. They contain the number of the source in the list of literature and in case of citation – the corresponding page, for example: "Citation..." [5, c. 56—57]. The numbered list of literature (not less than 15 sources) is given at the end of the article according to GOST P 7.05—2008.

#### Sample List of Literature

A book of one author	<b>Иванов, И. И.</b> Название книги / И. И. Иванов. — М. : Наука, 2004. Внимание! Пробел до и после знака «двое-
	точие»
A book of 2-3 authors	<b>Иванов, И. И.</b> Название книги / И. И. Иванов, П. П. Петров, С. С. Сидоров. — М. : Наука, 2004.
Dissertation	Иванов, И. И. Название : дис д-ра пед. наук :
	07.00.02 : защищена 22.01.04 : утв. 15.07.04 / Иванов
	Иван Иванович. — Екатеринбург, 2004.
	Иванов, И.И. Название : дис канд. ист. наук :
	07.00.02 : защищена 22.01.04 : утв. 15.07.04 / Иванов
0	

	Иван Иванович. — Екатеринбург, 2004.
An article in a	Иванов, И.И. Название статьи / И.И. Иванов,
collection	А. А. Петров // Название сборника / Урал. гос. пед. ун-т.
	— Екатеринбург, 2004.
An article in a	Иванов, И. И. Название статьи / И. И. Иванов // Наука и
journal	жизнь. — 2004. — № 1.
Electronic resource	Иванов, И.И.Компьютерная графика [Электронный
(according to	ресурс] : рабочая программа : для студентов-заочников /
GOST	И. И. Иванов ; Урал. гос. пед. ун-т. — Электрон. дан. и
7.82-2001)	прогр. — Екатеринбург, 2006. — 1 дискета. — Систем.
	требования : IBM PC, Windows 95, Word 6.0.
	Российская государственная библиотека [Электронный
	ресурс] / ред. И. И. Иванов ; Web-мастер Н. Козлова
	Электрон. дан. — М. : РГБ, 2003 — . — Режим доступа:
	http://www.rsl.ru.

The list of literature is also transliterated in English. Samples may be retrieved from: journals.uspu.ru.

Separate files should be created for pictures (black-and-white, no halftones): in vector formats - AI, CDR, WMF, EMF; in raster formats - TIFF, JPG with the resolution not less than 300 dpi in true size; diagrams from the programs MS Excel, MS Visio and so on are to be submitted together with the original file, containing the data. If pictures in raster formats contain text they should be submitted in separate MS Word file for purposes of text editing.

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1. Information about the author (if there are several authors, all authors are to be mentioned):

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- scientific degree, rank and appointment;
- affiliation to organization;
- contact information (e-mail, postal address for shipping and publication in the journal with the index).

*Note 1:* the name should be given in the transcription used in other publications of the author.

*Note 2:* It is preferable to use your work address as the address for publication.

2. Title of the article.

3. Abstract. The abstract should be presented in the form of a 150-350 words summary (1500-2000 characters with spaces) and include the following aspects of the article: scope and object of the study, topic, goal, research methods or methodology, outcomes, field of results application, and conclusion.

4. Keywords (5-7 words)

5. Classification code of the topical section - GRNTI code (the code could be found on the site of grnti.ru) and VAK code (VAK code is to be found in the Section of "Номенклатура специальностей научных работников" vak.ed.gov.ru)

The necessary condition for publishing the article is a positive review of a Doctor of sciences.

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- critical remarks on the contents and formatting;
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The review should be signed by the expert; the signature is verified in accordance with current requirements. The e-copy of the review is sent by the author together with materials for publication.

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The scientific journal *Special Education* is registered by the ISSN Center (Paris, France) and provided the International Standard Serial Number ISSN 1999-6993

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