

Ural State Pedagogical University  
Institute of Special Education

## SPECIAL EDUCATION

---

**4 (52) ` 2018**

**Editor-in-Chief:**

I. A. FILATOVA, Candidate of Pedagogy, Prof.

**Deputy Editor:**

A. V. KUBASOV, Doctor of Philology, Prof.

**Editorial board:**

O. V. ALMAZOVA, Candidate of Pedagogy, Prof.

N. S. GLUHANYUK, Doctor of Psychology, Prof.

K. DIONISIEVA, Candidate of Pedagogy, Associate Prof.

A. A. DMITRIEV, Doctor of Pedagogy, Prof.

M. N. DUDINA, Doctor of Pedagogy, Prof.

B. M. IGOSHEV, Doctor of Pedagogy, Prof.

T. P. KALASHNIKOVA, Doctor of Medicine, Prof.

S. MILEVSKI, Professor, Doctor

Z. A. MOVKEBAEVA, Doctor of Pedagogy, Prof.

O. S. ORLOVA, Doctor of Pedagogy, Prof.

T. OCHIAI, Prof.

A. B. PAL'CHIK, Doctor of Medicine, Prof.

O. G. PRIKHOD'KO, Doctor of Pedagogy, Prof.

Z. A. REPINA, Candidate of Pedagogy, Prof.

L. HOPPE, Doctor

**Technical Editor:** D. O. MOROZOV

**Executive Editor:**

I. A. FILATOVA, Candidate of Pedagogy, Prof.

Ekaterinburg 2018

## CONTENTS

### STUDY AND EDUCATION OF PERSONS WITH SPECIAL EDUCATIONAL NEEDS

**L. B. Baryayeva, L. V. Lopatina**

*St. Petersburg, Russia*

**Methodological Aspects of Support for Non-Speaking Children  
Using Alternative Communication System ..... 4**

**E. A. Ekzhanova**

*Moscow, Russia*

**E. V. Reznikova**

*Chelyabinsk, Russia*

**Model of Pedagogical Support for Children with Disabilities  
by Tutors under the Conditions of Integrated Education..... 17**

**M. M. Itskovich, D. G. Knyudde**

*Ekaterinburg, Russia*

**On the Formation of Values of Social Behavior  
in Children with Autism Spectrum Disorder through  
Translation of a Fairy Tale in the Tomatis Method ..... 34**

**Y. E. Kaz'mina**

*Moscow, Russia*

**Treatment of Emotional-Volitional Disorders in Children  
with Alalia under the Conditions of Rehabilitation Center ..... 46**

**A. V. Kubasov, L. V. Khristolyubova, A. V. Tsygankova**

*Ekaterinburg, Russia*

**Personality Oriented Approach in the Formation  
of Linguistic Component while Teaching Children  
with Disabilities..... 54**

**N. M. Nazarova**

*Moscow, Russia*

**Supported Living as a Way of Social Inclusion  
of Deaf-Blind Adult Persons ..... 62**

<b>O. G. Prikhod'ko</b> <i>Moscow, Russia</i> <b>Specific Features of Speech Development of Young Children of Different Nosological Groups</b> .....	75
--	----

<b>V. M. Sklyadneva</b> <i>Moscow, Russia</i> <b>The Modern State of Typhlopedagogical Support for Infants with Visual Impairments</b> .....	84
--	----

## **THEORY AND PRACTICE OF PEDAGOGY AND PSYCHOLOGY**

<b>N. N. Vasyagina, V. I. Kosmakova</b> <i>Ekaterinburg, Russia</i> <b>Peculiarities of Negative Behavioral Responses in Children at Children's Homes</b> .....	96
---	----

<b>E. V. Korotayeva, N. V. Serebryakova</b> <i>Ekaterinburg, Russia</i> <b>Socio-Moral Development of Preschool Children: Some Aspects of Theory and Practice</b> .....	107
---	-----

## **FROM SCHOLARS TO PRACTICAL WORKERS**

<b>V. I. Lubovskiy</b> <i>Moscow, Russia</i> <b>What Is the "Structure of Defect"?</b> .....	114
--	-----

<b>M. A. Stepanova</b> <i>Moscow, Russia</i> <b>History of Special Pedagogy in Facts and Figures. To the 110<sup>th</sup> Anniversary of the V. P. Kashchenko Sanatorium School for Children with Disabilities</b> .....	126
--	-----

## **APPENDIX**

<b>Submission Guidelines for Prospective Authors</b> .....	144
--	-----

# STUDY AND EDUCATION OF PERSONS WITH SPECIAL EDUCATIONAL NEEDS

---

UDK 376.37

BBK 4457

GSNTI 14.29.29

Code VAK 13.00.03

**L. B. Baryayeva, L. V. Lopatina**

St. Petersburg, Russia

## **METHODOLOGICAL ASPECTS OF SUPPORT FOR NON-SPEAKING CHILDREN USING ALTERNATIVE COMMUNICATION SYSTEM**

**Abstract.** The article deals with the issues of teaching children with disabilities, among whom ‘non-speaking’ children make up a considerable part, by means of supplementary and alternative communication. The authors provide a description of the system of pictographic code, the methods of teaching how to use the pictographic code, the sequence of formation of the need to independently initiate communicative contacts with the interlocutor via the means of alternative and (or) supplementary communication. The methods of rehabilitation-pedagogical work employing the system of alternative communication facilitate active interaction with non-speaking children and create conditions for their feasible socialization. In order to organize the methodologically accurate sequence of work with non-speaking children, the use of pictographic code in each concrete case allows solving the three problems highlighted in the article. First, while preparing children for socialization, it is necessary to teach them to decode numerous messages and communication signals coming in this form via various contacts with the environment. Second, it is important to promote children’s expressive speech. Third, it is necessary to involve children in alphabetical reading via replacing symbolic images by graphical images of letters.

The article describes the specific features of a code vocabulary. It is stressed that the words belonging to the same semantic group should express, as far as possible, one and the same idea. The symbols should reflect the broadest notions possible. The authors describe the background color for the pictograms worked out by them. Correlation of the word grammatical categories with the colored background is a special strategy aimed to teach functional ties between sentence elements through involving syntax. The

authors suggest a sequence of actions to teach the child to use pictographic code. The article singles out stages of work with pictograms, and describes exercises on the use of the system of pictographic symbols represented by two groups: exercises on acquisition of the system of pictographic symbols; exercises on application of the system of pictographic symbols.

**Keywords:** alternative communication; pictographic codes; pictographic symbols; children with speech disorders; speech disorders; logopedics; non-speaking children.

**About the author:** Baryayeva Lyudmila Borisovna, Doctor of Pedagogy, Professor.

*Place of employment:* Department of Logopedics, Herzen State Pedagogical University of Russia, St. Petersburg, Russia.

*E-mail:* alesej@yandex.ru.

**About the author:** Lopatina Liudmila Vladimirovna, Doctor of Pedagogy, Professor.

*Place of employment:* Department of Logopedics, Herzen State Pedagogical University of Russia, St. Petersburg, Russia.

*E-mail:* l.v.lopatina@mail.ru.

Efficient use of supplementary and alternative communication systems allows providing children with linguistic knowledge, because while acquiring word usage skills represented by graphic symbols they learn to connect and organize these symbols, programming their utterances in this way.

The main tasks of teaching alternative and supplementary communication systems are the following:

- formation of the skills of visual and/or auditory concentration upon the speaking and/or gesticulating interlocutor, “speaking” and musical toys, realistic pictures, photos, and graphic symbols;
- formation of the skills to distribute attention between an object,

image, and symbol/symbols as means of communicative problem solving;

- formation of a wish or need to imitate emotional, gestural, pantomimic and verbal strategies of interaction with the interlocutor;
- formation of the skills to imitate everyday life, instrumental and game-based actions, ability to perform them in a certain order in various communicative situations (situation-personal, business-personal, object-oriented communication);
- formation of the skills to understand the essence and necessity of establishing communication and its consequences;
- formation of the skills to understand gestures, realistic images,

words, graphic symbols, their sequences, which are used to express direct address of one interlocutor to the other; activation of the child's non-verbal intellect;

- acquisition of the corresponding instruments of alternative or supplementary communication system;
- activation of the corresponding response strategies on the basis of the communication means already acquired;
- formation of the need to independently initiate communication with other people with the help of the alternative and/or supplementary communication means;
- automation of the elementary communicative skills acquired in various situations in accordance with the communicative aim (task) [1; 3; 5; 14; 16; 17; 19; 20].

The effectiveness of teaching application of alternative and supplementary communication may be ensured by provision of certain conditions:

- algorithm of acquisition and introduction of graphic symbols;
- formation of understanding of the meanings of the symbols introduced;
- realization of the opportunity to use the symbols learnt immediately to solve communicative problems;
- constant support and commentary of any communicative signal produced by the child;
- application of various forms of interaction;

- inclusion of teaching communication as an inseparable part of the child's life in the educational, rehabilitative and developing process and the process of family education;
- proper attention to the needs and interests of the child;
- combination of various tools of instruction;
- polysemantic nature of the symbols content;
- expansion of the range of communicative partners and communicative situations the level of variability of which is determined by their potential content actualized by the lexicon, arsenal and conscious acquisition of the communication means, the child's level of independence, object and nature of help, and the strategies of the communicative behavior stimulation [1; 3; 17; 19; 20].

Proceeding from the assumption that communication is a special kind of activity, all rehabilitation-pedagogical work should be organized in such a way that would combine the main components of activity in general: *motivational* (Why should the child get in communicative interaction?); *goal-setting* (What should they get in communicative interaction for?); and *executive* (How can they get in communicative interaction?) [15; 18].

The realization of the content of teaching communication is carried out in correspondence with the level

of formation and quality of the feasible communicative means, state of the sensory, motor and cognitive spheres, development of mimetic, object-practical, playing and signemic-symbolic activity and the personality traits of the child. Age-related criterion is not determinantal in the choice of the learning content.

The following communication means can be used: *motor feasible and motivated gestures; objects (their parts, miniature copies) possessing the features of tactile and/or olfactory similarity*, in the process of manipulating which children get information not only about the form, size and color, but also about the texture, smell, weight, temperature, etc.; *realistic images (pictures), photos and graphic symbols*.

*The system of pictographic symbols (pictographic communication – PIC)* is one of the effective means of teaching non-speaking children to communicate. It is based on the use of *pictograms* – special so-called nonverbal communication means, visual speech codes, which are regarded as primary communication means preceding the formation of linguistic communication means and constituting the necessary basis for their development, or as basic communication means.

The article highlights the issues of organization of communication via graphic symbols – pictograms. Pictographic communication (PIC,

pictograms) was worked out in Canada (Maharaj, 1980) [17; 20].

The term “pictogram” denotes representation of the written text by means of a picture. Pictograms can be classified according to many categories in correspondence with the object or idea they reflect. The advantage of using pictographic symbols – pictograms – consists in the fact that all participants of communication are well aware of such signs and can operate the same images.

The use of pictographic code in each concrete case allows solving three main problems. Let us dwell on them in more detail.

1. Preparation of children for socialization through teaching them to decode numerous messages and communication signals coming in this form via various contacts with the environment (in public places, everyday life, at a shop, etc.), which, undoubtedly, grants partial social independence.

2. Support (or, in severe conditions, substitution) of expressive speech.

3. Involvement of children in alphabetical reading via replacing symbolic images with graphic images of letters. And even if the pictographic code is not an obligatory stage of teaching reading, it might be considered a transition to it.

The structure of the code vocabulary reveals the *core vocabulary* (the major part of vocabulary, about

80% of all words, irrespective of the topic and the child's age), and the *peripheral vocabulary* (words supplementing the content of the lexical nucleus) ensuring possibility of differentiated communication on certain topics [2].

The volume of the code vocabulary represented by pictograms should be enough to allow the child not only to communicate in class, everyday life, at various offices, and at home but also to promote acquisition of building more complex grammatical constructions. This is closely associated with acquisition of alphabetical writing and reading.

Each pictogram should correspond to one or maximum two words, if in the latter case the notional word is used with a preposition and, together with it, denotes one idea. The code should be logical: the words belonging to the same semantic group should express, as far as possible, one and the same idea. The symbols should reflect the broadest notions possible (for example, the verb *est'* (to eat) should be applicable in relation to both animals and people, that is why we should avoid denoting it by the pictograms showing fork and knife).

The words of the code system are classified in accordance with the basic grammatical categories. Differentiation of the grammatical categories is based on the use of a colored background.

The background colors in the pictograms worked out by us are systematized in the following way: *nouns* – blue; *verbs* – red; *adjectives* – green; *adverbs, prepositions, conjunctions* – black [3; 4; 5; 6; 7; 8; 9; 10; 11; 12; 13]. Correlation of different parts of speech designated by one and the same symbol with the corresponding colored background is obligatory. Correlation of the word grammatical categories with the colored background is a special strategy aimed to teach functional ties between sentence elements through involving syntax.

Graphic symbols (pictograms) are to be accompanied by captions in the language of the user, in our case in Russian. This facilitates further teaching the child global reading. Graphic symbols providing information at public places make up a separate category of words.

Teaching on the basis of alternative system should be conducted in a way as if the child were taught to speak with the help of oral speech.

The first “step” in such teaching is affective communication emerging since the first months of the child's life. During interaction with the baby, it is necessary to watch if the child's posture is comfortable to see and hear the interlocutor. While communicating, the visual and tactile contact with the baby, constant support of interest, and commenting on their actions are especially important.



The sequence of activities during teaching the child to use pictographic code looks in the following way.

1. Acquaintance with the object (with the purpose of finding out if the child associates the name with the object correctly enough). Objects may have different textures. Models of objects can be used instead of real objects.

2. Correlation of the object with a realistic image – a picture (pictures should be clear-cut, bright, non-stylized).

3. Correlation of the object with a photo (these should be photos of real people and objects).

4. Identification of a symbol, i.e. correlation of a real object/realistic image/photo with a graphic symbol – pictogram.

5. Doing exercises on the use of pictographic code (exercises on involvement in code acquisition – exercises on the usage).

6. Use of the graphic symbols learnt in various communicative situations.

The first graphic symbols should reflect the objects or occupations preferred by the child and acting as stimuli motivating towards initiation of communication: for example, pictograms showing favorite toys, dishes, clothes, etc. Graphic symbols should be easy to perceive, recognize and “read”. As we have mentioned above, graphic symbols are to be accompanied by captions

facilitating teaching the child global reading and allowing the interlocutors to easily understand their meanings. The choice of the graphic symbols should be determined by the zone of proximal development and by the information obtained in the process of interview of the parents, specialists working with the child, and on the basis of own observation.

Further work on acquisition of new symbols is planned with regards to the zone of proximal development, which ensures the educative nature of the process of learning. The functionality of the pictographic code, i.e. the ability to turn to the symbols in case of need, is a most important element of teaching how to use it. The learnt symbols should be regularly reviewed lest they should be forgotten. New symbols are introduced incrementally. Not more than one new symbol is recommended to be presented at a lesson.

If necessary, the teacher-logopedist helps the child to operate the symbols in the technique chosen by them. Holding the child’s hand, they can help the child to take the necessary pictogram; point at the pictogram with the child’s finger; touch the pictogram with the child’s hand; point at the pictogram with their hand; name the pictogram; enumerate the pictograms emphasizing the right one with their voice; and urge the child to point at the pictogram.

Acquisition of graphic symbols and methods of transmitting graphic information is achieved via different ways: in the process of repeating after the teacher-logopedist; in the course of independent repetition of not only a familiar model but of the one not known so well; in the process of independent passing of graphic information.

The final goal of the work consists in the formation of the child's skills to use the alternative communication system as a learning and communication tool spontaneously and effectively.

A lesson is the organizational form of teaching alternative communication means. With reference to the stage and learning tasks, there may be diagnostic lessons; lessons at which children are acquainted with graphic communication means (pictograms); and lessons-trainings (learning how to use graphic means of communication).

The following sequence of work is recommended with the view of methodologically correct introduction of the child into the world of pictograms, and with the aim of teaching them to use this system of graphic symbols.

At *stage one*, the child gets to know the pictogram and establishes the relationship between the real object and its graphic image. Having shown the real object, the teacher-logopedist finds out if the child has formed a precise association

between the name and the object itself, whether they can choose and indicate the named object among a multitude of other objects. If the child performs the task correctly, the teacher-logopedist shows them colored pictures with the image of this object. In order to make the process of entering the world of pictographic images easier various posters with the images of different objects, kinds of activity, human emotions (faces), and the like are hung on the walls of the room the child lives in, and in the corridors and classrooms of the children's institution they attend. These images are accompanied by the corresponding pictograms, i.e. the symbolic images. Thus, aided by the teacher, the child learns to correlate the real object with its pictogram. This work should be started with the words and objects most familiar and significant for the child. And it should be remembered that the number of the pictograms introduced and the tempo of their acquisition by the child are determined by the level of their intellectual development (moderate or severe intellectual disability), and the individual ability to acquire new knowledge. Later on, it is recommended to pass on from the demonstration of images of separate objects and actions, from the establishment of relationship between the real image and the pictogram, to the creation of thematic pictographic

stands (about food, daily routine, spare time, etc.). This work is based on the idea of “The Scenery”.

While introducing the child to the world of pictograms, it is necessary to make sure that the child can correlate the real object with its graphic image. If the child is unable to produce the simplest vocal responses denoting affirmation or negation, it is necessary to find and reinforce the gestures feasible for them which would become the symbols of affirmation and negation.

The *first stage* of the work with pictograms is the time of expansion of the child’s vocabulary and accumulation of the maximum number of symbols for initiation of communication and learning, activation and development of the cognitive sphere of the child, and formation of preconditions for the development of verbal speech.

*Stage two* of the work with pictograms focuses on expansion of the child’s communication sphere with the help of communicative code. To solve this problem, we recommend keeping a diary of personal life of each child. The pages of this diary should contain a certain sequence of pictures, photos and pictograms supplemented with captions explaining the depicted situation. Such a diary helps the child to organize the process of interaction informing another person about an event important for them. Later on, the child can use the images from their diary

to send forth information about the events which are personally not significant but taking place in real life. Thus, the child develops a skill to transfer symbols upon other situations, i.e. the capability to pass on information and to widen the scope of communication is expanded. The work at this stage facilitates coherent nonverbal speech and improves and enriches communication.

At *stage three*, special attention is paid to grammatical structuring presupposing division of the sentence into words, answers to questions, teaching the child graphic symbols denoting the grammatical categories of gender, number, etc. The communicative code facilitates work both with the word and the sentence: its construction, grammatical formation, etc. At this stage, the child learns to select the right pictogram from the set independently. The child forms the ability to organize the pictograms into a logical sequence constituting grammatically connected sentences or short coherent texts. The use of nonverbal communication means under the conditions of purposive systematic pedagogical intervention stimulates the emergence and development of oral speech.

Thus, the system of work with nonverbal communication means targeted at the development of the child’s productive mechanisms of information procession as a basis for the formation of the skills of communicative behavior presup-

poses the initial formation of the concept of the sign (pictogram); formation of the generalized concept on the basis of the signs learnt; reinforcement of the skills of independent activity with the pictograms; and skills of independent orientation in the system of the suggested signs.

The exercises on the use of the system of pictographic symbols are subdivided into two groups: exercises on acquisition of the system of pictographic symbols; exercises on application of the system of pictographic symbols.

***The system of exercises on acquisition of pictographic symbols*** includes nine categories.

1. *Recognition exercises.* Their aim is to teach the child to produce adequate response to the objects and abstract notions, perceived and named, independently or with the teacher's help using feasible means (verbal – to name, nonverbal – to take, point at, etc.).

2. *Reproduction exercises.* Their aim is to form the skills to denote several or all basic components of the named or perceived image verbally or nonverbally.

3. *Association exercises.* The skills of spontaneous or regulated expression of simple connection between two demonstrated objects or images are formed in the process of doing these exercises.

5. *Classification exercises,* presupposing the formation of the skills to

unite two (or more) objects and/or their images according to a suggested or independently chosen criterion.

6. *Correction exercises,* forming the skills to find and correct mistakes independently or with the help of an adult.

6. *Multiple choice exercises.* Their aim is to teach the child to choose the right pictographic symbols from a series which can extend the meaning of the sentence or text independently or with the help of an adult.

7. *Analysis and synthesis exercises,* aimed at teaching the child to unite various pictographic symbols into an "utterance". While doing such exercises, the child is to point at/name **what** they **particularly** include in the general meaning of this unity.

8. *Seriation exercises.* In the process of doing them, the child is taught to place series of pictographic symbols in a logically arranged sequence independently or with the help of an adult.

9. *Depiction exercises.* Their aim is to teach the child to express their thought using given pictographic symbols, and to depict the missing ones if necessary.

***Exercises on application of the system of pictographic symbols*** are represented by two categories.

1. Exercises the execution of which needs simultaneous application of several operations previous-

ly formed while doing exercises on acquisition of the system of pictographic symbols.

2. Grammar exercises forming the child's notions about the morphological and syntactical structure of the language.

***Acquaintance of the child with the sign-symbol and specification of its understanding*** goes along the following lines.

- Symbol identification. The teacher demonstrates the pictograms, for example, *eyes, nose, mouth, doll, cap* to the child one after another. The child is to recognize them and correlate them with real objects or their realistic images in the pictures.

- Choice of the right pictogram from a series. The teacher shows the child a number of pictograms (for example, *nose, mouth, ears, eyes*). The child is to recognize and point at the one the teacher has named (similar exercises can be done with other parts of speech).

- Choice of two identical pictograms from a series (for example, *doll – bear – car – doll; cap – cap – coat – dress; drink – eat – drink – play*).

- Choice of the identical pictogram from among a number of others. For example, the child holds the pictogram *cup* in their hand. The task is to place the pictogram beneath the identical one in the series (*plate – glass – cup – spoon – saucer*).

- Constructing sentences with the help of pictograms. The teacher places the pictograms denoting *a boy (girl), action (playing), toy (ball, doll, etc.)* in random sequence and pronounces the sentence: *I am playing ball (with a doll, etc.)*. The child is to place the pictograms in the sequence the words are pronounced in, in order to make up the needed sentence.

- Choice of the pictographic images of the sentence the teacher pronounces from a number of others. For example, the pictograms of the sentences *I am eating an apple* and *I am drinking tea* are set out in front of the child. The teacher pronounces one of the sentences, and the child is to point at the right pictographic image.

- Choice of the sentence the teacher pronounces from two sentences represented by pictograms. For example, the pictographic image of the sentence *I am dressing a doll* is placed in front of the child. The teacher pronounces two sentences: *I am dressing a doll* and *I am drawing a house* or *I am dressing a doll* and *I am feeding a doll*. The child is to point at the right pictographic image.

Special elementary communicative devices are created in the process of teaching: communicative diary of the child (thematic set of pictograms); communicative calendar; communicative board (including “choice board” and “wish

board”); visual routine and learning timetable which can be supplemented with a box of deeds done; communicative books; photo album in which photos are accompanied by the corresponding pictograms.

The content of special elementary communicative devices should ensure the child’s communication in various communicative situations and be determined by a joint effort of the parents and all specialists working with the child.

The use of visual material – pictograms – in learning allows pupils to master “reading” the information (with the help of the teacher) presented on thematic pictographic stands. Pictograms are also used at various game-based lessons, for example, in games and game-based exercises on recognition of the vehicles the pupils see in everyday life. Game-based and figurative verbal activities on acquisition of elementary rules of behavior in the street and on the road in the course of games using the elements of the game “Traffic Alphabet” (steering wheels, traffic light, traffic signs) are held using a pictographic scheme which includes various “Safety Signs”. While teaching children to cross the street on a pedestrian crossing when the lights are green, to recognize the traffic control signals and the pedestrians’ actions at the change of traffic lights, alternative and supplementary communication can also be

used: choice of pictograms reflecting the actions matching the traffic light signals. This activity, for example, can become a basis for a practical session “I am learning to be a pedestrian”.

A promising line of further work on the given method consists in creation of a “pictographic” reading book to the textbook “Alternative Reading for Children Using Alternative Communication Means”. Children’s works of literature or short stories specially made up by the teacher can be selected as a basis of pictographic texts.

Communicative books may be created for the children, and in partnership with them. A communicative book should contain a graphic instruction representing a certain situation: “Birthday”, “Visit to Grandmother”, “New Year Holiday”, etc. The child’s arsenal may include several topical communicative books with the help of which communication is promoted in various situations of communication (in public places, at educational institution, on a journey, etc.). It is recommended the communicative book should have “Contents” for better orientation.

A system of pictographic codes can become a basis for organization of not only communication but also education of children, their preparation for acquisition of reading and writing. If successful acquisition of writing presupposes a sufficient

level of development of morphological and syntactical generalizations, written grammar exercises facilitating the formation of children's ideas about the morphosyntactical structure of the language are offered to them after they have reached a certain level of cognitive and linguistic development. It is necessary to keep in mind the relationship between the core vocabulary and the peripheral vocabulary while designing communicative devices.

### References

1. Al'ternativnaya i dopolnitel'naya kommunikatsiya / red.-sost. V. Ryskina. — SPb. : Skifiya, 2016.
2. Arutyunova, N. D. Diskurs / N. D. Arutyunova // *Lingvisticheskiy entsikl. slov. / gl. red. V. N. Yartseva.* — M. : Sovetskaya entsiklopediya, 1990. — S. 136—137.
3. Baryaeva, L. B. Tekhnologii al'ternativnoy i dopolnitel'noy kommunikatsiya dlya detey s ogranichennymi vozmozhnostyami zdorov'ya : ucheb.-metod. posobie / L. B. Baryaeva, L. V. Lopatina. — SPb. : TsDK prof. L. B. Baryayevoy, 2017.
4. Baryaeva, L. B. Obuchenie gramote detey s umerennoy i tyazheloy umstvennoy otstalost'yu : posobie dlya uchenika / L. B. Baryaeva, E. T. Loginova, L. V. Lopatina. — SPb. : Soyuz, 2004.
5. Baryaeva, L. B. Obuchenie gramote detey s umerennoy i tyazheloy umstvennoy otstalost'yu : posobie dlya uchitelya / L. B. Baryaeva, E. T. Loginova, L. V. Lopatina. — SPb. : Soyuz, 2004.
6. Baryaeva, L. B. Ya — govoryu! Ya — rebenok : uprazhneniya s piktogrammami : rabochaya tetrad' dlya zanyatiy s det'mi / L. B. Baryaeva, E. T. Loginova, L. V. Lopatina. — M. : Drofa, 2007.
7. Baryaeva, L. B. Ya — govoryu! Rebenok i mir zhivotnykh : uprazhneniya s piktogrammami : rabochaya tetrad' dlya zanyatiy s det'mi / L. B. Baryaeva, E. T. Loginova, L. V. Lopatina. — M. : Drofa, 2007.
8. Baryaeva, L. B. Ya — govoryu! Rebenok v sem'e : uprazhneniya s piktogrammami : rabochaya tetrad' dlya zanyatiy s det'mi / L. B. Baryaeva, E. T. Loginova, L. V. Lopatina. — M. : Drofa, 2007.
9. Baryaeva, L. B. Ya — govoryu! Rebenok i ego dom. Uprazhneniya s piktogrammami : rabochaya tetrad' dlya zanyatiy s det'mi / L. B. Baryaeva, E. T. Loginova, L. V. Lopatina. — M. : Drofa, 2008.
10. Baryaeva, L. B. Ya — govoryu! Rebenok v shkole : uprazhneniya s piktogrammami : Rabochaya tetrad' dlya zanyatiy s det'mi / L. B. Baryaeva, E. T. Loginova, L. V. Lopatina. — M. : Drofa, 2008.
11. Baryaeva, L. B. Ya — govoryu! Rebenok i yavleniya prirody : uprazhneniya s piktogrammami : rabochaya tetrad' dlya zanyatiy s det'mi / L. B. Baryaeva, E. T. Loginova, L. V. Lopatina. — M. : Drofa, 2008.
12. Baryaeva, L. B. Ya — govoryu! Rebenok i mir rasteniy : uprazhneniya s piktogrammami : rabochaya tetrad' dlya zanyatiy s det'mi / L. B. Baryaeva, E. T. Loginova, L. V. Lopatina. — M. : Drofa, 2008.
13. Baryaeva, L. B. Ya — govoryu! Rebenok i ego igrushki : uprazhneniya s piktogrammami : rabochaya tetrad' dlya zanyatiy s det'mi / L. B. Baryaeva, E. T. Loginova, L. V. Lopatina. — M. : Drofa, 2007.
14. Vvedenie v al'ternativnyuyu i dopolnitel'nyuyu kommunikatsiyu : sb. nauch. trudov i materialov 7-y Vostochno- i Tsentral'no-Evropeyskoy nauch.-prakt. konf. po problemam al'ternativnoy i dopolnitel'noy kommunikatsii / sost. L. Kaliinnikova, M. Magnusson. — Arkhangel'sk, 2009.
15. Lisina, M. I. Formirovanie lichnosti rebenka v obshchenii. — SPb. : Piter, 2009.
16. Programma obrazovaniya uchaschchikhsya s umerennoy i tyazheloy umstvennoy otstalost'yu / L. B. Baryaeva, D. I. Boykov, V. I. Lipakova i dr. ; Pod. red. L. B. Baryayevoy, N. N. Yakovlevoy. — SPb. : TsDK prof. L. B. Baryayevoy, 2011.
17. Techner, S. fon. Vvedenie v al'ternativnyuyu i dopolnitel'nyuyu kommunikatsiyu : zhesty i graficheskie simvoly dlya lyudey s dvigatel'nymi i intellektual'nymi narusheniyami, a takzhe s rasstroystvami

autisticheskogo spektra / Stiven fon Tsher. — M. : Terevift, 2014.

18. Ushakova, O. S. Zakonomernosti ovladeniya rodnym yazykom: razvitie yazykovykh i kommunikativnykh sposobnostey v doshkol'nom detstve. — M. : TTs «Sfera», 2014.

19. Shtyaginova, E. A. Al'ternativnaya kommunikatsiya : metod. sb. / E. A. Shtyaginova. — Novosibirsk, 2012.

20. Beukelman, D. R. Augmentative and alternative communication management of severe communication disorders in children and adults / D. R. Beukelman, P. Mirenda. — Baltimore, MD : Paul H. Brookes, 1992.



UDK 376.1  
BBK Ч450+Ч420.242  
GSNTI 14.29.41  
Code VAK 13.00.03

**E. A. Ekzhanova**

Moscow, Russia

**E. V. Reznikova**

Chelyabinsk, Russia

### **MODEL OF PEDAGOGICAL SUPPORT FOR CHILDREN WITH DISABILITIES BY TUTORS UNDER THE CONDITIONS OF INTEGRATED EDUCATION**

**Abstract.** This paper considers the problem of provision of psycho-pedagogical and socio-pedagogical support to children with disabilities on the borderline between two theoretical paradigms: support and tutorship. The authors have made an attempt to take into account the most urgent methodologically validated and practically oriented approaches within both paradigms and to create a pedagogical model of support for children with disabilities and the members of their families at the intermediate secondary school stage of learning. The study is based on the data obtained in an inclusive education institution – Chelyabinsk Secondary General Education School No 73. The authors analyze the changing value-based orientations, support stages, opportunities of modification of individual educational programs, and the process of formation of value-based learning and personal aims in the child on concrete examples. The chances of performing the functions of the tutor by the pedagogues of the school support team of specialists have been considered. The article makes a conclusion that it is desirable that these functions be performed by a specially trained pedagogue — a tutor of children with disabilities. As a result, a tested model of pedagogical support for children with disabilities by a tutor realized under the conditions of integrated education at the intermediate secondary school stage of learning has been substantiated and presented. The tutor support model presupposes the following stages: 1) motivational (diagnostic) stage; 2) orientation (consultative-project) stage — discussion of the variants of the problem solution with all those interested, making predictions about the effectiveness of each variant, choice of methods; 3) content-operational (activity-based) stage; 4) assessment (reflective) stage.

**Keywords:** children with disabilities; SEND; disabilities; inclusion; inclusive education; integrated education; pedagogical support; tutors; tutorship; stimulating communication; individual educational programs.

**About the author:** Ekzhanova Elena Anatol'yevna, Doctor of Pedagogy, Professor.

*Place of employment:* Professor of Department of Logopedics, Institute of Special Education and Complex Rehabilitation, Moscow City Pedagogical University, Moscow, Russia.

*E-mail:* ekzhanova@mail.ru.

**About the author:** Reznikova Elena Vasil'yevna, Candidate of Pedagogy, Associate Professor.

*Place of employment:* Associate Professor of Department of Special Pedagogy, Psychology and Teaching Methods, South Ural State Humanitarian Pedagogical University, Chelyabinsk, Russia.

*E-mail:* elen2211@mail.ru.

### **Introduction**

The modernization of the Russian system of education and the change of the educational paradigm in the early 21<sup>st</sup> century are oriented towards improvement of the quality of education process on the basis of actualization of the personal potential of persons with disabilities (SEND). The problems existing in the sphere of child health protection and the concerns about the future of the country and its safety urge the organs of state power of the Russian Federation, the local government, the pedagogical community and the public at large to take immediate action to improve the state of the children and their protection.

Nevertheless, many problems are still far from being solved. The issue of tutor support for children with disabilities at general education institutions under the conditions of inclusive education is one of such problems.

Under the Federal Law "On Education in the Russian Federation" No 273 (Article 44), the parents (lawful representatives) of under-age pupils have the right to choose the form of education taking into account the child's opinion, as well as the recommendations of the psycho-medico-pedagogical commission [16].

In the modern social context, many parents insist on educating their children with disabilities at mainstream education institutions, which is determined by the priority, first, of the issues of socialization of children with disabilities, second, of the problems of acceptance of persons with disabilities by the surrounding people and by society at large, and, third, of the questions of getting high-quality education and complex rehabilitation-pedagogical assistance. The ideas expressed above allowed us to formulate the research problem which consists in

working out a model of pedagogical support for children with disabilities by a pedagogue-tutor realized under the conditions of inclusive education at general education institutions.

The given problem is brought about by the contradiction between the existing difficulties in the development of the system of general education and pedagogical support for persons with disabilities and the lack of scientific research and works on methods of their support by a pedagogue-tutor under the conditions of inclusive education.

Thus, elaboration of a model of pedagogical support for children with disabilities by a pedagogue-tutor under the conditions of inclusive education is one of the urgent issues of the education system under the conditions of inclusive education realization.

And our research has revealed one more aspect of the problem – it is necessary to cast a non-biased glance on the issues of support for persons with disabilities from the point of view of tutorship as a new model of interaction between an adult educator and a pupil. It is common knowledge that tutorship is a special pedagogical tradition that ensures design of individual educational programs of students and supports the process of individual education at secondary and higher schools and in the system of supplementary and continuing edu-

cation. The phenomenon of tutorship is closely connected with the history of medieval European universities. The idea of tutorship came to us from Great Britain where it appeared in the classical English universities of Oxford and Cambridge, and, based on the pivotal idea of individualization, it is being actively developed at present. In Russia, special interest in this phenomenon is associated with the names of O. S. Gazman and P. G. Shchedrovitskiy, although ideas of tutorship are already found in the works by L. S. Vygotskiy and D. B. El'konin. It was D. B. El'konin who attracted the attention of the pedagogues to the fact that while passing from one stage of education to another without special assistance of a tutor, the child loses the new psychological possessions they have formed at the previous stages of development. For example, he wrote: “As long as we cannot yet build such bridges in our work with people, we gradually begin to lose: in the transition from kindergarten to school – initiative, in the transition from primary school to basic school – thinking, in the transition from basic school to senior secondary school – goal setting, in the transition from secondary school to university – self-determination... In such social organization, mediation turns into help with adaptation to the ready-made rules and norms. Every normal pedagogue knows that nothing

can be created in such a way. The norms and rules must be shattered and lost by man, and recreated anew into functions, norms and rules” [20].

Together with the members of the Interregional Tutor Association formed in 2007 under the leadership of Doctor of Pedagogy T. M. Kovaleva, we interpret tutor support as pedagogical activity aimed at individualization of education, identification and development of the pupils’ educational motives and interests, and search for educational resources for designing their individual educational program [6; 8; 14; 15]. It is well known that individualization of education should be differentiated from individual approach. Individual approach is understood as a means to overcome the discrepancy between learning activity, educational programs and the child’s real learning capacities. In the context of individual approach, the tutor’s activity is targeted at overcoming educational difficulties related to the pupil’s individual abilities and at the search for inner and outer resources to overcome these difficulties. The principle of individualization of education means that the pupils still have the right to build up their own content of education, their own educational program. The tutor’s task here is to support the process of design and realization of individual educational program (IEP), to focus their atten-

tion on rationality of education, and to give the pupils a chance to try, to construct and to re-construct educational forms, where it would be possible to reveal educational goals and motives via their real actions [13, p. 7].

### **Materials and Methods**

To solve the problem formulated above, we have carried out theoretical and practical study of pedagogical support for persons with disabilities by a pedagogue-tutor on the base of a practical institution providing integrated education while organizing the educational process on the basis of “flexible grouping” [5; 12; 18].

The method of theoretical analysis of scientific literature and normative-legal documentation of the Russian system of education was chosen as the main method of organization of the theoretical stage of research.

To validate the conclusive ideas obtained in the course of theoretical analysis of the literary sources, the practical part of investigation was held at Chelyabinsk Secondary General Education School No 73. 8 pupils with disabilities of forms 1 through 8 who had a recommendation to enter the adapted general education program of primary education in accordance with the FSES for children with disabilities (disorder of psychological development) and who needed the additional as-

sistance of a pedagogue-tutor took part in the experiment [11; 16].

To solve the problems set, a complex of complementary research methods was used. The theoretical methods included: analysis of psycho-pedagogical, scientific-methodological literature and normative-legal acts, generalization of scientific-research works and progressive pedagogical experience on the problem under study. The empirical methods constituted: testing, interview, analysis of activity outcomes, summative and formative experiments. The mathematical methods embraced: quantitative and qualitative procession of the materials of experimental research.

The practical part of the study was conducted in three stages.

1. Summative experiment: identification of the level of preparedness of the pupils with disabilities for acquisition of general education programs in Russian, mathematics and literary reading. The primary diagnostic test was performed during the first two adaptive weeks of the pupils' stay at school in the course of the psycho-pedagogical experiment [12].

2. Formative experiment: design and realization of the model of pedagogical support for persons with disabilities by the pedagogue-tutor under the conditions of inclusive education.

3. Control experiment: we carried out a study aimed at identification

of specificity of pedagogical support for persons with disabilities by the pedagogue-tutor and assessment of effectiveness of the model of pedagogical support realized.

## Results

The term "support" first appeared in the book by G. Bardiyer, N. Romazan, T. D. Cherednikova (1993) in combination with the word "development". The word "support" is polysemantic and denotes various phenomena from a strategy used while playing bridge to a specific type of musical modulation. The meanings of the stem of the word are also numerous and change within a wide range (about the polysemy of the Russian word "soprovozhdeniye" see: T. I. Chirkova - *Trans*).

Western sociology, as a rule, considers support in applied research (S. Cobb, K. Crnic, M. Greenberg, N. Robinson, A. Ragozin, T. K. Crove, E. L. Jonson, S. W. Jacobson, K. F. Frye, Y. S. Morinada, K. Sakata, R. Koshi). A number of foreign studies (K. Valstrom, K. McLaughlin, P. Zvaal, D. Romane) characterizing individual development processes interpret support as "pedagogical assistance for the pupil aimed at helping them to solve their problems independently and to overcome everyday difficulties, which presupposes self-knowledge and adequate perception of the environment" [17, p. 57].

In psychology, support is viewed upon as a system of professional activity promoting the creation of conditions for successful adaptation of a person to their life conditions. Effectively organized support helps the person to enter the “zone of development” which is not yet accessible for them (G. Lefrançois).

In pedagogy, support is understood as activity ensuring the creation of conditions for the subject of development to make an optimal decision in various situations of life choice (S. A. Zelenkov); or as interaction between the supporter and the supported aimed at the solution of the life problems of the latter (E. I. Kazakova, A. P. Tryapitsyna).

Thus, we may conclude that support is understood in pedagogy as a special kind of interaction with the purpose of creating favorable conditions of development of the subjects of interaction. As long as pedagogical support is an indispensable part of education process, it is necessary to regard it from the point of view of a subsystem in the system of education. Pedagogical support is treated as a method ensuring creation of conditions for the subject of development to make optimal decisions in various situations of life choice.

The given approach has much in common with the ideas of tutor support realized in modern schools, and specifically under the condi-

tions of inclusive education. According to G. M. Bespalova, “pedagogical support is a dynamic process of more and more extensive transfer of responsibility for the realization of self-education from the teacher to the pupil” [4].

Tutor is defined by modern researchers as “a person supporting the process of activity acquisition”. Thus, tutor support consists in the organization of the child’s movement along the path of education, which is founded on constant reflexive coordination of their achievements with interests and wishes. The tutor (or any pedagogue functioning as such) during the first stages of education, functions as the child’s guide into the educational space of the school. They also help to prepare the child to leave this educational space.

The following definitions of the term “tutor” can be found:

- a guide;
- a person who teaches one to solve problems independently (to transform them into tasks);
- a position that supervises and supports the process of self-education;
- a person who connects the processes of learning, self-education and formation of a way of life in the tutored one;
- a mediator (between the cultural and the individual, the individual and the corporate, the great history of the learned and the

individual history of the beginner; between different subjects of the educational space – pupil, teacher, parents, etc.);

- a person who reforms the educational space to suit the tasks of individualization of education [4; 6; 7; 8; 13; 14].

Thus, a tutor is, first of all, the pupil's advisor: they can help the child to work out an individual educational program, to determine their position with relation to the learning process itself and to separate elements of this process. At the same time, the tutor can answer the question how to use the learning outcomes and how to modify the given educational program and learning activity in the process of individual development of this concrete person (P. G. Shchedrovitskiy). The tutor's task is to help in creating individual educational space as the space of revelation of cognitive initiatives and interests of each particular child.

T. M. Kovaleva singles out the criteria according to which some activity can be defined as that of a tutor [8; 13; 14]:

- diagnostics;
- versatility of offers;
- choice of offers;
- design of an individual educational program (IEP);
- choice of IEP realization;
- IEP support;
- reflection.

The program of pedagogical support in pedagogy is also regarded through the consecutive realization of the following steps: diagnostics of the essence of the problem; information retrieval for the methods of its solution; discussion of the problem solution variants and the choice of the most feasible ways; provision of primary assistance at the stage of the solution plan realization; reflection in the process of performance or completion of the task set (A. P. Tryapitsyna, L. N. Berezhnova, E. I. Kazakova, M. R. Bityanova, etc.).

In our study we are going to draw on the definition of the notion “support” suggested by L. M. Shipitsyna in accordance with which this notion is based on the system-oriented approach that gives priority to the inner potential of personality development. Support presupposes realization of subject-subject (the supported and the supporter) relations targeted at the solution of the problems of development and social adaptation of the supported person. The intertwining and complementary processes of diagnostics, counseling, provision of help and aid, acceptance and sympathy constitute the main functional load of support [18].

Thus, pedagogy interprets support as a special kind of interaction the purpose of which is the creation of favorable conditions for the development of the subjects of inter-

action. Pedagogical support is the method that promotes the creation of the conditions under which the subject of development can make optimal decisions in various situations of life choice.

The municipal general education institution Chelyabinsk Secondary General Education School No 73 enrolls children with developmental disorders whose individual abilities need learning according to different kinds of educational programs on the basis of conclusions of the medico-psycho-pedagogical commission of the district methods center. It is necessary to work out individual variable programs of learning for such pupils.

The school administration has established interaction with the preschool education institutions and the district medico-psycho-pedagogical commission; therefore, the pedagogues and the specialists possess information about what kind of children will come to get education at the school. During the adaptation period at school, the pedagogue-tutor together with the parents decides on the issues of adaptation of the children with disabilities, conducts interviews of the parents and the child, and studies the peculiarities of family education. The overwhelming majority of the children with disabilities demonstrate marked school disadaptation after the summer vacation, especially at the time of transition from one stage

of education to another. The methods of organization of "Meetings of the kindergarten and the school" are still to be elaborated by an inquisitive researcher.

The school chosen as the base of the given research has been acknowledged as an inclusive education institution on the level of the region and the Russian Federation. Inclusive education of children with disabilities is based on the aspiration to teach all children together, without grouping children with disabilities into special classes and thus avoiding the formation of inferiority complex and the feeling of being second-rate in such children. This strategy allows the pedagogues to preserve, on the example of the brighter students, the landmarks for future achievements and development in the form of a kind of target to which less successful students will aspire.

The methodological foundations of support include: the qualitative approach to support (L.S. Vygotskiy, J. Piaget, N.I. Sakharov, A. R. Shevchenko and others), consideration of age-related specificity of development (L.S. Vygotskiy, A. N. Leont'yev, D.B. El'konin, L.I. Bozhovich, A. V. Zaporozhets), the personality-oriented approach (L.S. Vygotskiy, A.N. Leont'yev, L.I. Bozhovich, D.B. El'konin) and the activity-based approach (A.N. Leont'yev, D.B. El'konin, A.V. Zaporozhets, V.V. Davydov).



E. A. Ekzhanova singles out the following principles of support upon which the activity of the experts of special education is based: ethics and professional competence; targeting, timeliness, intensity and continuity of support; comprehensiveness and systematicity of support; the principle of holisticity of ideas about the child and individualization of support; the principle of dynamic observation and systematic multilevel analysis of the data obtained and possessed [5].

Let us give an example of realization of the model of tutor support for a pupil with disorder of psychological development at the second stage of education.

A child with disorder of psychological development belongs to the category of children with disabilities because such pupil is characterized by a slow tempo of psychological development, personal immaturity, disorder of cognitive activity and needs special conditions for education and development.

The birth of a child with developmental disorders is always a stress for the family. The child with a disability has restricted freedom and significance of their social roles. They are highly dependent on the family, and their skills of social interaction are limited. The problem of educating the child with disabilities cannot be solved, as a rule, by the family alone; the parents find themselves in a psychologically

complicated situation: they experience pain, sorrow, feeling of guilt, and often fall into despair. Such families need complex psychopedagogical support of qualified specialists.

Fifth Grade pupil Aleksandr N. (born 2007) has attended the abovementioned education institution since his enrollment in the First Grade. In Grade 1, in the course of the specialist council, it was found out that Aleksandr had problems with learning. In order to individualize his learning program, he was sent to the district medico-psychopedagogical commission, which recommended learning in accordance with adapted educational programs for children with disorders of psychological development and special classes with teacher-logopedist and psychologist. A special adapted educational program and a program of individual tutor support were designed for Aleksandr.

Below is a quote from the anamnesis of Aleksandr N.: "Aleksandr had problems with acquisition of the program material of grades 1 and 2, but significant problems began in the beginning of Grade 3 after his mother's death. The program material of Grades 3 and 4 was acquired rather poorly. The boy has a quiet and uncommunicative disposition, has no friends in the group, and shows problems with communication with typical peers".

At the end of Grade 4, after diagnostics at the district medico-psycho-pedagogical commission, Aleksandr's father was advised to have the child's curriculum changed (the curriculum for pupils with intellectual disability was recommended for Aleksandr) due to inability to master the general education program, and to continue learning in a special education (rehabilitation) group. Due to the father's refusal, the district medico-psycho-pedagogical commission specialists recommended Aleksandr N. to go to the Fifth Grade adapted curriculum group for children with disorders of psychological development. But due to the father's insistent wish, Aleksandr N. continued learning in the general education group.

The school which Aleksandr N. attends realizes the integrated education technology and is an inclusive school for pupils with disabilities; that was why there were no opportunities for opening a fifth grade group of special (rehabilitation) learning in the school, which brought about the need of individual psycho-pedagogical support for Aleksandr N.

The tutor's acquaintance with Aleksandr began in Grade 5, when he encountered difficulties in learning which became evident at the end of the first quarter. Aleksandr N. failed in six main subjects: Russian, mathematics, literature, nature study; history, and social science

due to lack of control over his learning on the part of the parents and the trusting attitude of the parents to the child's stories about his learning.

In the beginning of the fourth quarter, we had a serious talk with Aleksandr's parents about the need to pay more attention to the child and to control his learning. The father was advised to use praise and approval of even smallest achievements of the boy, to enhance control over homework, and to consult subject teachers about the child's academic standing. The son began to attend individual rehabilitation classes with the psychologist and the teacher-defectologist. At the end of Grade 5, the program material of the grade was not mastered, and all specialists working with the boy were positive that the child could not learn in a group of 25 pupils. He does not engage in frontal work due to lack of the skills to organize his activity independently, because of knowledge gaps in a number of subjects, and due to lack of assistance on the part of the family members. It was decided at the sitting of the medico-psycho-pedagogical council to organize tutor support for Aleksandr during classes, because control and counseling measures for Aleksandr and his parents taken by the psycho-pedagogical support specialists of the school were not enough. With the father's agreement, the school

council specialists sent the boy for additional examination to the Region medico-psycho-pedagogical commission for correction of the learning curriculum and additional recommendations about the child's support. The boy's father asked the school specialists' help in taking the child to the examination as he was busy on the job and was not competent in the given sphere.

The pedagogue-tutor cooperated with the father and rendered help in passing diagnostic tests at the Region medico-psycho-pedagogical commission, in sending application for commission, and in collecting all necessary documentation for the boy's examination. The tutor interacted with the Region medico-psycho-pedagogical commission specialists during registration and examination process, with the outpatient clinic specialists while passing medical examination (application for consultation and finding information about consultation hours of the doctors included in the commission).

On August 31, 2017, according to the express diagnostics results, the Region medico-psycho-pedagogical commission sent Aleksandr for inpatient observation at the commission to coordinate the boy's curriculum. On the basis of inpatient examination results Aleksandr received the following conclusion: disharmonic development, borderline intellectual functioning.

After passing inpatient diagnostics, he was recommended to learn and be educated according to the Fifth Form adaptive educational program of basic general education on the basis of the curriculum for special (rehabilitation) education institutions of type VII beginning with October 2017. In case of recurrent failure to master the educational program, it was recommended to undergo control inpatient examination at the Region medico-psycho-pedagogical commission. The pedagogue-tutor paid much attention to personal interaction with Aleksandr. In their interviews, the accent was made on the personal interests of the child, analysis of the child's participation results in the system of supplementary education which was intensive enough at the first stage of learning. The tutor discovered the personal preferences of the boy in activity and communication, discussed and set new targets for the future life and education. The boy became interested in a number of professions and the personality traits necessary for the people occupied in the prospective professional activity.

At present, Aleksandr N. continues learning in the Sixth Grade of Chelyabinsk Secondary School No 73. There are 26 pupils in the group. After inpatient diagnostics and observation by adults, the boy adapted himself to the group, established friendly relations with the

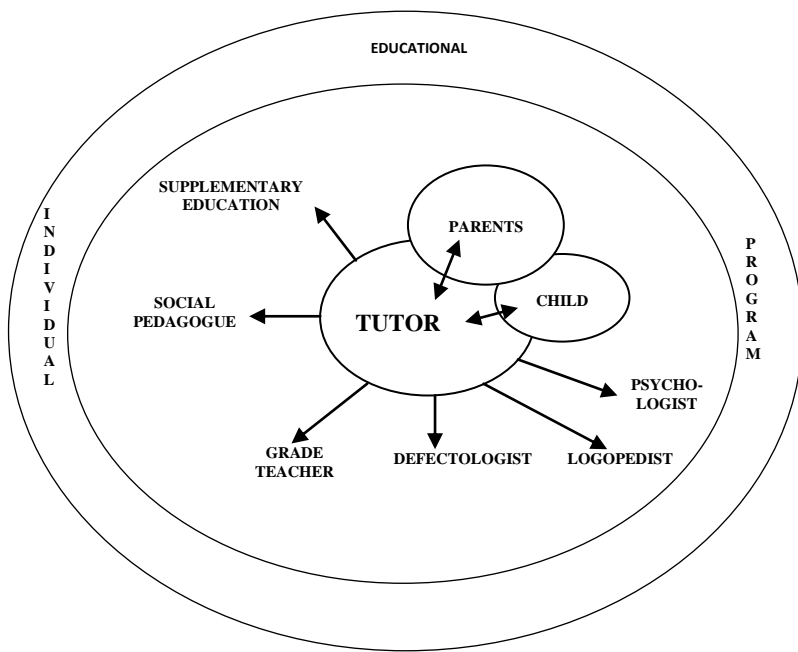
peers and even made friends with another boy (which was noticed even by the father). The progress in development and communication was marked by the grade tutor, too. All this became possible due to the realization of the plan of consecutive and systematic pedagogical support of the pedagogue-tutor and other specialists of supporting professions.

At present, the pedagogue-tutor visits the class of Aleksandr N. regularly, helps the child in the subjects difficult for him (math, Russian, foreign language, history, and geography), and talks with the subject teachers and the grade tutor. The tutor's technologies include non-traditional approaches which can help the child in complicated learning situations. For example, Aleksandr was taught mnemotechnologies. He knows and actively uses techniques of relaxation and muscle tension release. The pedagogue-tutor helps Aleksandr to maintain friendly relations with the classmates. Aleksandr attends out-of-class activities and sports holidays together with his classmates. He has revealed certain preferences in the choice of leisure activities and sports groups. The pedagogue-tutor interacts with the father on a regular basis and consults him on issues of not only providing

Aleksandr assistance with his learning but also encouraging his efforts to keep the table, the room and the schoolbag tidy and in good order. The father began to allow his son to invite the boy's friends to their house. The father listens to the boy's stories about the events that take place in his life.

The example described above demonstrates the necessity and efficiency of the pedagogical tutor support of the child with disabilities in accordance with the trajectory worked out by specialists; the positive changes also touched the relationships with the same-age peers at the middle stage of general education school. The child with disorder of psychological development and their immediate environment turned out to be capable of reflection and development of perspective vision of development on the whole. This is only one example of realization of the model of tutor support for pupils with disabilities under the conditions of inclusive school. Now we are going to characterize this model on the whole.

The model of pedagogical support for pupils with disabilities by the pedagogue-tutor reflects the structural-organizational and content-processual peculiarities of support (see Figure).



**Figure.** Model of pedagogical tutor support for junior schoolchildren with disorders of psychological development under the conditions of integrated education

The suggested model of tutor support is realized through the following stages:

1) motivational (*diagnostic*) stage – identification and comprehension of the essence of the problem, its causes and potentially possible solutions;

2) orientational (*consultative-projective*) stage – discussion of the variants of the problem solution with all those interested, making predictions about the effectiveness of each variant, choice of methods.

The responsibilities for the decision realization, timetable of implementation and plan correction are distributed among the participants. An individual program of psychopedagogical support for each child is worked out at this stage. The program helps with removing obstacles in communication and education, with solving issues of career education, with establishing relations with the surrounding people (teachers, peers, and parents), and with conducting rehabilitation work on

overcoming disorders of psychological processes and emotional-volitional sphere. Special attention is paid to analysis of the child's preferences, and a variable specter of existing prospects is discussed;

3) content-operational (*activity-based*) stage – rehabilitation-educational programs on the diagnostic basis are worked out with relation to each concrete child. The child becomes the rightful participant of the work done. He learns to think about himself, about his inner and outer circle of communication. The educational space is formed in such a way so that it might be a space of expression of the child's cognitive initiatives and interests. And this thesis is accepted and supported by all participants of the psychopedagogical support and by the members of the child's inner circle of communication;

4) assessment (*reflexive*) stage – analysis of activity outcomes aimed at the solution of the problem; the stage can be the final one in the solution of an individual problem or the beginning one in designing special methods of prevention and rehabilitation of mass problems taking place in an education institution, including final pedagogical and psychological diagnostics. The parents' level of satisfaction with the child's support, making conclusions and planning prospective measures for the future are taken into account. And, which is still more important,

we assess the degree of the child's independence in the solution of existing problems and the opportunities for their future inclusion in intelligent creative acquisition of the experience of learning, communication, and life.

The following conditions should be fulfilled in order to realize tutor support at an education institution: normative documentation of tutor support (on the level of local legislation); methods support materials; individualization of the education process which is achieved by giving a free choice of the place and form of education, independent selection of the topics and areas of research, project and creative activity; expansion of the space of social activity of the pupils which is ensured by their inclusion in various forms of presentations, organization of profile testing; organization of the space of reflection which is provided within the framework of consultations and discussions of educational goals and life perspectives, educational stories and events with the pupils.

The main tool of learning and upbringing and the basic functional obligation of the pedagogue-tutor consist in creation of individual educational program which undergoes a constant process of specification and correction. Alterations are made as a result of common analysis of success and achievements of the pupil on the road of knowledge

acquisition. This determines the various tasks and functions of the specialists in the sphere of realization of pedagogical support for the pupils with disabilities under the conditions of inclusive school. Coming to the lesson, the teacher-defectologist has and realizes their own educational aims and interests, and the tutor proceeds from the interests of the pupils, helping the defectologist to realize these aims. The teacher-defectologist sets the norms, content, route and tempo of learning. The pedagogue-psychologist works in the direction of study and development of the pupils' psychological processes. The grade tutor organizes interaction of the school-children in the group. The social pedagogue organizes work with the child and their family, carries out diagnostics and rehabilitation, and works towards a unified outcome in the acquisition of the educational program. The pedagogue-tutor works on the formation of self-acceptance, personal preferences and cognitive and creative interest of the pupil and supports the realization of individual educational programs.

### **Conclusion**

The functions of a pedagogue-tutor at a modern education institution can be performed both by a qualified specialist and a social pedagogue, teacher-defectologist, or another specialist of supporting professions. Still preference should

be given to a professionally trained qualified tutor as the carrier of special knowledge about the methods of stimulated communication between an adult and a child. In our research, the pedagogue-tutor helps to realize individual rehabilitation-educational programs worked out for children with disabilities by the specialists of the council, does not only render assistance to the child in academic activity but also coordinates passing medical examinations and commissions prescribed for the child. The tutor becomes the child's guide into the world of learning, upbringing and self-development. In order to assess the dynamics and effectiveness of rehabilitation measures, the pedagogue-tutor carries out monitoring of the pupils' development. Evaluation of effectiveness of pedagogical support is done on the basis of systematic psycho-pedagogical observation of the pupil in the course of learning activity. Practice shows that it is only the individual differentiated approach to the process of the child's learning in a class of peers that allows successful acquisition of the educational program and adaptation and socialization in society. We can watch the realization of **the principal goal of support** which consists in letting the child achieve the most with the abilities and opportunities they have, irrespective of the existing problems and developmental deficiency.

## References

1. Aleksandrova, E. A. Pedagogicheskoe soprovozhdenie samoopredeleniya starshikh shkol'nikov / E. A. Aleksandrova. — M. : Gumanit. izd. tsentr «VLADOS», 2001. — 136 s.
2. Aleksandrovskaya, E. M. Psikhologicheskoe soprovozhdenie shkol'nikov : ucheb. posobie dlya vuzov / E. M. Aleksandrovskaya, N. I. Kokurkina, N. V. Kurenkova. — M. : Akademiya, 2002. — 208 c.
3. Amonashvili, Sh. A. Razmyshleniya o gumannoy pedagogike / Sh. A. Amonashvili. — M. : Izd. dom Shalvy Amonashvili, 1995. — 496 s.
4. Bespalova, G. M. T'yutorskoe soprovozhdenie shkol'nika: organizatsionnye formy i obrazovatel'nye efekty [Elektronnyy resurs] / G. M. Bespalova. — Elektron. tekstov. dannye. — Rezhim dostupa: [http://thetutor.ru/school/junior\\_high\\_school\\_article\\_03.htm](http://thetutor.ru/school/junior_high_school_article_03.htm) (data obrashcheniya: 14.10.2018).
5. Ekzhanova, E. A. Osnovy integrirovannogo obucheniya : posobie dlya vuzov / E. A. Ekzhanova, E. V. Reznikova. — M. : Drofa, 2008. — 210 s.
6. Zybareva, N. N. T'yutorskoe soprovozhdenie inklyuzivnogo obrazovaniya [Elektronnyy resurs] / N. N. Zybareva. — Elektron. tekstov. dannye. — Rezhim dostupa: [http://www.thetutor.ru/lechebn\\_ped/articles.htm](http://www.thetutor.ru/lechebn_ped/articles.htm) (data obrashcheniya: 15.10.2018).
7. Karpenkova, I. V. T'yutor v inklyuzivnoy shkole: soprovozhdenie rebenka s osobennostyami v razvitiy. Iz opyta raboty / I. V. Karpenkova ; pod red. M. L. Semenovich. — M. : TsPPRIK «Tverskoy», 2010. — 88 s.
8. Kovaleva, T. M. Ne uchitel', ne psikholog, ne klassnyy rukovoditel': t'yutorstvo kak odno iz napravleniy preodoleniya formal'noy pedagogiki / T. M. Kovaleva // Pervoe sentyabrya. — 2004. — № 66.
9. Maksimov, V. V. Sovremennaya ideologiya t'yutorstva (v svete pedagogicheskikh issledovaniy L. S. Vygotskogo (1896—1934 gg.)) / V. V. Maksimov // T'yutorstvo: ideya i ideologiya. — Tomsk, 1996. — S. 57—63.
10. Mustaeva, L. G. Korrektsionno-pedagogicheskie i sotsial'no-psikhologicheskie aspekty soprovozhdeniya detey s ZPR / L. G. Mustaeva. — M. : Izd-vo «Arkti», 2005. — 54 s.
11. Prikaz Minobrnauki Rossii ot 19 dek. 2014 g. N 1598 «Ob utverzhdenii federal'nogo gosudarstvennogo obrazovatel'nogo standarta nachal'nogo obshchego obrazovaniya obuchayushchikhsya s ogranichennymi vozmozhnostyami zdorov'ya» [Elektronnyy resurs]. — Elektron. tekstov. dannye. — Rezhim dostupa: <https://minobrnauki.rf/%D0%B4%D0%BE%D0%BA%D1%83%D0%BC%D0%B5%D0%BD%D1%82%D1%8B/5132> (data obrashcheniya: 12.10.2018).
12. Reznikova, E. V. Psikhologo-pedagogicheskaya programma korrektsionnoy raboty / pod red. E. V. Reznikovoy, L. E. Shevchuka, A. M. Denisova. — Chelyabinsk : Tsitsero, 2013. — 108 s.
13. T'yutorskoe soprovozhdenie detey s ogranichennymi vozmozhnostyami zdorov'ya v obrazovatel'nykh uchrezhdeniyakh, realizuyushchikh inklyuzivnyuyu praktiku [Elektronnyy resurs]. — M. : MGPPU, 2012. — Elektron. tekstov. dannye. — Rezhim dostupa: [http://psycentre26.ru/docs/Commission/forprof/IO/10\\_TutorSoprDetsOgrVozmZdor.pdf](http://psycentre26.ru/docs/Commission/forprof/IO/10_TutorSoprDetsOgrVozmZdor.pdf) (data obrashcheniya: 11.10.2018).
14. T'yutorskoe soprovozhdenie individual'nykh obrazovatel'nykh programm na raznykh stupenyakh obucheniya : materialy Mezhdunar. nauch.-prakt. konf. (28—30 marta 2012 g., g. Perm') / pod obshch. red. L. A. Kosolapovoy ; red. kol.: T. Ya. Shikhova, N. V. Yunyayeva, T. P. Gavrilova ; Perm. gos. humanit.-ped. un-t. — Perm' : PGGPU, 2012. — 205 s.
15. T'yutorstvo: kontseptsii, tekhnologii, opyt : yubileyyny sb., posvyashch. 10-letiyu t'yutorskikh konferentsiy. 1996—2005. — Tomsk, 2005.
16. Federal'nyy zakon Rossiyskoy Federatsii «Ob obrazovanii v Rossiyskoy Federatsii» [Elektronnyy resurs] : 29 dek. 2012 g. № 273. — Elektron. tekstov. dannye. — Rezhim dostupa: <https://minobrnauki.rf/%D0%B4%D0%BE%D0%BA%D1%83%D0%BC%D0%B5%D0%BD%D1%82%D1%8B/2974> (data obrashcheniya: 12.10.2018).
17. Chirkova, T. I. Psikhologicheskaya sluzhba v detskom sadu / T. I. Chirkova. — M. :



- Pedagogicheskoe o-vo Rossii, 2001. — 224 s. — (Ser.: Psikhologiya razvitiya).
18. Shevchuk, L. E. «Gibkie» klassy — forma okazaniya korrektsionno-pedagogicheskoy pomoshchi uchashchimsya s osobennostyami razvitiya v usloviyakh integrirovannogo obucheniya / L. E. Shevchuk, E. V. Reznikova. — Chelyabinsk : IUMTs «Obrazovanie», 2008. — 143 s.
19. Shipitsyna, L. M. Kompleksnoe soprovozhdenie detey doshkol'nogo vozrasta / pod nauch. red. prof. L. M. Shipitsynoy. — SPb. : Rech', 2003. — 240 s.
20. El'konin, D. B. Detskaya psikhologiya : ucheb. posobie dlya stud. vyssh. ucheb. zavedeniy / D. B. El'konin ; red.-sost. B. D. El'konin. — 4-e izd., ster. — M. : Akademiya, 2007. — 384 s.

UDK 376.42  
BBK 4459  
GSNTI 14.29.23  
Code VAK 13.00.03; 19.00.10

**M. M. Itskovich, D. G. Knyudde**  
Ekaterinburg, Russia

**ON THE FORMATION OF VALUES OF SOCIAL BEHAVIOR  
IN CHILDREN WITH AUTISM SPECTRUM DISORDER  
THROUGH TRANSLATION OF A FAIRY TALE  
IN THE TOMATIS METHOD**

**Abstract.** The paper notes that socialization of children with autism spectrum disorder (ASD) is made even more difficult by problems with interactive communication. The methods of bioacoustic feedback, and specifically the Tomatis method (the patient's brain is stimulated by translating through earphones and bone conduction headset classical music, fairy tales or stimuli pronounced by the mother) are used to reduce the degree of manifestation of undesirable, field, aggressive or autodestructive behavior. The empirical observation of children training by the Tomatis method for a period of two years revealed that patients with ASD who listened to the fairy tale "The Little Prince" demonstrated a more marked reduction of the level of aggression (autodestructiveness) and a higher level of kindness and readiness to get in contact in comparison to the children who listened to the sonatas by Mozart. The authors posed a hypothesis that the fairy tale "The Little Prince" possesses a psycho-semantic structure forming in the child with ASD the values of empathy and communicability, and reducing the aggressive (autoaggressive) behavior. The article analyzes the impact of the text of the fairy tale "The Little Prince" on accentuations of the psyche of the child with ASD. It is shown what psycho-semantic mechanisms of the text of the fairy tale form understanding and interiorization of the values by the child, in whom social and personal values have not been formed yet. The article proves the specific effectiveness of the bioacoustic method of Tomatis using the mother's voice to enhance the impact of the fairy tale discourse.

**Keywords:** children's autism; autism spectrum disorder; social behavior; social orientation; aggression; tales; fairy tale therapy; archetypes; art therapy; psychotherapy; psychotherapy methods.

**About the author:** Itskovich Mark Matusovich, Candidate of Psychology.

*Place of employment:* Associate Professor of the Basic Department “Special Pedagogy and Psychology” of the Ural Federal University; Medical Psychologist, State Public Educational Institution of Sverdlovsk Oblast “Boarding School No. 17”, Ekaterinburg, Russia.

*E-mail:* cpezschool@mail.ru.

**About the author:** Knyudde Dar’ya Gennad’yevna.

*Place of employment:* Post-graduate Student at Department of Speech Therapy and Clinic of Dysontogenesis, Institute of Special Education, Ural State Pedagogical University; Certified Specialist in Audio-Psychophonology according to the method of Alfred Tomatis, Defectologist, ABA Therapist, State Public Educational Institution of Sverdlovsk Oblast «Boarding School No. 17», Ekaterinburg, Russia.

*E-mail:* cpezschool@mail.ru.

**Problem urgency.** The issue of socialization of children with autism spectrum disorder (ASD) is widely discussed by the professional community [15]. The essence of the problem consists in the fact that the child’s socialization needs communication. It is necessary in order to demonstrate the aims of socially acceptable models of behavior to the child. But it is interactive communication that is a deficient process and characteristic feature of children with ASD. Communication is hampered due to various causes: aggressive and auto-aggressive behavior, low affiliative needs, and poor mimetic skills [1].

Various methods are used to reduce the degree of manifestation of undesirable, field, aggressive or autodestructive behavior: ABA (Applied behavior analysis) therapy [9; 19; 13], sensory integration [14], the TEACCH method of environ-

ment creation [8], kinesiology [6] and many other methods [16].

The methods of bioacoustic feedback make up a special block: BAC (bioacoustic correction of the state of the brain via harmonizing procession of the brain waves of the patient and sending them back to the brain), TLP («The Listening Program» influences the brain via transmitting classical music modified in frequency through earphones and bone conduction headset), the Tomatis method (stimulates the patient’s brain via playing back classical music, fairy tales or stimuli pronounced by the mother through earphones and bone conduction headset).

The common feature of these methods is the fact that the acoustic channel is used to influence the brain and the central nervous system to harmonize the psychological state and behavioral manifestations in children

with ASD and ADHS. And numerous studies prove their effectiveness [12].

While analyzing the description of the methods and results of application of the abovementioned procedures, the stress is made on the differences in the influence of different forms of music impact upon various structures of the neural networks of the brain. Nevertheless, we have not found analysis of brain-active potential of the texts used in bioacoustic intervention. Still the urgency of this topic is evident, because verbal intervention issuing from the psychologically significant for the child figures of mother and father may be both rather strong and, at the same time, may possess a wider specter of orientations in comparison to the orientation of the bioacoustic stimulation proper of the topics of the brain. The fact that the mother's influence on the neurobiological functioning of the brain is great and saliently underestimated is corroborated by the studies of Vinod Menon, MD, Professor of Psychiatry and Behavioral Sciences at Stanford University, director of Stanford Cognitive and Systems Neuroscience Laboratory [9].

The given article focuses on the Tomatis method. The procedures involving this method are carried out both on the material of classical music (Mozart) and a text read by the mother (the fairy tale "The Little Prince").

The empirical observation (protocol VB-MAPP) of a sample of 80 children aged 3-7 with the officially stated diagnosis F 84.0-4 training via the Tomatis method over a period of two years revealed:

- a more marked reduction of the level of aggression (autodestructiveness) in the patients with ASD who listened to the fairy tale "The Little Prince" in comparison to the children who listened to the sonatas by Mozart;
- a higher level of kindness and readiness to get in contact in the patients with ASD who listened to the fairy tale "The Little Prince" in comparison to the children who listened to the sonatas by Mozart.

On the basis of the abovementioned observations we have posed a hypothesis that the fairy tale "The Little Prince" possesses a psychosemantic structure forming in the child with ASD the values of empathy and communicability, and reducing their aggressive (autoaggressive) behavior.

In order to test the hypothesis posed with the help of the expert program VAAL [10; 6], we have carried out content analysis of the fairy tale "The Little Prince". The content analysis included three subtypes: category load, category ties, and emotional-lexical evaluation. The scores were normalized for a text of 1,000 words.

Let us discuss the content analysis results.

Within the category of “Accentuations” actualized by the given text the accentuation “demonstrativity” (14.9 %) turned out to be more vividly expressed. Thus, the text urges the listener to show and demonstrate themselves.

Within the category of “Psychoanalytical symbols”, the archetypical symbols (17.72 %) appeared to be more vividly expressed. As long as the text is read by the mother, the archetypical symbols have a feminine orientation. And the impact of the mother’s voice is enhanced by the age-related regression of the child as a result of application of the effect of fetal hearing in the Tomatis method, which forms the association between the given procedure and the time of being in utero in the perinatal period.

Within the category “Motives”, no motives marked by the degree of manifestation were singled out. Therefore, the tale is not oriented towards the formation of motives as conscious needs but has direct influence on actualization of the unconscious ones.

Within the category “Needs”, the inner needs take the lead. Therefore, the text urges the child with ASD towards demonstrative (see the category “Accentuations”) manifestation of their needs, i.e. towards withdrawal from the autistic state.

Within the category “Valency” (emotional), both negative and positive valencies are expressed practi-

cally identically. Therefore, the text urges towards the demonstration of the whole range of feelings.

Within the category “Instrumental activity”, such kinds of activity take the lead as translation and movement. Therefore, the text urges towards the translation of needs and manifestation of activity, which again facilitates the withdrawal from the autistic preoccupation with oneself.

Within the category “Information”, “insincerity” is the most vividly expressed characteristics. This text message becomes evident with reference to the motif of the tale: “We are responsible for those we have tamed”. The text urges towards sincere manifestation of emotions with the close people and taking responsibility for their feelings.

Within the category “Perception channels”, the most vividly expressed are the visual, sensory and rational channels. Activization of a combination of these channels is extremely useful for children with ASD, because intellectual and rational procession of information presented in the link “see – feel” enhances the development of self-control, and this, in its turn, is crucial for the socialization of children with autism.

The category “Semantic differential” specially reveals *activity*. Therefore, the text urges the recipient towards activity and interaction

with the social world and the world of objects.

The category “Movement” initiates the method of movement of the type “across, through” and “to, towards”. Therefore, the text urges towards purposive movement to the goal (movement “to”) through obstacles (movement “through”). In other words, the child with ASD develops purposefulness of behavior and ability to overcome frustration moods for the sake of goal attainment.

The category “Space” stresses the fact of being at close range. Therefore, the text urges the child with ASD towards intimate, empathic contact with the surrounding people. This form of communication cannot but overcome the autistic withdrawal of the children with ASD.

The category “Organization of events” is oriented towards the subcategory “Search for reasons”. As far as the operation of synthesis in the process of thinking is a weak point in the children with ASD, this text orientation serves as a cognitive trainer of the given intellectual function.

The text category “Time” is determined by the types “time before” and “indefinite time”. Accordingly, the text orients the recipient towards the temporal continuum revealing causative-consecutive connections between events with reference to past events. This, in its turn, ensures

the connection between the recipient’s experience and the present, and facilitates the person’s stability in this way.

Within the category «Logical operations», the logical operation “and” is more vividly expressed than others. The given logical operation in the language denotes associative connection of the semantic content of propositions into one whole. The synthetic nature of information perception is thus formed, which is utterly important for bridging gaps in the reasoning of children with ASD in the cognitive operation “synthesis”.

The category “Own – Alien” mainly orients towards interaction with the alien. Therefore, the text urges the recipient towards active interaction with “alien” people. In the case of children with ASD, “alien” people are those outside the closest family circle. Thus, the text urges to expand the social communication sphere with strangers.

The category “Comparison” demonstrates the prevalence of the category “Similarity”. Therefore, the comparative text orients the child with ASD towards choosing the method of assessment of the surrounding objects (or people) via finding a similar or a common feature between them.

The category “Focus of attention” demonstrates the prevalence of such variants of the category as “He – she – it” and “I”. It urges to

concentrate attention on the surrounding people.

The category “Values” distinguishes the following values in descending order:

- gnostic;
- ethical;
- practical;
- practicality;
- the good;
- high morals.

Therefore, the text urges the child with ASD to realize ethical and kind behavior in practice guided by thirst for knowledge. This cannot but elicit positive response of the surrounding people and improve the communication of the child with ASD.

As a result of analysis of the content of the categories we can see that the text of the fairy tale “The Little Prince” possesses marked value-bases semantic orientation, which influences the temporal-spatial perception of oneself in the socio-cultural reality, urges towards certain kinds of activity, and sets

value-based aims and behavioral stereotypes.

Still, the question of how great the suggestive potential of the given text is and what traits it forms in the listener still remains unanswered.

As we remember, the text is archetypical and, consequently, has certain urging potential. As long as the text is read by the mother (who is in dyadic relations with the child due to the specificity of the disease), this fact reinforces the impact of the tale [9].

In order to answer the questions formulated above, we have carried out a correlation analysis of the content-analysis factors for establishing correspondence of their changes with relation to the starting category “Archetypicality” (Table 1). The given starting category was chosen as the basic one, because it is the archetypical symbols that are the least censored by consciousness and the most powerful in their impact on the psyche.

**Table 1**

Correlation ties of the categories with the basic category “Archetypicality”

Categories	Correlations with the category “Archetypicality”, %
No	-37
Will to power	-29
I	-29
Power	-27
Negation	-25
Insincerity	-25
Information specification	-23
Non-concrete information	-23
And	-18

Categories	Correlations with the category “Archetypicality”, %
Concrete information	-17
Fear of rejection	-16
General valency	-16
Negative valency	-16
Time after	-16
Outer need	-15
Consequence	-14
Definite time	-13
Far distance	12
Retranslation	13
Distortion	14
Similarity	14
Diminishing	15
Aesthetic	16
Beauty	16
Affiliation	17
Auditory translation	17
Inside	17
Auditory perception	18
Physiology	19
Instrumental activity (all)	19
Passivity	19
Hope for support	20
Orientation backwards	20
Female symbols	21
Death	21
Sensory channel	21
Sensory procession	21
Visual perception	23
Auditory procession	25
Side	25
Visual channel	27
Auditory channel	27
Difference	27
The Positive	29
Activity	30
Visual procession	31
The SD Positive	31
Depressiveness	34
Excitability	39
The Good	40
High morals	40
Ethical	43



The table of correlations demonstrates that the archetypical feminine intervention symbols call for the reinforcement of the following elements in the personality of the listener:

- ethical aspect;
- morality;
- kindness;
- activity and excitability;
- positive aspect.

The association of the feminine archetypical symbols with the positive semantic differential should be specially noted, which testifies to the fact of reinforcement of positive evaluations and dispositions in the sphere of consciousness and self-regulation of the child with ASD. The increasing urge towards affiliative relations with the sur-

rounding people should be also noted.

The negative correlation is characterized by:

- the logical connections of the type of negation (“no”);
- the will to power instead of cooperation;
- focusing attention on the self (“I”);
- reduced fear of rejection.

Thus, we can state the presence of the suggestive effect urging the child with ASD towards withdrawal from autistic self-seclusion to empathic unity with the surrounding society in the text under study.

In order to validate the conclusion obtained the text was analyzed from the positions of emotional-lexical content (see Table 2).

**Table 2**

Indicators of manifestation of emotional-lexical evaluations of the text

Scales	Score points
Kindness	7.80
Honesty	6.50
Intellect	5.50
Self-control	5.00
Secretiveness	3.10
Independence	1.80
Activity	1.70
Delicateness	1.30
Originality	1.20
Dominance	0.50
Egoism	-0.20
Practicality	-0.70
Demonstrativity	-2.10
Extraversion	-4.20
Aggressiveness	-6.60

As we see, the results of correlation analysis have been validated. The presence of an urging to reduce aggression utterly important for socialization of children with ASD is the most valuable result of the data obtained.

Now we are going to make intermediary conclusions and discuss the results obtained.

We may state that fairy tale possesses a more powerful person modifying effect. Moreover, the tale sets certain values and patterns of behavior matching these values. To crown it all, the given intervention produces a socializing effect upon children with intellectual disabilities and communication disorders. It changes the perception of time and space, and controls the manifestations of feelings and emotions curbing some of them and nourishing others. We may say that the fairy tale forms understanding and interiorization of the values by the child, in whom social and personal values have not been formed yet.

These phenomena have been described before, but our research contains some principally new moments:

- the text is read by the archetypically significant figure of the mother;
- the text presentation is suggestive and reinforced by the method of intervention (neurosensory stimulation by the Tomatis method activating the motor regions of the brain);

- the text of the tale is presented bypassing consciousness, due to direct impact on the neural networks of Wernicke's and Broca's areas and the analytical areas of the neocortex;

- the method of presentation and the propositional content of the text are both oriented towards the compensation of information procession defects and its selectivity. As far as children with various developmental disorders, especially ASD, often demonstrate defects in the system processing information coming from the environment (sensory integration), they lack the mechanism of selective choice of sensory information, as a result of which the nervous system builds up a kind of protection against information overflow in the form of complete rejection of the environment;

- the combination of training of the auditory analyzer by different frequencies and transmission of the same sound signals via bone conduction system does not only develop the opportunities of sensory integration of children with ASD but also implements certain patterns of subjective information procession (value-based semantic patterns and aims and dominants of the text of the fairy tale).

We believe it possible to suppose that in the given study, we have found the mechanism of value formation in the cognitive sphere by linguistic means.

We believe the **mechanism** consists in the following.

Within the category “Perception channels”, the text sets the most vividly expressed channels of receipt, procession and expression of information. In this way, certain channels of objective reality perception and, consequently, the type of its perception required by the lecturer, are prescribed for the listener.

And the category “Information” prescribes the locus of its subjective assessment.

Authoritative outer reinforcement (for example, the significant figure of the mother) and inner subjective motivation (needs) are necessary to ensure the perception of such text prescription.

Describing a certain *type of needs*, similar to the needs of the reader, with the help of linguistic means, the text also sets the *accentuation* of expression of the psychological state via verbalized constructions. Such link forms the dyad: latent (needs) – manifest (accentuation), which allows expressing one’s needs via certain accentuation of self-expression. The text actually carries out psychological relaxation of affect, which is rather attractive for persons suffering from non-realization of their needs.

In order to imbue the inner psychological processes with energy and dynamics, text expansion is effected via certain *symbols* which predetermine the role of the text

characters as expressers of the symbol system. The characters (as symbols) should be associationally maximum attractive or repulsive for the percipient as subjects of self-identification, projection and alienation.

The category “Organization of events” between characters, for example “search for reasons”, sets a certain type of assessment of the sequence of events. And the category “Logical operations” prescribes a type of thinking.

The category “Own – Alien” sets group identification of the recipient (whom he believes to be own) and thus forms feasible behavioral strategies, meanings and values. In its turn, the “Semantic differential” gives a characterological description of the characters assessing them in accordance with several scales in the general semantic field. This allows the author (lecturer) to offer a value-based scale of attitude to the characters (or their behavioral patterns) for the reader.

Via the category “Comparison” in the identification of the recipient with a character, the text sets the method of comparison of oneself with other characters, and thus forms the criterion of assessment of the social environment and the value-based principle of organization of communication with other people. And the category “Focus of attention” shows the recipient what they should focus their attention on

when assessing a social situation: on oneself or on other people.

All this alignment of relationships between characters is unfolded within the categories “Space” and “Time”. Space organizes and prescribes to the character, with whom the recipient identifies themselves, the closeness of the ties with other characters. The recipient is thus prescribed a communicative model. And the text category “Time” defines the organization of the inner experience of the recipient when they find themselves in the real life situation of a similar type.

All these psycholinguistic interventions lead the recipient to:

- the formation of the recipient’s motives in the course of text comprehension and their comparison with the interpretation of the motives in the text itself (category “Motives”);

- a definite mode of action (prescribed by semantic means in the category “Instrumental activity”);

- a certain method of movement towards reaching the goal (category “Movement”);

- the psychological reinforcement of the value-based interpretations of the pattern of behavior of the characters prescribed by the text (the category of linguistic means expressing the category “Values”).

By way of conclusion we would like to add that if the recipient has no reasons for critical information perception and has an inner urge to

respond to the needs presented in the text, the formation of the value-based semantic pattern of interaction with reality becomes practically inevitable.

#### References

1. Autizm v Rossii i v mire [Elektronnyy resurs] // RIA «Novosti». — Elektron. tekstov. dannye. — Rezhim dostupa: <http://ria.ru/spravka/20120402/615322608.html>.
2. Bardyshevskaya, M. K. Autizm v sovremennom sotsial'nom kontekste / M. K. Bardyshevskaya // Argumenty i fakty. — 2013. — 17 maya.
3. Bondarenko, T. A. Formirovanie kommunikativnykh navykov u detey s rasstroystvami autisticheskogo spektra [Elektronnyy resurs] / T. A. Bondarenko, E. S. Fedoseeva // Izvestiya VGPU. — 2015. — № 9-10 (104). — Elektron. tekstov. dannye. — Rezhim dostupa: <https://cyberleninka.ru/article/n/formirovanie-kommunikativnyh-navykov-u-detey-s-rasstroystvami-autisticheskogo-spektra> (data obrashcheniya: 19.09.2018).
4. Zolotovitskiy, R. Bol'nye autizmom: pravo na diagnoz [Elektronnyy resurs] / R. Zolotovitskiy // Rossiyskoe agentstvo pravovoy i sudebnoy informatsii (RAPSI). — 2012. — 21 dek. — Elektron. tekstov. dannye. — Rezhim dostupa: [http://rapsinews.ru/legislation\\_publication/20121221/265866280.html](http://rapsinews.ru/legislation_publication/20121221/265866280.html).
5. Kompleksnoe soprovozhdenie detey s rasstroystvami autisticheskogo spektra : sb. materialov 2-y Vseros. nauch.-prakt. konf. (22—24 noyab. 2017 g., Moskva) / pod obshch. red. A. V. Khaustova. — M. : FRTs FGBOU VO MGPPU, 2017. — 456 s.
6. Likhova, S. K. Igra slov v politicheskom diskurse: komp'yuternyy analiz politicheskoy metafory : dis. ... kand. filol. nauk / Likhova S. K. — M., 2007. — 185 s.
7. Lushchik, U. B. Lechenie detskogo autizma. Kineziterapiya [Elektronnyy resurs] / U. B. Lushchik, I. P. Babiy, N. G. Lushchik. — Elektron. tekstov. dannye. — Rezhim dostupa: <http://www.medicinform.net/fizio/kinezo.htm>.
8. Nikol'skaya, O. S. Autichnyy rebenok. Puti pomoshchi / O. S. Nikol'skaya, E. R. Ba-

enskaya, M. M. Libling. — M. : Terevinf, 2010. — 288 s.

9. Razzhivina, M. I. Kompetentnostnyy resurs v deyatelnosti klinicheskogo psikhologa pri rabote v detskikh reabilitatsionnykh uchrezhdeniyakh [Elektronnyy resurs] / M. I. Razzhivina // Lichnost' v menyayushchemsya mire: zdorov'e, adaptatsiya, razvitiye : setevoy zhurn. — 2013. — № 1. — Elektron. tekstov. dannye. — Rezhim dostupa: <http://humjournal.rzgm.ru/art&id=21>.

10. Realizatsiya i oblasti primeneniya sistemy VAAL-2000 [Elektronnyy resurs]. — Elektron. tekstov. dannye. — Rezhim dostupa: <http://www.vaal.ru/proekt/vaal2000.php>.

11. Trushina, V. N. Adaptivnaya samoregulyatsiya psikhofiziologicheskogo sostoyaniya detey s sindromom narusheniya vnimaniya s giperaktivnost'yu na osnove EEG-akusticheskoy vneshney obratnoy svyazi : dis. ... kand. med. nauk : 03.00.13 : zashchishchena 26.11.2009 : utverzhdena 17.03.2010 / Trushina Vera Nikolaevna. — Spb., 2009. — 134 s.

12. Uinder, S. Na «ty» s autizmom / S. Uinder [i dr.]. — M. : Terevinf, 2013. — 510 s.

13. Cooper, J. Applied Behavior Analysis / J. Cooper, T. Heron, W. Heward. — 2nd ed. — Harlow : Pearson Education Limited, 2006. — 800 p.

14. Edelson, S. Understanding and Treating Self-Injurious Behavior [Electronic resource]. — 2016. — Mode of access: [https://www.autism.com/symptoms\\_self-injury](https://www.autism.com/symptoms_self-injury).

15. Horner, R. H. Problem behavior interventions for young children with autism: a research synthesis / R. H. Horner, E. Carr, A. Todd, H. Reed // Journ. of autism and developmental disorders. — 2002. — № 32 (5). — P. 423—446.

16. Minshawi, N. F. The association between self-injurious behaviors and autism spectrum disorders / N. F. Minshawi, S. Hurwitz, J. C. Fodstad, S. Biebl, D. H. Morriss, C. J. McDougale // Psychology Research and Behavior Management. — 2014. — № 7. — P. 125—136.

17. Schaaf, R. C. Occupational therapy using a sensory integrative approach for children with developmental disabilities / R. C. Schaaf, L. J. Miller // Ment. Retard. Dev. Disabil. Res. Rev. — 2005. — № 11 (2). — P. 143—148.

18. Suggested citation [Electronic resource] / C. Wong, S. L. Odom, K. Hume, A. W. Cox, A. Fettig, S. Kucharczyk, T. R. Schultz [et al.] // Evidence-based practices for children, youth, and young adults with Autism Spectrum Disorder. — 2014. — Mode of access: <http://autismpdc.fpg.unc.edu/sites/autismpdc.fpg.unc.edu/files/2014-EBP-Report.pdf>.

19. Supekar, K. Deficits in mesolimbic reward pathway underlie social interaction impairments in children with autism / K. Supekar, J. Kochalka, M. Schaer, H. Wakeman, S. Qin, A. Padmanabhan, V. Menon // Brain : a journal of neurology. — 2018. — Vol. 141. — No. 9. — P. 2795—2805.

UDK 376.37-053"465.00/.07"

BBK 4457.091

GSNTI 14.29.29

Code VAK 13.00.03

**Y. E. Kaz'mina**

Moscow, Russia

### **TREATMENT OF EMOTIONAL-VOLITIONAL DISORDERS IN CHILDREN WITH ALALIA UNDER THE CONDITIONS OF REHABILITATION CENTER**

**Abstract.** Speech development disorders in children lead to negative consequences for the development of their cognitive processes, emotional-volitional sphere, as well as cause isolation, restraint, feelings of inferiority and other psychological conditions. Alalia, which is one of the most severe disorders of speech development, has a significant negative effect on the psychosocial functioning of children. Inability to understand the child's speech by adults, and the rejection of their own speech by the children themselves lead to difficulties in establishing and maintaining contact with others, which leads to a secondary defect, which manifests itself in impairment of the development of the emotional sphere. Early speech correction of preschoolers is necessary to ensure harmonious development of the child. The paper characterizes a rehabilitation program worked out on the basis of practical experience and aimed at prevention and rehabilitation of secondary developmental disorders, specifically, at the formation and development of the emotional-volitional sphere in senior preschool children with alalia, under the conditions of a rehabilitation center. Within the framework of this program, a whole range of various psychological methods of rehabilitation are used, including such modern technologies as the training complex "OptiMusic", "Sensory Room", specialized computer programs, and play complexes "Montessori" and "Pertra". Neuropsychological rehabilitation procedures, including those involving biofeedback equipment ("BFB training"), methods of special pedagogy such as game and art therapy are used along with these methods. It is assumed that this program can be considered as one of the effective means of complex intervention in cases of children with alalia for normalization of their emotional state and treatment of a number of speech and intellectual disorders.

**Keywords:** senior preschool children; preschool logopedics; speech disorders; children with speech disorders; alalia; emotional-volitional sphere; speech development; rehabilitation work.

**About the author:** Kaz'mina Yana Evgen'yevna, Post-graduate Student.

*Place of employment:* Department of Clinical and Special Psychology, Institute of Psychology, Sociology and Social Relations, Moscow City Pedagogical University, Moscow, Russia.

*E-mail:* info@rrcdetstvo.ru.

Speech development disorders in children lead to negative consequences for the development of their cognitive processes, emotional-volitional sphere, as well as cause isolation, restraint, feelings of inferiority and other psychological conditions [1]. Early speech correction of preschoolers is necessary to ensure harmonious development of the child. The efficiency of speech stimulation is determined by a wide range of determinants. Special role is played by individual predisposition, educational environment impact, and professionalism and competence of the specialists in the usage of intervention methods. Alalia, which is one of the most severe disorders of speech development, has a significant negative effect on the psychosocial functioning of children. The attitude of the typical children to same-age peers with severe speech disorders does not only influence the cognitive and motivational processes including perception, attention, memory, and thinking but also transforms social behavior. It is believed that rehabilitation work needs planned, purposive and regular cooperation with

various spheres to achieve the desired goals and to ensure all-round individual development.

The term “systemic speech and language underdevelopment” (SLU) is regularly used in Russian logopedics. Alalia is looked upon as a most complicated disorder of speech and language development [16]. It is noted that children with this speech disorder have normal hearing and safe preconditions for intellectual development. In alalia, the process of formation of the components of the whole linguistic system – vocabulary, grammar, phonetics and, as a consequence, of dialogic and monologic speech is impaired in the structure of speech defect [3; 7].

Severity and systemic nature of the speech function underdevelopment in children of the given category may cause specific behavior, including negativism, which distinguishes them from the peers with typical speech development [2; 3; 10; 12]. This opinion about the formation of behavior in cases of general speech underdevelopment (GSU) differing from the norm was expressed as far back as in 1968 by

R. E. Levina. She wrote about the GSU (of which, children with alalia form the core group) as follows: "It is quite evident that deviations in speech development cannot but tell on the formation of the whole psychological life of the child. They hamper communication with the surrounding people ... Personality traits change in response to the defect – there emerge isolation, lack of self-confidence, and negativism which aggravate the impact of underdeveloped speech on the formation of the child's psyche" [11, p. 7]. The ideas about the specificity of personal development, as well as about specific development of the cognitive sphere in severe systemic speech underdevelopment, match the concept of specific tendencies of development of children with speech dysontogenesis [9].

Inability to understand the child's speech by adults, and the rejection of their own speech by the children themselves lead to difficulties in establishing and maintaining contact with others, which leads to a secondary defect, which manifests itself in impairment of the development of the emotional sphere [6]. And it is communication with adults and peers that facilitates the development of emotional sphere. We cannot but mention such specific kind of anxiety as "speech anxiety" appearing in the situation of speech failure of children with alalia, which is actually a response to the problem [1].

I.Yu. Kondratenko carried out a special study of specific features of development of emotional vocabulary in children with speech underdevelopment. She considered the formation of vocabulary as a special semantic system which depends on the intellectual level of the child and the development of their cognitive processes: thinking, memory, attention, as well as communicative activity and motivational sphere [7; 8]. The author came to the conclusion that possession of emotional vocabulary is necessary for preschoolers because it functions as a means of communication, and it is therefore imperative to carry out systematically organized rehabilitation work aimed at the formation of emotional vocabulary in senior preschool children with speech underdevelopment, which would allow raising the level of their communication both qualitatively and quantitatively.

The chief peculiarity of the emotional sphere in preschool children consists in the fact that the children begin to distinguish a wide range of emotions, to control their mood, and their psyche forms arbitrariness. The rehabilitation work aimed at the formation and development of the emotional-volitional sphere in children with alalia should be built with consideration of this fact. L.S. Vygotskiy believed that prevention of secondary defects was the principal task of rehabilitation



work with children [5]. D.B. El'koin argued that it was possible while developing the creative potential of the child [13].

Drawing on many years of practical experience of the rehabilitation center "Childhood" of the Ministry of Health of Russian Federation, we have worked out a rehabilitation program aimed at prevention and rehabilitation of secondary developmental disorders, specifically, at the formation and development of the emotional-volitional sphere in senior preschool children with alalia, under the conditions of a rehabilitation center.

**Program goals:**

- creation of preconditions for intellectual, speech and emotional development of the child and stimulation of this development;
- prevention and rehabilitation of secondary developmental disorders;
- formation of the personality traits providing conditions for social adaptation and integration of children.

**Program tasks:**

1. Creation of preconditions for intellectual, speech and emotional development of the child and stimulation of this development.
2. Rehabilitation of defects of psychological developments via creation of optimal conditions for harmonic development of the personality.
3. Development of the skills of interpersonal interaction (establishing

contact, emotional well-being, non-verbal support).

4. Rehabilitation of affective response manifestations.
5. Abilitation.

We will present now the statistical data collected among the patients with disorders of speech development (alalia) over the period from 2016 to 2018 on the base of the psycho-neurological department of the Russian Rehabilitation Center "Childhood" of the Ministry of Health of Russian Federation. In 2016, the total of 76 children with alalia aged 3-7 (17 children with sensory alalia, 25 children with motor alalia, and 39 children with sensory-motor alalia) took a rehabilitation course at the Center. In 2017, the rehabilitation course was taken by 67 children of the same age group with alalia (9 children with sensory alalia, 28 children with motor alalia, and 30 children with sensory-motor alalia) [3]. During the greater period of 2018, rehabilitation was granted to 58 children with alalia (11 children with sensory alalia, 23 children with motor alalia, and 24 children with sensory-motor alalia). The data presented demonstrate the urgency of design of the rehabilitation program for children with developmental speech disorders of the given category.

We have worked out a rehabilitation program targeting preschool children aged 5-8 with the speech development diagnosis "alalia",

taking a rehabilitation course at the psycho-neurological department of the Russian Rehabilitation Center "Childhood". The duration of the course is 14 days. The course is held once every three months.

After a complex examination by the medical psychologist, qualified specialists schedule rehabilitation lessons, design an individual rehabilitation route for each child, and give recommendations on lesson support for other specialists, such as tutor, teacher-defectologist, and physical therapy instructor. They fill in the list of recommended lessons which contains information about the level of formation of higher psychological functions and emotional-volitional sphere of the child. The medical psychologist defines the most feasible form of training: individual, group, or mixed (combining individual and group activity). The logopedist also conducts an examination, plans rehabilitation classes, and, with consideration to the actual level of development of the communicative skills of the patient, issues recommendations on speech support for other specialists: medical psychologists and tutors.

Psychological group or individual classes within the given course are recommended with reference to age and intellectual, verbal and communicative skills of the child.

1. Individual classes are prescribed for children with severe speech un-

derdevelopment (GSU of Levels I-II in accordance with speech disorder classification by R.E. Levina) and intellectual disability, aggressive behavior or affective emotional-volitional sphere who are older than 5 years of age.

2. Group classes are designated for children with non-severe speech underdevelopment (GSU of Levels II-III) and disorders of psychological development or mild intellectual disability, older than 5 years of age.

3. A combination of individual and group forms of work is recommended for children with non-severe speech underdevelopment (GSU of Levels II-III), high level of anxiety with a low level of motivation, and for children with mild intellectual disability, older than 5 years of age.

Thus, in accordance with the structure of defect and rehabilitation opportunities, an individual plan of rehabilitation lessons is worked out for each child. Lessons with the psychologist are aimed both at the formation of verbal and nonverbal vocabulary in children with alalia, and specifically emotional lexical means, and at leveling behavioral peculiarities and establishing emotional contact.

Below is an example of a lesson aimed at the formation of emotional vocabulary in children with alalia: "Lesson for 5-8 year-old children; lesson duration is 20-30 minutes. *Aims:* development of emotional

vocabulary via basic notions about emotions; development of the emotional-volitional sphere of the child. *Tasks*: to teach the child to differentiate between basic emotional states by lexical means; to train the skill to express one's emotions and to correlate them with images. *Equipment*: pictograms, pictures, plot-driven pictures with images of basic emotional states (joy, fear, rage, fright, sorrow, and surprise), a cube, and a mirror. *Lesson description*: The child comes to the lesson. After the greeting, the psychologist inquires about the child's mood.

— I am in high spirits (*a smile on the face*), because everything is all right, and I am glad to see you. And what mood are you in? Show us, please. (*The child shows their mood with a facial expression standing at the mirror.*)

— Have a look! I've got a cube, it feels soft. And some mood is drawn on each side of the cube. Let's see if your mood is drawn on it. Show us your mood once again.

— Yes, "A Smile".

— Let us find situations in which you may feel joy. (The child is offered plot-driven pictures showing situations with different emotional states. Then the teacher describes each picture or shows it if the child cannot say what lexical units are to be used to describe each emotional state.)

Then we must praise the child and say what he did correctly.

After that, we use the same procedure to analyze each basic emotion. Farewell."

Individual lessons are held 5 times a week and last 20-30 minutes each. Within the group form of training, lessons in a group of 6-8 pupils are conducted 3 times a week and last 30-40 minutes each. In the combination of individual and group forms of training, individual lessons take place 3 times a week and last 20-30 minutes, and group lessons are given twice a week in a group of 6-8 patients and last 30-40 minutes.

The possibility of complex rehabilitation including medicamentous therapy prescribed by the neurologist is an important advantage of the given program. Nootropics (pantogam, piracetam, aminalon, encephabol, phenibut, picamilon) in combination with biotics (glycine, amino acids) are used for treatment of speech and emotional disorders. Various drugs and rehabilitation methods can combine in one rehabilitation course depending on the real state of the patient.

### ***Psychological rehabilitation methods.***

1. Lessons on the basis of the training complex "OptiMusic" offering an interactive light system allowing optimization of the process of rehabilitation of formation, restoration and development of psychomotor functions. The main advantage of the equipment consists in long-term preservation of stable motivation to

activity, which makes it possible to solve the following rehabilitation problems in the work with the children:

- to develop playing and didactic activity;
- to activate speech in children with severe speech disorders and impairments of intellectual development and behavior (development of arbitrary vocalizations on the basis of onomatopoeia; development of impressive and expressive vocabulary; development of arbitrary, playing and perceptive activity; development of communication skills).

2. Lessons in the “Sensory Room” – on multisensory equipment, aimed at overcoming problems with establishing emotional contact, emotional relaxation and rehabilitation of behavior.

3. Work with playing complexes “Montessori” and “Pertra” which help to enhance speech and cognitive activity of the patients.

4. A series of computer programs in the ICT room aimed at development of cognitive processes and stable motivation towards learning.

5. Neuropsychological and rehabilitation procedures [4], including those on biofeedback equipment (“BFB training”) adapted to children’s age, are used along with these methods.

The modern rehabilitation technologies do not substitute in

practice the methods of special pedagogy such as game and art therapy: music therapy, game therapy, sand therapy, fairy tale therapy, theater therapy, etc.

Rehabilitation work also includes the methods of *individual and family counseling* the aim of which is to create a favorable psycho-emotional atmosphere in the families caring for children with alalia. Engagement of the parents in active forms of interaction, development of confidence in their own competence, as well as reflection – comprehension of the current events, their own feelings and thoughts – is an important task of such work [15; 14].

On completion of the rehabilitation course, the psychologist and the logopedist carry out a summative complex examination to assess the effectiveness of the rehabilitation measures taken and to figure out the dynamics of the child’s state and recommendations for further rehabilitation work.

From the psychological point of view, the complex rehabilitation program has a positive effect on the processes of formation and development of the higher psychological functions. Simultaneously, the emotional-volitional sphere of the child becomes improved, the motivation towards learning is raised, the level of cognitive activity goes up, and activation of speech also becomes evident.

## References

1. Valyavko, S. M. Emotsional'nye perezhivaniya v situatsii rechevogo obshcheniya u starshikh doshkol'nikov s narusheniyami rechevogo razvitiya // S. M. Valyavko // *Sistemnaya psikhologiya i sotsiologiya*. — 2014. — № 2 (10). — S. 48—57.
2. Valyavko, S. M. Pochemu doshkol'niki s obshchim nedorazvitiem rechi rezistentny k logopedicheskomu vozdeystviyu? / S. M. Valyavko // *Defektologiya*. — 2009. — № 2. — S. 59—65.
3. Valyavko, S. M. Fenomen rechevogo negativizma u detey s alalief / S. M. Valyavko, Ya. E. Kaz'mina // *Defektologiya*. — 2018. — № 4. — S. 22—29.
4. Vizeľ, T. G. Osnovy neyropsikhologii : ucheb. dlya studentov vuzov / T. G. Vizeľ. — M. : AST Astrel' : Tranzitkniga, 2005. — 384 s.
5. Vygotskiy, L. S. Kollektiv kak faktor razvitiya defektivnogo rebenka // *Sochine-niya*. V 6 t. / L. S. Vygotskiy. — M. : Pedagogika, 1983. — T. 5 : Osnovy defektologii. — S. 196—218.
6. Kirillova, E. V. Metody i priemy emotsional'noy stimulyatsii bezrechevykh detey / E. V. Kirillova // *Razvitie i korrektsiya*. — M. : Analiticheskiy nauch.-metod. tsentr «Razvitie i korrektsiya», 2001. — Vyp. 10. — S. 29—33.
7. Kondratenko, I. Yu. Osobennosti ovladeniya emotsional'noy leksikoy det'mi starshego doshkol'nogo vozrasta s ONR / I. Yu. Kondratenko // *Defektologiya*. — 2002. — № 6. — S. 51.
8. Kondratenko, I. Yu. Formirovanie emotsional'noy leksiki u detey starshego doshkol'nogo vozrasta s narusheniyami rechi / I. Yu. Kondratenko. — M. : Ayriss-Press, 2005. — 154 s.
9. Lubovskiy, V. I. Obshchie i spetsificheskie zakonomernosti razvitiya psikhiki anomal'nykh detey / V. I. Lubovskiy // *Defektologiya*. — 1971. — № 6. — S. 15—19.
10. Ovchinnikova, T. S. Organizatsiya upravleniya doshkol'nym obrazovatel'nym uchrezhdeniem v sisteme korrektsionnogo obrazovaniya / T. S. Ovchinnikova, S. M. Valyavko // *Vestn. un-ta (Gos. un-t upravleniya)*. — 2008. — № 12. — S. 104.
11. Osnovy teorii i praktiki logopedii / pod red. R. E. Levinoy. — M. : Prosvshchenie, 1967. — 368 s.
12. Filicheva, T. B. Osnovy doshkol'noy logopedii / T. B. Filicheva, O. S. Orlova, T. V. Tumanova. — M. : Eksmo, 2015. — 320 s.
13. El'konin, D. B. Psikhicheskoe razvitie v detskikh vozrastakh: izbr. psikhologicheskie trudy / D. B. El'konin ; pod red. D. I. Fel'dshyteyna. — 3-e izd. — M. : MPSI ; Voronezh : NPO «MODEK», 2001. — 416 s.
14. Brannan, A. M. The caregiver strain questionnaire measuring the impact on the family of living with a child with serious emotional disturbance / Ana Maria Brannan, Craig Anne Heflinger, Leonard Bickman // *Journ. of emotional and behavioral disorders*. — 1997. — Vol. 5. — No. 4. — P. 212—222.
15. Siedlaczek-Szwed, A. Supporting families in correcting dyslalia in children / Aleksandra Siedlaczek-Szwed, Agata Jalo-wiecka-Frania / Society. Integration. Education : Proceedings of the International Scientific Conference (May 26th — 27th, 2017). — 2017. — Vol. 3. — P. 117—126.
16. Tumanova, T. Russian Scientific Trends of Specific Language Impairment in Childhood / Tatiana Tumanova, Tatiana Filicheva // *Advances in Speech-language Pathology* / ed. by Fernanda Dreux M. Fernandes. — InTech, 2017. — P. 274—314.

UDK 376.1:372.881.161.1

BBK 4450.681.9=411.2

GSNTI 14.29.01

Code VAK 13.00.03

**A. V. Kubasov, L. V. Khristolyubova, A. V. Tsygankova**

Ekaterinburg, Russia

### **PERSONALITY ORIENTED APPROACH IN THE FORMATION OF LINGUISTIC COMPONENT WHILE TEACHING CHILDREN WITH DISABILITIES**

**Abstract.** The article is devoted to the issues of formation of the linguistic component in the education of students with disabilities. Special attention is paid to the personality oriented approach in learning: taking into account differences in the mental functions of the right and left hemispheres of the brain making it possible to determine the peculiarities of sensory perception of the learning material by the children. The authors make a conclusion about the importance of modality characteristics in the pupils which can be taken as a basis of formation of their orthographic literacy. The article describes several types of exercises on the vocabulary words aimed to create and reinforce auditory, visual and kinesthetic images of the word in children with different modality characteristics. The authors determine the importance of lexical exercises in the system of orthographic work, the significance of learning the syntagmatic connections of vocabulary words in connection with the development of vocabulary, grammar skills, speech coherence and orthographic literacy. In this connection, complex tasks presupposing that the pupils' attention is simultaneously focused on acquisition of orthography, correct pronunciation, word form derivation, activation of vocabulary and development of coherent speech are suggested in the article. The paper is addressed to university students in the field of training 44.03.03. "Special (Defectological) Education", pedagogues and all participants of the system of special education.

**Keywords:** personality oriented approach; linguistic component; modality characteristics; children with disabilities; SEND; disabilities; orthographic literacy; learning vocabulary; lexical exercises; methods of teaching Russian.

**About the author:** Kubasov Aleksandr Vasil'yevich, Doctor of Philology.

*Place of employment:* Professor of Department of Theory and Methods of Teaching Persons with Disabilities, Institute of Special Education, Ural State Pedagogical University, Ekaterinburg, Russia.

**About the author:** Khristolyubova Lyudmila Viktorovna, Candidate of Philology.

*Place of employment:* Associate Professor of Department of Theory and Methods of Teaching Persons with Disabilities, Institute of Special Education, Ural State Pedagogical University, Ekaterinburg, Russia.

**About the author:** Tsygankova Anna Vladislavovna, Candidate of Philology.

*Place of employment:* Associate Professor of Department of Theory and Methods of Teaching Persons with Disabilities, Institute of Special Education, Ural State Pedagogical University, Ekaterinburg, Russia.

*E-mail:* uspumpsd@mail.ru.

The linguistic component in the education of children with disabilities is associated not only with acquisition of the basic linguistic units and the rules of their usage but also with the formation of the ability to use oral and written speech for solution of the corresponding life problems. This fact is mentioned in all variants of the adapted basic general education programs (ABGEP) based on the Federal State Educational Standard (FSES) [11].

The linguistic component is interpreted as concrete speech and language material: units of different linguistic levels (phonetic, lexical, and grammatical) and utterances determined by the lexical topic and the speech situation. Nevertheless, the word remains to be the main object of learning at education institutions realizing the ABGEP of education of persons with disabilities, because it is the basic unit of language. Words serve as learning material for the study of the phonet-

ic composition of the lexeme and its syllabic structure; the rules of graphics and orthography are worked out on the basis of the spelling of concrete words; grammatical categories and word form derivation norms are mastered in the process of analysis of lexemic classes of different parts of speech.

Still it is common knowledge that different students need different time to acquire the linguistic units in the learning material, which depends not only on the peculiarities of their nosology and intellectual abilities but also on the specificity of perception of the incoming information [2; 8]. The aspects of this problem have been studied by R. Sperry [19] and his followers (S. Springer, G. Deutsch, C. Hannaford, T.P. Khrizman, V.D. Eremyeva, etc.). The works devoted to the study of the differences in the mental functions of the right and left hemispheres of the brain make it possible to take into account the

peculiarities of sensory perception of the learning material (including the linguistic one) by the pupils of the same academic class or group on the basis of perception modality [2; 8; 14].

In case of correct and timely diagnostics, this approach allows subdividing the pupils according to the feature of preferred modality: the “right brain” ones – into visuals and kinesthetics. The former rely on visual perception in assimilation of information, the latter – on muscular, gustatory, olfactory, and tactile perception. For the “left brain” pupils, or audials, auditory perception is the leading one. The pupils’ modality characteristics are “one of the most powerful filters casting the model of the world of man ... Should one and the same thing be given to visuals, audials, and kinesthetics in turn, we can see that the first will gaze at it, the second will ask you to tell them about it, and the third will start feeling it” [7, p. 105].

Studies in the given area also show that the majority of pupils belong to the group of persons with dual hemisphericity, and “pure” visuals, kinesthetics and audials experience significant difficulties in various kinds of learning activity [4]. The diagnostics of the dominant modality, as well as the discovery and consideration of psychophysical peculiarities of the pupils, facilitates the realization of the personality

oriented approach and creates favorable conditions for successful acquisition of the learning material.

Within the framework of linguistic component formation, modern didactics lays special emphasis on orthographic literacy of the pupils which is an important precondition for the development of linguistic personality and linguistic culture. Orthographic literacy helps students to master school subjects and influences socialization (L.I. Aydarova, T.D. Bochkarova, V.F. Ivanova, G.N. Pristupa, T.G. Ramzayeva, V.V. Repkin, N.S. Rozhdestvenskiy, A.V. Tekuchev, etc.). Nevertheless, the formation of orthographic literacy is always problematic, especially while teaching children with disabilities.

Special methods operate a well-designed and to a large extent algorithmized system of formation of orthographic skills [1]. The methods and techniques used in it (orthographic pronouncing accompanied by copying and without it, visual-preventive dictations, learning graphic schemes, underlining and singling out, lists of “catch-phrases”, writing from memory, etc.) can be modified with reference to the personality oriented approach. In this context, quite interesting is the classification of orthographic exercises suggested by N.S. Rozhdestvenskiy as far back as 1960, which takes into account the character of the analyzers involved in do-



ing these exercises. The classification singles out exercises based on visual perception (copying), auditory perception (dictations), and kinesthetic perception (morphemic and word-building analysis, division of words into syllables) [13]. The modality characteristics of the pupils allow choosing exercises most suitable for the formation of orthographic literacy [10; 14].

The work on the words with traditional spelling is carried out in several areas: lexical work (enrichment, specification and activation of vocabulary); work on the word's morphemic structure and word building patterns; grammar work including study of morphological features and syntactic potential of the words with traditional spelling; orthographic work proper, combining the skills of phonetically correct spelling and formation of the skills to spell according to the rule. With these areas in mind, practical teachers suggest regarding each word with traditional spelling included in the textbook from different angles [17]. Here are some examples.

**АДРЕС** (*address*), -a, pl. -a, -ov, м. 1. Inscription on the letter or other mail indicating the destination and name of the addressee. 2. Place where a person lives; the name of this place.

*Cognate words.* Adresok, adresant, adresat. Adresnyy, adresovannyy. Adresovat', adresovat'sya.

*Phrases, sentences.* Tochnyy adres. Peremenit' adres. Sluzhebnyy adres. Dat' svoy adres. Poposit' adres.

*Etymology.* Borrowed from the Polish language in the 18<sup>th</sup> century. The Polish word adres goes back to the French word adresse.

**ОТЕЧЕСТВО** (*motherland* or *fatherland*), -a; cp. The country where a person was born the citizen of which he/she is.

*Cognate words.* Otechestvennyy. Otecheskiy.

*Phrases, sentences.* Lyubov' k otechestvu. On zashchishchal svoye otechestvo.

*Etymology.* Derived from the Old Russian отѣць — (otets – father) by means of loan translation (calque) from the Greek patria.

The dictionary entry for each lexeme contains the general grammatical characteristic of the word with traditional spelling, its lexical meaning, list of cognate words, phrases and sentences with the word, and the word's etymology. A detailed description of the words with traditional spelling can help to organize orthographic work with reference to personality oriented characteristics of the pupils with disabilities. Below are examples of tasks with the traditionally spelt words from grades 5-8 textbooks for children with intellectual disabilities. They are mostly lexical exercises, although the tasks for children with different modality

characteristics can be reformulated and specified (“listen to”, “write down”, “copy”, “divide”, etc.). Vocabulary entries in pupils’ workbooks may serve as models for the tasks completion.

1. Subdivide the words into groups according to the common meaning:

*frukty, pomeshcheniye, zhivotnoye (yabloko, zhiraf, foyYE, komnata, medved’, vokzal, apel’sin, verblyud, zavod).*

2. Find a word that does not fit in each line. Underline it. Explain the principle of the word choice.

*Zapad, sever, veter, vostok.*

*Pechen’ye, konfeta, apel’sin, morozhenoye.*

*Penal, tetrad’, telefon, karandash.*

3. Complete the word combinations with the words from the brackets with a suitable meaning: *Prizemlit’sya na .... Rabotat’ na .... Plyt’ v .... Uchastvovat’ v... (ekskavator, aerodrom, demonstratsiya, okean).*

4. Group the words according to the topic.

*Doloto, mandarin, molotok, apel’sin, limon, pila.*

5. Find synonyms to the words *beseda, znamyaya, doroga*. Make up sentences with them.

6. Find antonyms to the words *zashchita, pobeda, do svidaniya*. Make up sentences with them.

7. Name with one word: *1000 metrov — ...; sentyabr’, oktyabr’, noyabr’ — ...; zhiteli strany, oblasti, goroda — ...*

8. Make up word combinations with the words *okean, muzhchina, serviz*:

*a) ogromnyy, zloy, dobryy;*

*b) bol’shoy, farforovyy, krasivyy;*

*c) tikhiy, ogromnyy, siniy.*

9. Say when the words have figurative meaning.

*Zheleznaya volya. Semena vrazhdy. Zheleznaya ruda. Semena pshenitsy. Zheleznaya doroga. Zheleznyy nozh.*

10. Substitute the word *kartina* in the following sentences with the synonyms *proizvedeniye, kinofil’m, vid*.

*V nashem kinoteatre pokazyvayut novuyu kartinu. Na vystavke byli predstavleny kartiny molodykh khudozhnikov. S vershiny gory otкрыlas’ prekrasnaya kartina.*

11. Rearrange the sentences to make up a text. Single out the words with traditional spelling.

*Ozhivayet i bereza. Nastupil mart. Derev’ya ozhivayut. Korniyeye nachinayut zhadno vysasyvat’ vlagu iz zemli.*

Lexical exercises should be given special place in the system of orthographic work. First, it is necessary to explain object-based and conceptual correlation of the word, as the word is simultaneously a unit of speech and a unit of thinking [3]. Acquaintance with the word object-based correlation may be effected by its inclusion in the context or via means of visual support. The formation of the conceptual correlation

of the word takes a more complicated route, which presupposes the inner separation of the word from the object. It is necessary to form the following skills in the pupils with disabilities at this stage: to figure out the meaning of the word (semasiological approach) and to recognize the word by the explanation of its lexical meaning (onomasiological approach).

Work with synonyms, antonyms and homonyms, polysemy, direct and transferred meanings is carried out on the material of words with traditional spelling. The pupils are asked to find the words under study in the text, to figure out their meaning, to make up syntactic units with them (phrases and sentences of various types), to comment on the usage of the given lexeme in the context. Studying words with traditional spelling is closely connected with the lexical (lexico-grammatical) exercises in which it is required to explain polysemy and stylistic shades of meaning of a lexeme in a synonymic row, and to use the word in a phrase, sentence or text.

In the process of formation of the linguistic component in the education of pupils with disabilities, it is necessary to take into account systemic relations between the lexeme and other linguistic units. In order to form speech and language habits and skills, it is desirable to conduct special exploration of syntagmatic and paradigmatic connec-

tions of the given word: to build up synonymic rows with the word under learning and single out the dominant, to pick up antonyms with reference to polysemy, and to unite lexemes in topical vocabulary groups.

The word is always in systemic relations with other units of language. Therefore, with the purpose of more successful formation of lexical skills, it is feasible to undertake observations of paradigmatic and syntagmatic connections of the given word. Exercises on paradigmatic connections facilitate the development of such properties in children as the ability to select synonyms and antonyms, build up synonymic rows and single out a dominant. It is important to unite words into topical groups (“unity of words based on the classification of the objects themselves, but not on the lexico-semantic ties of the words”) [16, p. 231] and lexico-semantic groups (“unity of two, several or a multitude of words based on their lexical meanings”) [16, p. 231].

The definition of the word under learning with orphogram develops the learners’ skills to include it (sometimes via lexical substitution) in the contexts of different levels: word combination, sentence, text. And it is necessary to visually demonstrate the differences in the lexical and grammatical combinability of the word to the pupils.

Lexical combinability presupposes the ability of a word to be

used alongside other words in a speech segment. Syntactic combinability means the ability of a lexeme to realize various grammatical ties with other words, taking into account its belonging to a certain part of speech or lexico-grammatical category [9].

It is also necessary always to remember about the valency of the word, its ability to join subordinate words in concrete grammatical forms without which its usage in speech is incomplete [6]. Knowledge about word valency does not only form linguistic habits and skills but also spoken ones.

Special attention in the process of formation of the linguistic component should be paid to complex tasks presupposing that the pupils' attention is simultaneously focused not only on acquisition of orthographic rules but also on correct pronunciation, word form derivation and usage, activation of vocabulary and development of dialogic and monologic speech. Such tasks may include the following:

- work with dictionaries (orthographic and explanatory);
- choice of synonyms and antonyms to the word under learning;
- etymological analysis which facilitates comprehension and improves correctness and stability of memory of the words with traditional spelling; the etymological reference contains information about the origin of the word, its

primary meaning, helps to find out its historical composition – reference to the history of the word may sometimes help to motivate its contemporary spelling;

- various kinds of work with phraseological units, riddles and extracts from poems and prosaic literary texts, solving and making up of simple cross-word puzzles;
- making up word combinations and sentences with the word under study, and constructing short texts from the word combinations obtained.

We believe that the use of auditory, visual and kinesthetic images of the word in combination with the traditional methods and techniques may facilitate the realization of the personality oriented approach in the formation of the linguistic component in the education of pupils with disabilities. Purposive work with different aspects of linguistic units (lexicological, grammatical and orthographic) is considered to be a most important area of rehabilitation of not only speech but also psychological development of the pupils [11]. The improvement of the lexical aspect of speech and orthographic literacy greatly helps to overcome the problems of social adaptation and development of cognitive activity and forms the foundation of communication for children with disabilities.

#### References

1. Aksenova, A. K. Metodika obucheniya russkomu yazyku v spetsial'noy (korrekt-

- sionnoy) shkole [Elektronnyy resurs] : ucheb. dlya stud. defektol. fak. pedvuzov / A. K. Aksenova. — M. : Gumanitar. izd. tsentr «VLADOS», 2004. — Elektron. tekstov. dannye. — Rezhim dostupa: [http://www.pedlib.ru/Books/5/0076/5\\_0076-1.shtml](http://www.pedlib.ru/Books/5/0076/5_0076-1.shtml).
2. Belyanin, V. P. Osnovy psikholingvisticheskoy diagnostiki / V. P. Belyanin. — M. : Trivola, 2000. — 248 s.
3. Vygotskiy, L. S. Izbrannyye psikhologicheskie issledovaniya / L. S. Vygotskiy. — M. : Izd-vo Akad. pedagogicheskikh nauk RSFSR, 1956. — 520 s.
4. Grinder, M. Ispravlenie shkol'nogo konveyera / M. Grinder. — M. : Institut obshchegumanitarnykh issledovaniy, 2001. — 320 s. — (NLP v pedagogike).
5. Ereemeva, V. D. Mal'chiki i devochki — dva raznykh mira / V. D. Ereemeva, T. P. Khrizman. — M. : Linka-press, 1998. — 184 s.
6. Katsnel'son, S. D. K ponyatiyu tipov valentnosti / S. D. Katsnel'son // Voprosy yazykoznaniya. — 1987. — № 3. — S. 20—32.
7. Kovalev, S. V. NLP pedagogicheskoy effektivnosti / S. V. Kovalev. — M. : Moskovskiy psikhologo-sotsial'nyy in-t ; Voronezh: Izd-vo NPO «MODEK», 2001. — 160 s. — (B-ka psikhologa).
8. Konovalova, N. I. Resursy rechevy psikhodiagnostiki v obrazovatel'nom protsesse / N. I. Konovalova // Pedagogicheskoe obrazovanie v Rossii. — 2015. — № 11. — S. 195—202.
9. Kubryakova, E. S. V poiskakh sushchnosti yazyka: kognitivnye issledovaniya / E. S. Kubryakova. — M. : Znak : In-t. yazykoznaniya RAN, 2012. — 208 s.
10. Nikolaeva, E. A. Lichnostno orientirovannoe obuchenie orfograficheskoy gramotnosti mladshikh shkol'nikov s narusheniem rechi [Elektron. resurs] : ucheb. posobie / E. A. Nikolaeva, K. E. Panasenko, M. V. Sadovskiy, G. E. Vorob'eva // Mezhdunar. zhurn. eksperimental'nogo obrazovaniya. — M., 2015. — № 10-2. — Elektron. tekstov. dannye. — Rezhim dostupa: <http://expeducation.ru/ru/article/view?id=8556>.
11. vvedenii FGOS OVZ [Elektronnyy resurs] : pis'mo M-va obrazovaniya i nauki RF ot 11 marta 2016 g. № VK-452/07 // Konsul'tant plyus. — Elektron. dan. — Rezhim dostupa: <http://qps.ru/5X4gm>.
12. Psikhologo-pedagogicheskoe soprovozhdenie detey s tyazhelymi mnozhestvennymi narusheniyami razvitiya : ucheb.-metod. posobie / avt.-sost. I. A. Filatova, E. V. Karakulova ; Ural. gos. ped. un-t. — Ekaterinburg, 2018.
13. Rozhdestvenskiy, N. S. Svoystva russkogo pravopisaniya kak osnova metodiki ego prepodavaniya / N. S. Rozhdestvenskiy. — M. : Izd-vo Akad. ped. nauk RSFSR, 1960. — 304 s.
14. Sirotyuk, A. L. Modal'nostnye kharakteristiki uchashchikhsya kak osnova formirovaniya uchebnoy motivatsii / A. L. Sirotyuk // Narodnoe obrazovanie. — 2006. — № 1. — S. 132—138.
15. Springer, G. Levyy mozg, pravyy mozg / G. Springer, G. Deych. — M. : Mir, 1983. — 256 s.
16. Filin, F. P. Ocherki po teorii yazykoznaniya / F. P. Filin. — M. : Nauka, 1982. — 334 s.
17. Khayrullina, L. Kh. Izuchenie slovarnykh slov v spetsial'noy (korrektsionnoy) shkole / L. Kh. Khayrullina, L. V. Khristolyubova ; Ural. gos. ped. un-t. — Ekaterinburg, 2015.
18. Khannaford, K. Mudroe dvizhenie / K. Khannaford. — M. : Voskhozhdenie, 2000.
19. Sperry, R. W. The great cerebral commissure / R. W. Sperry // Scientific American. — 1964. — No 210(1). — P. 42—52.

UDK 364-47  
BBK C993  
GSNTI 14.29.41  
Code VAK 13.00.01; 19.00.10

**N. M. Nazarova**  
Moscow, Russia

## **SUPPORTED LIVING AS A WAY OF SOCIAL INCLUSION OF DEAF-BLIND ADULT PERSONS**

**Abstract.** The article deals with supported living as one of the modern perspective ways of socialization and social inclusion of a deaf-blind person. The study presents the basic principles of organization of supported living, its history and the modern state (content, organization and provision). The article considers the necessary conditions for satisfaction of the basic living needs of a deaf-blind person. The author describes successful experience of organization and implementation of supported living of deaf-blind persons in soviet times in Russia on the example of Zagorsk children's home for deaf-blind children. Much attention is paid in the article to the consideration of the problem of psychological and socio-cultural preparation of the deaf-blind person for transition from living in the family to supported living in a community; it is stressed that the corresponding preparation and the timely transition to the conditions of supported living are imperative. Organization of supported living of adult deaf-blind persons is a wide-spread kind of social assistance in many European countries, USA and Australia, whereas in modern Russia, this form of support of persons with a double sensory disorder is still in its infancy. In order to illustrate modern successful organization of supported living, the article provides a description of organization of activity of the communities "Our Village" and "Country Yard" in the vicinity of Fischbeck, near Hannover (Germany). The study highlights the goals, tasks, content and methods of support and stresses their individual character with relation to each concrete deaf-blind person. The article describes the organization of functioning of the communities, presents socio-cultural and other opportunities granted to deaf-blind persons, and comments on such a character of organization of the life of the communities that allows deaf-blind persons to be included in the society, to communicate and interact with various representatives of social environment and to satisfy various living needs without suffering from loneliness. The author also presents the experience of the work of the city day care center for adult deaf-blind persons, its goals, tasks, and content of activities.

The article also dwells on the experience of organization of supported living of deaf-blind persons in New Moscow sponsored by the charity foundation “So-edineniye” — “Quiet Home”, and the experience of “So-edineniye” in the realization of numerous social projects targeted at inclusion of deaf-blind persons in active social and cultural life. The purpose of the article is to propagate the experience of organization of supported living of adult deaf-blind persons in Russia.

**Keywords:** supported living; deaf-blind persons; social inclusion; independence; social activity; day centers; organization of supported living.

**About the author:** Nazarova Nataliya Mikhaylovna, Doctor of Pedagogy, Professor.

*Place of employment:* Head of Department of Psycho-pedagogical Foundations of Special Education, Institute of Special Education and Complex Rehabilitation, Moscow City Pedagogical University, Moscow, Russia.

*E-mail:* isokr.info@mgpu.ru.

An adult deaf-blind person needs organization of supported living which can help them solve their educational, socio-cultural and life problems corresponding to the period of adulthood: job (or employment), housing, spare time, material, family and partner relations, etc. The nature and the severity of sensory disorders laying significant limitations on the capacity for life call forth the need to provide *supported living* to an adult deaf-blind person by the social security services. The given article deals with urgent and potential opportunities of social inclusion of an adult deaf-blind person on the basis of adequate organization of their living conditions.

The support service relies on the following principles in the provision of supported living for adult deaf-blind persons:

- respect for the personality of the deaf-blind person supported and promotion of their self-development and identification;
- protection of the social rights and freedoms of the person supported;
- normalization of the life and social environments of the deaf-blind person supported;
- formation and preservation of partner relations with the person supported which presuppose mutual agreement and trust;
- purposive nature of assistance aimed at achievement of maximum feasible self-help;
- facilitation: there must be support exactly enough not to make the person supported used to excessive help and not to render them helpless in this way;
- guarantee of privacy and autonomy of life for the person supported;

– respect for the inner vision of the outer everyday life formed by the deaf-blind person in accordance with their interests, tastes and attachments.

Achievement of social adulthood and feasible independence depends on the living conditions of the adult deaf-blind person and the character of support organized for them. The achievement of the cultural level by the adult deaf-blind person directly depends on the place and quality of their dwelling. Life conditions have both objective and subjective characteristics.

The objective, or outer conditions, according to foreign specialists, are the following.

First of all, it is adequate, own and preferably constant living space equipped and adapted for the life of a deaf-blind person, in which they would feel themselves at home organizing it in accordance with their tastes and needs. This living space and its content should be the sacred property of the deaf-blind person treated with respect by the surrounding people including the members of their family.

Supported living should satisfy all vital needs of the deaf-blind person: economic protection and the corresponding living standard, medical assistance and service, education, employment, social inclusion and social activity, satisfaction of creative, communicative and aesthetic needs and hobbies, and recre-

ation and physical health promotion needs.

It is essential to provide a possibility to spend spare time independently, to communicate, make friends, choose occupation according to one's interests, and to make conclusions about realization of personal far-reaching and everyday plans. Supported living also presupposes guarantee of further education encompassing all areas vitally and socially significant for a deaf-blind person. This means the provision of all individual and social opportunities for further development of an adult person, satisfaction of the needs and aspirations which would facilitate the development and self-realization of their personality: professional education or employment, equipment and maintenance of dwelling, spending spare time, partnership, communication, interests and hobbies, acquisition of self-provision and self-protection skills, and many other things.

Subjective or inner conditions, and specifically the feelings of well-being, stability, reliability, belonging to the social group significant for the person, and assurance of one's own identity seem to be especially important.

Supported living is still quite a new and rare phenomenon of special assistance for people with disabilities for our country. Foreign countries have a longer and richer experience in this field.



In Soviet times, considerable experience of organization of supported living of adult deaf-blind persons was accumulated while transferring the graduates of Zagorsk children's home for deaf-blind children to the place of work at the Industrial Practice Enterprise of the All-Russian Association of the Blind (IPE VOS) and organizing their accommodation at the IPE hostel. The deaf-blind young people got considerable independence in the organization of their everyday life, meals, apartment furnishing, and independent movement around the city (often aided by their partially sighted friends or IPE workers). A specially appointed tutor provided support for ten young deaf-blind persons. If the deaf-blind persons decided to get married, they were given a separate apartment in the hostel. The hostel was in constant communication both with city organizations and with all hostel apartments; both day and night duty of a social worker ready to come to one's aid and answer any urgent questions was organized in the hostel. Many everyday life problems were solved by the deaf-blind persons independently via mutual help, the formation of which was paid much attention to in the Zagorsk children's home. After moving to the hostel, the communication with the children's home was not terminated: the deaf-blind young people often and with pleasure visited their

former school, pupils and pedagogues, took part in events and holidays, and rendered voluntary help.

Nevertheless, far from all deaf-blind persons passed on to live in the hostel after finishing Zagorsk boarding school. If there was any chance to live in the family, the school leaver moved to live with the family and got a job either at the IPE VOS or used other employment opportunities. The life of a young deaf-blind person in the family incurred a number of problems for the family members (absence of specialized social support service, aging of family members, material problems, etc.). On losing working capacity or on the death of the family members capable of caring for an adult deaf-blind relative, if the family was not ready and unable to take care of a senior deaf-blind relative, the question of the disabled person's moving to a boarding house for adults with disabilities was inevitably raised. The social security character of these institutions and the organization of life on the principles of medical establishments limited to providing treatment and care, brought about fast degradation and aging of these people as a result of seclusion, absence of rehabilitation programs, educational and recreational aspects of everyday life, and opportunities for social inclusion of the boarding school inmates in the surrounding world.

As early as in the 70s and 80s of the 20<sup>th</sup> century, social-educational support structures for the families caring for persons with severe and multiple developmental disorders limiting or totally preventing employment were created abroad. Those were the so-called *day care centers* where the family could bring their adult child with a disability and take them back home at night after work. At such day care centers, young persons with sensory disorders (and, possibly, with other disorders) get meals, care, qualified help, and psycho-pedagogical support. It includes recommended rehabilitation classes, feasible labor, communication and social interaction, participation in recreation activities, physical exercises, satisfaction of creative needs, etc. These centers develop and improve communicative skills, expand the understanding of models and situations of social behavior, form behavioral norms of partner contacts between genders, widen the sphere of involvement in what is going on in real life – individual and social events, holidays, etc. The family and the close adults can be sure that their family member in need of supported living has a busy day and develops both personally and socially. Day care centers make it possible for the employed members of the family to return to their job, to be socially and personally needed, and to live a holistic life.

The problem of supported living of a deaf-blind person in the family is complex and ambivalent. It should be regarded and solved in the context of complexity of the whole life of the person and his family, as well as from the point of view of the change of educational tasks, socialization, and alteration of the individual needs and aspirations depending on the person's age. If in early and preschool childhood, the developing family environment and the closest adult relatives are more comfortable for the deaf-blind child, closer to the school age, the educational, developing and socializing environment of the education institution gradually takes the lead. The return to the family after finishing school sharply limits the already formed needs for constant social contact and communication with a wide range of acquaintances, friends and pedagogues. Limitations are also laid on the personal activity and independence; the socially significant stimuli deteriorate. Long life of the deaf-blind person in the family is associated with the inevitable aging of their parents and creates ever greater burden for them. The parents' death, especially if there are no other relatives ready to care for the deaf-blind person, will not only produce an unfavorable effect on their no longer young child but will make it absolutely inevitable for the deaf-blind adult to leave the par-

ents' house and move to the place where they can get assistance and support in everyday life.

At such moments, when the habitual course of life is suddenly disintegrated (statement of impossibility of getting further support in the family, progression of visual and/or auditory disorder, and realization of imminent deaf-blindness), it is utterly important to get a qualified consultation of the specialist who can help to find an acceptable way out of the critical situation. With this end in view, specialized counseling centers are created abroad (at public organizations or associations for the deaf and/or the blind, at education institutions for the deaf-blind, at rehabilitation centers and other organizations and institutions) the aim of which is to provide counseling for deaf-blind (or partially deaf-blind) adult persons in a difficult life situation using the whole range of opportunities (variants of further supported living: at home or moving to a community; provision of an assistant; taking a course of supported education – study of the means and methods of communication of deaf-blind persons, teaching mobility, use of computer technologies under the conditions of deaf-blindness, etc.).

Foreign specialists believe that if the family does not get supporting assistance from the mobile support services, it is most feasible to organize supported living of the adult

deaf-blind member of the family in groups and communities based on the principles of co-residence. In the community, each member is allotted permanent apartment furnished as they wish and can use it for life. All inmates are involved in the life of the community and in the activity of its social services. The community may be located in all kinds of places. It may be situated both in the city (for example, a specially equipped section of a large block of flats) and out of the city in the form of cottage settlement or village also equipped to meet the needs of deaf-blind persons. The organization of living is based on a rational combination of privacy and life autonomy of each person and their personal inclusion in the life of the community. Such organization of supported living of an adult deaf-blind person is not simply provision of dwelling. They find here such life conditions, under which they are protected, treated with respect, employed, engaged, and can live a holistic social and spiritual life. It is the world they live in; it is their second birthplace.

Preparation for such transition should be gradual. It should begin in school, but must take place not later than 23-25 years of age. It is necessary to handle the questions of moving the deaf-blind person from one place to another, because the suddenness of this event may become a cause of a deep psychologi-

cal trauma. It is good if several deaf-blind persons who know each other and are in friendly relations – for example, leavers of one and the same school – are moved to the community.

Foreign experience shows that such communities should not be large: the workers of small open institutions of community type are more often satisfied with their work than their colleagues in large boarding houses. And the community members also feel more comfortable and confident.

Today, organization of supported living of adult deaf-blind persons is a wide-spread kind of social assistance in many European countries, USA and Australia.

On the example of activity of one of such institutions – the Hanover Center for the Deaf-Blind – we will describe in detail the content and organization of supported living of adult deaf-blind persons with partial visual and auditory impairment in two communities: “Our Village” and “Country Yard”, organized in the vicinity of Fischbeck, near Hannover (Germany).

The communities are sponsored by the German Federation of the Blind and Partially Sighted and the Association of the Blind and Partially Sighted in Lower Saxony. “Our Village” was opened in 1990, and “Country Yard” – in 2011.

The main goal of activity of these institutions is to create a worthy

life full of meaning and satisfaction based on the realization of the individual abilities and skills for the community members.

The key tasks of the supported living in the communities include:

- overcoming of isolation caused by sensory disorders;
- assistance in the formation, development and support for communication systems;
- formation and support for social contacts;
- assistance in participation in the life of the local community on the basis of all-round help and support;
- acquisition of new knowledge and skills and development of abilities; activation and support for the aspirations to learn new things;
- formation and support for mobility and orientation skills;
- help with overcoming fears and uncertainty;
- medical support, counseling and treatment taking all necessary measures;
- creation of conditions revealing creative abilities and DIY skills; organization of useful and interesting kinds of activity in workshops, support groups or daily routine events.

The institutions organize their work around the principle of all-round support for the inmates under the conditions of safe and friendly atmosphere, personnel competence, trustful and hearty relations between the personnel and the com-

munity members, and unconditional recognition of the value of the personality of each individual.

The aims, tasks, content and methods of support for each patient are individual and correspond to their personal situation.

Both communities organize supported living for the total of 127 people – adult deaf-blind persons with considerable multiple impairment of vision and hearing (partially deaf-blind). They are subdivided into 17 groups with 7 places of accommodation and 2 groups with 4 places of accommodation in each. Each group occupies its own cottage and is provided with 24 hour support (by a team of 6-7 people). Each of the 19 groups has one-room flats for individual residence(or, if they wish, for co-residence), one bathroom for every two rooms, common living room, kitchen, sanitary facilities, terrace or balcony, utility room, and a room for the support team personnel. The personnel provide situational assistance and support for all kinds of activity and events, including assistance in spending spare time. They also help to establish contacts with families and outer organizations (for example, visiting a doctor, consulting a lawyer, etc.).

The support personnel includes specially trained assistants, social workers, typhlo-surdo-pedagogues, special psychologists and medical staff (doctors and qualified paramedical workers).

Workshops with 63 specially equipped work places are organized for the community members without significant working capacity limitations. These are 51 places for crafts and work in the hothouse and 12 work places for the persons with significant developmental disorders who are in need of enhanced support.

The community premises also have rooms for rehabilitation work, gyms for physical exercises, halls for holidays and staff in-service training (advanced training), swimming pool, internet café, health path (a path equipped for walks), bike track, stable and riding arena for therapeutic horseback riding, and aviaries for dogs and poultry. There is also a big kitchen and a laundry.

In the hothouse, the community members grow flower seedlings and flowers, and preference is given to fragrant plants. In the workshops, decorative objects and toys and souvenirs for Christmas, Easter and New Year holidays are made. The work in the workshops is differentiated according to the difficulty and the working capacity of those who take part in it. These can be the simplest operations in the form of sorting or putting things in boxes for those who need considerable support; work connected with assembling, carpentry or metalwork, making things from wood, clay, metal, plastic, plant or other materials – for low vision persons and

those with individual capability for such work.

The communities have their own shops attached to the workshops where they sell things they produce (seedlings and flowers, decorative objects, souvenirs). Deaf-blind persons act as shop assistants as well. The money gained is used for the community needs.

A wide range of rehabilitation classes that meet the needs of the inmates are conducted in the communities. They encompass work and occupational therapy, therapeutic horseback riding, canistherapy and interaction with domestic animals and poultry (hens), lessons on stimulation and development of communication, mobility trainings, everyday life and self-service skills training, basal stimulation, perception development based on safe analyzers, physical training and motor activity (including the swimming pool), music therapy, cooking, kinesiotherapy, massage, hydrotherapy, etc.

The community members are not deprived of the opportunity to take part in the religious life corresponding to their denomination.

More than 5 years ago, a day care center for the deaf-blind was opened and has been functioning ever since for people with multiple disorders of vision and hearing in Hannover near which the center for the deaf-blind is situated. It is visited by about 40 persons living in the

family outside the community. As a rule, they cannot work in the workshops due to age and character of disorder, and they often feel lonely at home. At the day care center, they get support and a chance to develop their everyday life and self service skills, and they find here their circle of communication and opportunities for interesting pastime. The stepping stone of all kinds of activity offered by the day care center is the chance to make those who attend it happy, and to feel pleased with their own activity and communication with a friendly environment. The center grants an opportunity of doing physical fitness and motor activity exercises, helps to reinforce and develop the skills of cooking, elements of creative activity (molding, pastry cooking, handcrafts, etc.), playing activity (for example, table games), organizes visits to a café or tea parties for the center patients with the pastry made by themselves, during which they gladly communicate with each other. The activity of such center is highly praised by those who attend it.

Thus, supported living of an adult deaf-blind person is not just provision of assistance in solving vital everyday life problems. It encompasses various methods of inclusion of such people in the surrounding social world and creation of conditions for holistic meaningful life not differing much from the

life of typical persons. This work is done not only by the state and the social services affiliated to it. In foreign countries, this work is carried out by charitable and public organizations and associations; a serious contribution is made by volunteers. It is they who raise funds for realization of the programs of inclusion of deaf-blind persons in social life. These programs are extremely different. They may take the form of a weekend summer camp where the participants can have various opportunities for communication and pleasant and interesting pastime, various kinds of recreation and entertainment: horseback riding, boating, car driving, bike riding, playing golf or darts, surfing, wall climbing, computer games, drawing or painting, active games, amateur theater performances, and many other things.

Charitable programs may presuppose package visits to a café or restaurant by a group of deaf-blind persons who know each other, where they can pick up and order the dishes by themselves and spend time over pleasant communication while eating.

An important area in the activity of public organizations and volunteers is dedicated to work on detection of deaf-blind persons in need of supported living, work with government structures aimed at improvement of legislation, financing and provision for the support for

adults with multiple sensory disorders with the view of creation of conditions facilitating early detection and early diagnostics of visual and auditory impairments in aging population beginning with 45 years of age.

In modern Russia, this form of support of persons with a double sensory disorder is still in its infancy. A series of initiatives of public organizations, firms and deaf-blind persons themselves which would change the life of a deaf-blind adult expanding the feasible spheres in the surrounding world are being implemented today.

In November 2016, a new officially adopted profession of typhlo-surdo-interpreter based on a state educational standard appeared in Russia. Surdo-interpreters now help deaf-blind people when they visit offices and institutions and assist in interpersonal communication. The typhlo-surdo-interpreter figures out the optimal route of travel with the deaf-blind person under support, proofreads the text of the typhlo-surdo-commentary, translates the oral, written and gesture speech of the surrounding people into tactile speech. All this expands the capacity of the deaf-blind person to establish and keep up social contacts – business, friendly, and the like, making their life busy and interesting, and turning them into independent self-sufficient persons. Such support allows deaf-blind per-

sons to conduct negotiations, manage their finance, visit shops, various personal and domestic services, medical and cultural institutions, and so on. Special training of guide dogs has begun, and the first experience of their application proves to be positive.

In order to expand the scope of communication of the deaf-blind with the surrounding people, the telecommunications operator Beeline together with the charity foundation "So-edineniye" opened a special mobile phone tariff for them. All deaf-blind persons who took part in the census and declared that they used mobile telecommunication services were sent a letter with a SIM card enclosed in it. The tariff provides 10 Gb of Internet traffic and 1000 SMS messages, thus satisfying the deaf-blind person's communication needs.

The charity foundation "So-edineniye" initiated work on establishing cooperation with trading companies in creation of accessible environment for deaf-blind persons at retail outlets.

Deaf-blind persons, just like all other people, can and like traveling. Public organizations and resource centers opened at the initiative and under support of the foundation "So-edineniye" organize tourist travels for the deaf-blind and summer camps for the families caring for children with visual and auditory disorders.

Involvement of deaf-blind persons in the cultural life and introduction to the cultural values play a big role in their social inclusion. And this is not limited to visiting museums and exhibitions. This means dance and drawing therapy, creation of a tactile and fragrant garden (Moscow) and its visits by blind, partially sighted and deaf-blind persons. The foundation "So-edineniye" possesses many initiatives in creation and realization of continuing cultural projects: master classes of world famous specialists of inclusive theater, functioning of inclusive theater school and theater performances at the Moscow Art Theatre Studio School, in which deaf-blind actors play alongside professional ones (performances "Touchable", "Marriage: An Absolutely Incredible Event", "Carmen", action-performance "Seagull: Fragments", sensory performance "The Tea Party in the Magical Wood" and others. These also include exhibitions of works by deaf-blind painters, celebration of the International Day of Deaf-Blind People (it is also a birthday of Helen Keller – June 27) in the museum interiors, and many other events.

The foundation "So-edineniye" develops and implements such socially useful activity popular with the deaf-blind people as a cooking holiday. Master classes, competitions of deaf-blind cooks, and folklore festivals including cooking



dishes of the Russian traditional cuisine are held. Some activities are held by resource centers; not infrequently, the participants are invited to take part in the corresponding TV shows. The common dinner that follows these events served with the dishes cooked by the deaf-blind persons themselves is a good opportunity for the deaf-blind participants to communicate between themselves and with other people.

As it was mentioned above, in 2016, the foundation “So-edine-niye” sponsored the opening of the boarding house “Quiet Home” in New Moscow for supported living of adult deaf-blind persons. It is the first institution in Russia for supported co-residence of deaf-blind people. The dwellers of the “Quiet Home” have a typhlo-surdo-interpreter at their service and try to live an independent life. They can earn their living, plan their budget, and pay their expenses for meals, household services and cultural leisure activities. They do many chores independently, for example, clean the house, cook, gather fruit and vegetables, look after seedlings, read, play chess, work with computer, knit socks, and walk outside with the aid of sensory cues. Before holidays, the dwellers of the “Quiet Home” are busy making Christmas and New Year gifts. On Sundays, they visit the local church. Excursions and visits to medical specialists are organized for them.

Other Russian cities have experience of preparation of young people with developmental disorders for independent and self-sufficient life. For example, significant experience has been amassed in Vladimir, where the Vladimir public organization “Association of the Parents of Children with Disabilities ‘Svet’” initiated the creation of the so-called “learning (or training)” flats where young people with disabilities learn to be independent in living and self-serving under the conditions of home environment.

With each year, these initiatives involve more and more regions of Russia helping deaf-blind persons to live a maximum independent and holistic life.

#### References

1. Abdukamalova, L. A. Pedagogicheskie mery po formirovaniyu samostoyatel'nosti i nezavisimosti detey so slozhnoy strukturoy defekta / L. A. Abdukamalova // Formirovanie samostoyatel'nosti i nezavisimosti u detey so slozhnoy strukturoy narusheniya : nauch.-prakt. sb. / redkol.: G. K. Epifanova, E. A. Zarechnova, E. N. Toporkova. — Sergiev Posad : IITs «Ves' Sergiev Posad», 2003.
2. Apraushev, A. V. Tiflosurpedagogika: vospitanie, obuchenie, trudovaya i sotsial'naya reabilitatsiya slepoglukhonemykh : ucheb. posobie dlya studentov defektol. f-tov ped. in-tov / A. V. Apraushev. — M. : Prosveshchenie, 1983. — 208 s.
3. Belyaeva, M. A. Sotsial'naya rabota i sotsiokul'turnaya deyatel'nost' s sem'ey rebenka-invalida : ucheb. posobie / M. A. Belyaeva ; Ural. gos. ped. un-t. — Ekaterinburg, 2009.
4. Vmeste k samostoyatel'noy zhizni. Opyt raboty Tsentra lechebnoy pedagogiki i differentsirovannogo obucheniya Pskovskoy oblasti. — Pskov, 2017.

5. Zhizn' i podvig Eleny Keller: 1880—1968 gg. Bibliograficheskiy ukazatel' / sost. N. D. Shaposhnikova. — M. : RGSB, 2001. — 32 s.
6. Kats, L. I. Formy soprovozhaemogo prozhivaniya vo Vladimirskoy oblasti / L. I. Kats, O. G. Storozhuk, Yu. M. Kats. — Vladimir, 2015.
7. Nezavisimaya zhizn' i sotsial'naya adaptatsiya slepoglukhikh invalidov v sovremenom megapolise : metod. rukovodstvo dlya rabotnikov sotsial'noy sfery / pod red. T. A. Basilovoy. — M. :MGPPU, 2008. — 252 s.
8. Perkins-shkola: rukovodstvo po obucheniyu detey s narusheniyami zreniya i mnozhestvennymi narusheniyami razvitiya. Ch. 3. Podgotovka k samostoyatel'noy zhizni / K. Khaydt [i dr.]. — M. : Tsentr lechebnoy pedagogiki, 2012. — 168 s.
9. Salomatina, I. V. Organizatsiya deyatelnostnoy sredy, formiruyushchey lichnostnoe obshchenie slepoglukhikh so slyshashchimi i vidyashchimi lyud'mi : avtoref. dis. ... kand. psikhol. nauk : 19.00.10 / Salomatina I. V. ; In-t korrekts. pedagogiki RAO. — M., 2002. — 26 s.
10. Sluzhba soprovozhaemogo prozhivaniya. Proekt «Stan' vzroslym». — Minsk, 2014.
11. Suvorov, A. V. Inklyuzivnoe obrazovanie i lichnostnaya inklyuziya / A. V. Suvorov // Psikhologicheskaya nauka i obrazovanie. — 2011. — № 3. — S. 27—31.
12. Suvorov, A. V. Vstrecha vselennykh, ili Slepoglukhie prishel'tsy v mire zryacheslyshashchikh / A. V. Suvorov. — M. : Eksmo, 2017. — 512 s.
13. Tsentr kul'turnogo razvitiya i sovershenstvovaniya cheloveka [Elektronnyy resurs]. — Rezhim dostupa: [www.so-edienie.com](http://www.so-edienie.com).
14. Lemke-Werner, G. Taubblindheit. Hoerschbehinderung. Ein Ueberblick / G. Lemke-Werner, H. Pitroff (Hrsg.). — 2. Auf. — Wuerzburg : Edition Bentheim, 2012. — 305 S.
15. Deutsches Taybblindenwerk [Electronic resource]. — Mode of access: [www.taubblindenwerk.de](http://www.taubblindenwerk.de).

UDK 616.22-008.5  
BBK P733.614.54  
GSNTI 14.07.03  
Code VAK 13.00.03

**O. G. Prikhod'ko**  
Moscow, Russia

## **SPECIFIC FEATURES OF SPEECH DEVELOPMENT OF YOUNG CHILDREN OF DIFFERENT NOSOLOGICAL GROUPS**

**Abstract.** The article describes modern approaches to the assessment of early speech development of children of the first years of life. It is based on systemic complex analysis of the basic “lines of development”. It is stressed that logopedic examination of children at an early age should be carried out as a complex of diagnostic measures taking into account other “lines of development”: cognitive, social, motor, etc. The article makes reference to the points of view of various researchers according to which all psychological processes of the child develop exclusively through speech; and speech acquisition reorganizes the processes of perception and thinking, develops all kinds of activity and forwards the child’s socialization. Clinical manifestations of pre-speech development disorders (impairment, and sometimes inability to produce even primitive voice responses) are described in detail. Special attention is paid to the characteristic of speech pathology of young children which is manifested in the form of absence or delay of formation of verbal means of communication. The article interprets the notions of “speech underdevelopment” and “delay in psycho-linguistic development”. Based on a complex longitudinal observation of children of the first years of life carried out over several years, the author singles out five groups of children with different variants of speech underdevelopment depending on variability of correlation between speech, cognitive, motor and social development. The article materials have theoretical and practical significance for logopedists, defectologists, and pedagogues-psychologists realizing rehabilitation-educational work with children of the first years of life.

**Keywords:** early age; junior preschoolers; speech development; children’s speech; logopedics examination; systemic approach; complex approach; preschool logopedics; speech disorders; children with speech disorders; speech underdevelopment; delay in psycho-linguistic development; epicrisis period.

**About the author:** Prikhod'ko Oksana Georgiyevna, Doctor of Pedagogy, Professor.

*Place of employment:* Head of Department of Logopedics, Director of the Institute of Special Education and Complex Rehabilitation, Moscow City Pedagogical University, Moscow, Russia.

*E-mail:* isokr.info@mgpu.ru.

Speech manifestations of children at an early age attract more and more attention of home specialists in the field of children's speech. A great contribution to the study of the process of speech formation in children at an early age was made by N. M. Aksarina, A. N. Gvozdev, V. V. Gerbova, N. S. Zhukova, E. K. Kaverina, M. Yu. Kistyakovskaya, M. M. Kol'tsova, I. M. Kononova, A. I. Lavrent'yeva, N. I. Lepskaya, M. I. Lisina, G. F. Loza, R. M. Lyamina, A. I. Maksakov, L. N. Pavlova, V. A. Petrova, A. D. Salakhova, L. S. Slavina, E. I. Tikheyeva, N. Kh. Shvachkin, S. N. Tseytlin, and many others. Investigation of the speech of children at an early age is based on the studies of speech manifestations in infants (up to 1 year of age). A considerable contribution to these studies was made by V. I. Bel'tyukov, E. N. Vinarka, E. I. Isenina, T. N. Ushakova, and others.

At an early age, speech – as a most important component of the child's successful socialization – develops more intensively than other lines of development. Speech emergence reorganizes the whole psyche of the child: their cognitive and affective spheres; speech has a

serious impact on the regulation of behavior, psychomotor development, etc. Speech influences the process of growing and functional organization of many structures of the brain. Alongside intellect, speech is an important indicator of the child's development, and its disorders testify to possible problems in the psychological sphere. Speech reflects successful (or unsuccessful) acquisition of the native language – the main social achievement of the child at this age [9].

Speech manifestations of the child at an early age reflect their cognitive-communicative activity in the process of which the foundations for the future higher psychological functions – perception, thinking, attention, and memory – are laid. The idea that as a higher psychological function, speech emerges, develops and is realized in the process of communication on the basis of certain preconditions which prepare its emergence is essential for preventive logopedics. Certain biological conditions are necessary for typical speech development. They include, first of all, normal maturation and functioning of the central nervous system and

speech mechanisms of the brain. Apart from this, speech development also needs social conditions – the child’s communication with adults. The communication between the infant and its mother – the emotionally closest adult person – is a decisive factor [9].

The formation of speech in early childhood is associated with the development of new kinds of activity and new forms of communication with adults. D. B. El’konin stresses that the emergence of new kinds of activity of the child and their new relations with adults and same-age peers leads to further differentiation of the forms and functions of their speech. Object-oriented (instrumental) activity is the leading kind during this period [13]. The studies by L. S. Vygotskiy [2], A. M. Arkin [1], A. N. Gvozdev [3] argue that new demands for activity and communication intensify language acquisition, its vocabulary and grammatical structure. As a result, the child’s speech becomes more and more correct and finally turns into a most important means of translation of social experience to them and of control of their activity on the part of the adults.

Formation of psychological functions is closely associated with the development of speech and linguistic capacity. The psychological activity of children grows along with the increase of speech activity. The outstanding Russian psycholo-

gists L. S. Vygotskiy, A. V. Zaporozhets, A. N. Leont’ev and some others have convincingly proved that all psychological processes in the child develop exclusively through speech. Speech acquisition reorganizes the processes of perception, thinking and memory, develops all kinds of activity and forwards the child’s socialization, and specifically, their relations with other children and surrounding adults. And, on the contrary, the process of speech acquisition, in its turn, depends on the development of various kinds of activity of the child, on their perception and thinking. Well-developed speech is an indicator of the child’s general psychological development and normal communication with adults and peers [9].

The speech of children at an early age develops constantly and intensively, which represents a non-finished process. At the early stages of development, the child acquires a certain arsenal of linguistic units and masters the rules of their usage in speech in the process of communication with adults. “Language acquisition may be described as the acquisition of the rules of transition from the core of the system to speech, the acquisition of the sphere of the rules of application taking into account various filters and limitations” [12]. In cases of speech underdevelopment, we come across “not so much a delay of the tempo

of linguistic units' acquisition ... and the rules of their functioning as a pathological type of formation of the linguistic mechanism" [6].

The early forms of the child's communication with the adult are characterized by prevalence of non-verbal means of expression of communicative intentions. It is only in the process of perfection of communicative behavior and complication and expansion of communicative situations that the need to extent speech acts appears [4]. The studies of L. S. Vygotskiy, A. V. Zaporozhets, E. I. Isenina, N. I. Lepskaya, M. I. Lisina, A. M. Shakhnarovich, S. N. Tseytlin and others show the significance of not only imitating (mimetic) but also creative nature of language acquisition.

The successful acquisition of speech to a great extent depends on the volume of the passive and active vocabulary of the child and on the right choice of the words needed for communication. The verbal means adequate to the early age make up the foundation for the development of the nominative function of speech and are meant to meet various communicative needs of the child [5].

According to the majority of researchers, speech is a "live" process of generation of utterances, and language embodies a relatively fixed outcome of the child's cognitive activity (I. A. Zimnyaya, A. N. Leont'yev, S. L. Rubinshteyn, N. Lass,

etc.). D. Slobin notes that cognitive development takes place irrespective of language acquisition. And, according to the author, the main task of the child consists in learning to express verbally what they already know from their non-verbal experience [15]. L. Blum believes that language (specifically, syntax) acquisition peculiarities are associated with the level of cognitive development. The author argues that the child should understand non-linguistically that there exists a subject and an object of an action before they can understand the difference between the noun and the verb [14].

Pre-verbal meanings represent the core of the functional speech basis and are the main speech "precursors" the acquisition of which "unlocks" the child's psyche to meet social reality as early as at the end of the first year of life ensuring the correspondence between the individual and social experience, as well as the possibility of further acquisition of language by the child [11]. Many cognitive abilities emerge at the early stages of development of the child; and the tempo of the development of thinking at an early age outpaces the development of speech. The cognitive development has a decisive influence upon the character and order of acquisition of speech forms by the child.

Speech development is not an isolated process but one of the as-

pects of the general development of the child closely associated with the cognitive, social and motor development.

The modern logopedics pays much attention to the issue of speech disorders of children of the first years of life (Yu. F. Garkusha, Yu. V. Gerasimenko, O. E. Gromova, Yu. A. Lisichkina, O. G. Prikhod'ko, E. V. Sheremet'yeva, etc.). In their scientific-practical research, modern scholars draw on the fundamental works of R. E. Levina, N. S. Zhukova, E. M. Mastuykova, S. A. Mironova, T. N. Ushakova, T. B. Filicheva, M. E. Khvatsev, S. N. Tseytlin, G. V. Chirkina, and other scholars who made a considerable contribution to the study of speech and language disorders of children.

The modern approach to the assessment of early speech development of children is based on systemic complex analysis of the child's basic "lines of development". The diagnostics of children at an early age should involve a complex of pathological deviations quite often constituting an intricate multi-component and multi-level system. The logopedic examination of the child at an early age should be carried out in the context with other "lines of development": cognitive, social, and motor development [10].

The terms *speech delay (SD)* and *delay of psycho-linguistic de-*

*velopment (DPsLD)* are more or less widely used in logopedic and medical practice with reference to children at an early age. *Speech delay* indicates a late beginning of speech formation and/or low tempo and quality of its formation. *Delay of psycho-linguistic development* is marked by deviations both in the cognitive and speech development. In their essence, these conclusions (SD and DPsLD) are diagnostic features reflecting the level of speech or cognitive and speech development; therefore they make the specialists look at the speech or general psychological development with more attention. Disorders of communication and speech development may be manifested in an isolated form, but more often than not they combine with other deviations in early ontogenesis, which makes early diagnostics difficult [7; 8].

Speech delay (or speech underdevelopment) is one of the most widely spread problems associated with the development of the child. The majority of children with disabilities demonstrate problems with speech development. Not more than 15% of children in the population have a normal course of speech development both in time and in the quality of formation of developmental speech skills.

Disorders of pre-verbal development in children of the first year of life are manifested in the fact that various pathological conditions

(usually as a result of perinatal lesion of the CNS) may cause impairment, and sometimes inability to produce even primitive voice responses. Disorders of the articulation and breathing muscles tone make the child's screaming weak, short, monotonous, and high frequency. Screaming can be shrill and sharp or very soft and subdued, in the form of separate outcries. Many children may have underdevelopment of arbitrary voice response; cooing and especially babbling emerge later than they should. Qualitative insufficiency of voice response is manifested by low prosodic expressiveness of cooing and oversimplicity of sound complexes. In cases of severe disorders, spontaneous babbling may be absent altogether. In most cases, babbling is not active enough, monotonous, fragmentary, prosodically inexpressive, and happens rather rarely (only after recurrent stimulation). And the mimetic sound-syllabic activity is utterly low.

Speech pathology of infants is mainly manifested in the form of absence or delay of formation of verbal means of communication. To assess the level of speech pathology manifestation, to figure out its structure and to reveal the genesis at this age stage is usually quite difficult. Specialists diagnose speech delay in the beginning of the second year of life of the child, if they have not passed from the pre-verbal stage

of development to the verbal one, i.e. they have not begun to pronounce separate words and onomatopoeias consciously (with relation to persons, objects and actions).

Children with speech underdevelopment demonstrate a disproportion in understanding speech addressed to them and their own speech. Expressive speech is at a lower level of development in comparison to impressive speech. And the children show slow expansion of the active vocabulary, late emergence of phrasal speech, problems with learning grammatical categories, and agrammatisms. Children with SD fall behind others in the level of speech development; and the formation of age-related lexicogrammatical skills of expressive speech suffers in the first place.

Deviations from the normal speech ontogenesis in the children of the first years of life may be expressed in different degrees – from mild to utterly severe. In mild speech underdevelopment we can observe speech delay of 1 epicrisis (not more than 3-4 months), in moderate speech underdevelopment – of 2 epicrises (not more than 6-8 months), in severe speech underdevelopment – of 3 and more epicrises (more than 6-8 months).

Based on a complex longitudinal observation of children of the first years of life carried out over several years, we have found out that the complex of symptomatic deviations



in the development of children is represented by hierarchical manifestations of dysontogenesis of speech and cognitive activity, as well as social and motor spheres. They can be provisionally divided into five groups. The variability of correlation between speech, cognitive, social and motor development is a criterion for the allocation to a group.

**Group I** – children with deviations in speech development only (“pure” speech delay). There is a disproportion between the development of impressive and expressive speech. Addressed speech is formed according to the age (in due time), and own (reproduced) speech lags in its development behind (is at a lower level of development). Levels I and II of speech development are usually diagnosed in the children with speech delay. The level of cognitive development usually corresponds to the age-related norm. The children of the given group show no deviations from the normal course of social and motor development (general and articulatory motor skills, as well as functional capacity of hands and fingers are without pathology).

**Group II** – children with deviations in verbal and motor development. The speech delay is accompanied by motor speech (dysarthritic) disorders. The children demonstrate disorders of the tone of the articulatory muscles of the

tongue, lips, and face in the form of spasticity, hypotony, dystonia and limitation of their mobility. There is also hypersalivation, disorders of the act of food intake (chewing hard food, biting off, drinking from a cup, etc.), oral synkineses, hyperactive pharyngeal reflex, and breathing and voice modulation disorders. Early manifestations of motor speech disorders in children have different degree of intensity. The level of cognitive development in group II children corresponds to the age-related norm. They are characterized by a high level of development of impressive speech, and a lower level of development of expressive speech. In addition to the motor speech disorders (manifestations of neurological symptoms in muscles and articulation motor skills), the children at an early age can demonstrate delay of formation of basic motor skills and functioning of the hands.

**Group III** – children with deviations in cognitive and speech development (children with delay of psycho-linguistic development). The level indicators of intellectual development and impressive speech in the children of group III do not correspond to the age. A number of children are on the preverbal stage of speech development, whereas others are able to pronounce separate words and onomatopoeias; phrasal speech has not formed in the majority of children.

**Group IV** – children with deviations in social and speech development. Disorders of the communicative function of speech (disorders of acquisition of communication skills) come to the foreground in such children

**Group V** – children with variable heterogeneous combinations of development of cognitive, speech, social and motor functions. The development of different functional systems may be both even and uneven.

Early rehabilitation-educational logopedic assistance can minimize or fully cure the disorders of speech development and reduce their negative impact on the child's acquisition of communication skills and their socialization. The deficit of stimulating intervention on the part of the parents and logopedists during infancy and early age inevitably leads to irreversible effects in the formation of the basis on which all future activity of the person, and specifically speech, will be built.

It is only in some cases that the children with simple (uncomplicated) speech delay show a tendency towards spontaneous compensation for, and even normalization of the impaired speech functions. All children with speech delay not participating in the rehabilitation-educational program, not only in their early childhood but also later, demonstrate stable speech underdevelopment, which is manifested in

various forms of speech pathology. Nevertheless, it is essential to take into account the fact that by the age of 3, speech underdevelopment can be completely overcome due to a significant compensatory potential of the higher psychological activity.

Purposive work on the development of speech of children at an early age has not become part of broad logopedic practice. For specialists, the logopedic work with children of the first years of life is a new, innovative, and rather difficult area of special education. The work with children of the first years of life is a challenge for the specialists (logopedists, defectologists, psychologists, and educators). Interdisciplinary knowledge of the typical features of speech, cognitive, social, and physical development of the child and the methods of early diagnostics, technologies and procedures constitute the essential condition of the professional competence of the given specialists.

#### References

1. Arkin, E. D. *Doshkol'nyy vozrast* / E. D. Arkin. — M., 1948.
2. Vygotskiy, L. S. *Psikhologiya* / L. S. Vygotskiy. — M. : EKSMO-Press, 2000. — 1008 s.
3. Gvozdev, A. N. *Razvitie slovarnogo zapasa v pervye gody zhizni rebenka* / A. N. Gvozdev. — Kuybyshev, 1990.
4. Gerasimenko, Yu. V. *K voprosu o diagnostike narusheniy rechevogo razvitiya detey tret'ego goda zhizni* / Yu. V. Gerasimenko // *Rannaya psikhologo-mediko-pedagogicheskaya pomoshch' detyam s osobymi potrebnyami i ikh sem'yam : materialy konferentsii* (Moskva, 18—19 fevr. 2003 g.). — M. : Poligraf Servis, 2003. — S. 219—221.

5. Gromova, O. E. Metodika formirovaniya nachalnogo detskogo leksikona / O. E. Gromova. — M. : TTs «Sfera», 2003. — 176 s.
6. Kovshikov, V. A. Ekspressivnaya alaliya / V. A. Kovshikov. — SPb., 1994. — 42 s.
7. Prikhod'ko, O. G. Sistema ranney kompleksnoy pomoshchi detyam s ogranichennymi vozmozhnostyami zdorov'ya i ikh roditelyam / O. G. Prikhod'ko // *Osobyte deti v obshchestve : sb. nauch. dokl. i tezisov vystupleniy uchastnikov 1-go Vseros. s"ezda defektologov (26—28 okt. 2015 g.) / pod red. O. G. Prikhod'ko, I. L. Solov'evoy.* — M. : ANO «NMTs „SUVAG“», 2015. — S. 179—184.
8. Prikhod'ko, O. G. Sistema ranney kompleksnoy differentsirovannoy korrektsionno-razvivayushchey pomoshchi detyam s tserebral'nym paralichom : dis. ... d-ra ped. nauk / Prikhod'ko O. G. — M., 2009. — 350 s.
9. Prikhod'ko, O. G. Kak nauchit' malysa govorit' / O. G. Prikhod'ko, O. V. Yugova. — M. : Kaissa, 2010. — 74 s.
10. Sistema ranney kompleksnoy pomoshchi detyam s OVZ i ikh roditelyam : monogr. / O. G. Prikhod'ko, I. Yu. Levchenko [i dr.]. — M. : Paradigma, 2018. — 378 s. — (Ser. «Ranee razvitiye i korrektsiya»).
11. Stetsenko, A. P. Rozhdeniye soznaniya: stanovleniye znacheniy na rannikh etapakh zhizni / A. P. Stetsenko. — M. : CheRo, 2005. — 256 s.
12. Tseytlin, S. N. Yazyk i rebenok: lingvistika detskoy rechi / S. N. Tseytlin. — M., 2000. — 14 s.
13. El'konin, D. B. Razvitiye rechi v doskol'nom vozraste / D. B. El'konin. — M., 1958.
14. Bloom, L. One word at a time. The use of single-word utterances before syntax / L. Bloom. — The Hague-Paris : Muoton Publishers, 1973. — 262 p.
15. Slobin, D. Cognitive prerequisites for the development of grammar / D. Slobin // *Studies of child language development / ed. by C. Ferguson, D. Slobin.* — New York : Holt, 1973. — P. 175—208.

UDK 376.352  
BBK 4453.091  
GSNTI 14.43.43  
Code VAK 13.00.03; 13.00.08

**V. M. Sklyadneva**  
Moscow, Russia

## **THE MODERN STATE OF TYPHLOPEDAGOGICAL SUPPORT FOR INFANTS WITH VISUAL IMPAIRMENTS**

**Abstract.** The article presents the historical aspect of the formation of rehabilitation-pedagogical assistance to people with visual impairments both in Russia and in Europe, and also reveals the current state of tiflopedagogical support for infants with visual impairments in Russia. Analysis of the development of the system of education of children with visual impairments allowed determining the theoretical foundations and scientific approaches to the organization of early special psycho-pedagogical support for infants and their parents. Theoretical and methodological works of pedagogues, defectologists, psychologists, physicians and physiologists on the problem under research were opted for a detailed study. Currently, acts, legal documents and adapted general education programs have been developed in Russia at the legislative level for work with children with health problems, including ophthalmological diseases. However, the exact procedure of providing and the amount of rehabilitation-pedagogical support for young children are not specified in the existing documents, and no guidelines for the methods of its implementation in various social institutions have been created. So, today, professional training and retraining of tiflopedagogues and creation of a proper system of early medico-psycho-pedagogical support, based on the study of real health and educational needs of infants with visual impairments, including the development of differentiated content of individual programs for the education of children at an early age with visual disorders, occupy an exceptionally significant place.

**Keywords:** socialization of children; infants; preschool tiflopedagogy; visual impairments; children with visual impairments; tiflopedagogical support; complex rehabilitation; early age; psychological development; early intervention.

**About the author:** Sklyadneva Veselina Mikhailovna, Researcher, Teacher-defectologist.

*Place of employment:* Laboratory of Special Psychology and Special Education, Federal State Autonomous Institution of the Russian Federation

Ministry of Health “National Medical Research Center for Children's Health”, Moscow, Russia.

*E-mail:* labspiko@gmail.com.

### **Research urgency**

Nowadays, the number of premature babies among all newborns has considerably grown. The incidence of low body mass newborns, very low body mass newborns, and extremely low body mass newborns is growing every year. This category of children constitutes the main group at-risk for perinatal and infant mortality, as well as potential disability in the future [3]. Diseases of the eye and *adnexa are widespread causes of the child's disability* [14].

The causes of visual disorders and, as a result, of disability consist in the effect of pathogenic factors on the fetus during intranatal and/or neonatal period [15].

According to the WHO data, the number of children with significant vision impairment in the world grows by 500,000 every year. The number of children with low vision totals to more than 5 million persons, with an annual increase of 0.08% from year to year [14; 16].

According to the data of the Ministry of Health of Russia, the spread and growth of vision pathology among children by 50% has been recorded over the last 5 years. The most common disorder is retinopathy of prematurity, which leads to acuity reduction or total blind-

ness [14]. We should also mention other ophthalmological diseases: cataracts, glaucoma, retinoblastoma, optic nerve atrophy, and others, emerging in infants up to 1 year of age and leading to partial or total loss of vision [16].

At present, eye diseases are more and more often accompanied by such developmental disorders as hearing impairment, limitation of motion, intellectual disability, and disorders of psychological development. In the majority of cases, multiple developmental disorders, including deaf-blindness, emerge as a result of simultaneous effect of various pathogenic factors (hypoxia, infection, intoxication, trauma, etc.) on the in utero development of the baby [3]. This leads to the structural change and functioning disorders both in the brain and analyzers. The children with perinatal pathology consequences need complex medical assistance for protection of their life, stabilization of their condition, and restoration of their health [15].

The effectiveness of rehabilitation activities realized at the early stages of the child's development is especially high. The design of the programs of early rehabilitation of children with developmental disor-

ders caused by multiple perinatal pathology is the priority task of the system of health protection [2, pp. 6-32; 15, pp. 54-55]. The significance is determined by the unique nature of infancy and early age for effective rehabilitation and prevention of secondary deviations in development (A. A. Katayeva, E. I. Leongard, E. F. Rau, L. M. Kobrina, E. V. Kozhevnikova, etc.). The creation of special developing conditions of the environment and the design of the rehabilitation-pedagogical support for such children become the main areas of the modern research in the field of special pedagogy [8].

In order to determine the efficient forms of organization and content of assistance to infants with ophthalmological diseases and perinatal pathology in the existing state institutions, it is necessary to analyze the formation of special education of children with visual impairment and to apply the existing scientific and methodological aids to practice.

**Research aim** — to analyze the areas of development of rehabilitation-educational assistance to children with visual impairments in order to determine the theoretical foundations and scientific approaches to the organization of early special psycho-pedagogical support for infants and their parents.

**Research methods:** detailed study of theoretical and methodo-

logical works of pedagogues, defectologists, psychologists, physicians and physiologists on the problem under research.

Our analysis of the material under study has shown that special attention to the development of the psyche of the blind children began to be paid only in the 19<sup>th</sup> century.

Still the history of the system of education of children with disabilities (including visual impairments) has a much longer tradition. Thus, the first scientific studies and notes on the given issue can be traced to the manuscripts of the great physicians of the past. We can mention the “*Slovo o pravil’nom vospitanii s mladenchestva v rassuzhdenii tela, sluzhashchem k razmnozheniyu v obshchestve naroda*” (A guide to correct education and physical development of the population) (S. G. Zybeline, 1775), “*Rukovodstvo po ukhodu, vospitaniyu, obrazovaniyu i sokhraneniyu zdorov’ya detey*” (A guide to provision of care, upbringing, education, and health protection of children) (K. I. Grum, 1846), etc. It was the physicians who were the first to describe the interrelationship between the mechanisms of formation of physical and psychological condition of the child [1].

After undertaking an analysis of the history of West European medicine in the socio-political aspect from the 8<sup>th</sup> century BC to the 12<sup>th</sup> century AD we can argue that the

attitude of the state and the society towards people with psychological and physical disabilities was at best indifferent, and at worst hostile and even aggressive. In Rome, in about 450 BC, the first legal document – “The Law of the Twelve Tables” – which recognizes people with severe physical and mental disabilities legally incompetent [9; 11, pp. 210-250].

It is common truth that the world of antiquity sincerely believed in the primacy of the healthy body; that was why babies born with severe physical disorders were killed in the majority of cases. Still it is worthy of note that the greater part of the population singled out adult blind persons from the group of disabled people and treated them with mercy, care and support [9, 10, pp. 7-10].

With the rise of Christianity, the attitude towards the people becomes more tolerant irrespective their origin or social position. As early as in the 4<sup>th</sup> century, some monasteries in Byzantium render help to the blind and the mentally disabled. The European court begins to consider killing children as manslaughter; and the right to life begins to be guaranteed by law [10; 13, pp. 28-39].

Nevertheless, in the following centuries (from the 11<sup>th</sup> to the 15<sup>th</sup> century) the state did not treat persons with disabilities as people in their own right regardless of the fact that infanticide was banned legisla-

tively, and all young children could receive care, upbringing and education at monasteries and children’s homes opened in Bavaria and France [9; 10, pp. 7-11].

After 1409, a growth of interest towards the issues of the blind and the deaf is observed; and later on, there comes the understanding of the possibility of their education and adaptation to the environment. Thus, in the subsequent 100 years, there appear psychiatric institutions in Spain, and their number gradually grows; schools and shelters for adult disabled people are also created (Bavarian and Paris shelters) at religious institutions. In addition, the practical work of the first pedagogues-innovators is summarized in the methodological treatises: “The Talking Deaf Man, or, a Method Proposed, whereby he who Is Born Deaf May Learn to Speak” (Holland, J. Amman, 1692); “Letter on the Blind for the Use of those who Can See” (France, D. Diderot, 1749). A special contribution was made to the education of the blind by the French pedagogue, Diderot’s colleague and follower Valentin Haüy (1745-1822). He developed a method of raised letters, which made it possible to publish the first book for the blind, as well as to teach not only reading and writing but also manual work: spinning, letterpress, music, and singing.

In the early 18<sup>th</sup> century, the European states raise the social status

of the persons with disabilities legislatively, and the majority of the countries recognize their right to education [11]. The acts introducing special education “Law on Education of the Mentally Retarded” (Norway, 1882), “Law on Compulsory Education of the Blind” (Sweden, 1896) and others entered into force.

Like many other countries of Europe, Russia realizes the possibility of teaching the deaf, blind and mentally retarded children quite early. In 988, Christianity becomes the official religious denomination, and soon after that church schools are opened in Novgorod and Kursk for the clergy and secular persons where persons with disabilities could get shelter and be trained in a craft [10].

It was in religious institutes that the foundations of teaching children with various developmental disorders, and specifically those with multiple pathologies (deaf, deaf-blind, etc.) were laid. In monasteries, education via manual labor began rather early, as preschool and junior school age children were accepted there. In Russia, as different from the West, there was no broad network of charitable institutions (hospitals, shelters and homes). For a long time to come, Russia remained to be an agrarian country, and properly formed city self-government, as well as opening of education institutions could be

seen only during the rule of Peter the Great [12].

In contrast to the West, Russia did not have specialists who could render medical or pedagogical assistance to persons with disabilities. It was the visit of the famous typhlopedagogue V. Haiy to Moscow (1806) that was the stepping stone for the organization of the system of special education in the country [9; 12, pp. 45-76].

Thus, in the 19<sup>th</sup> century, several institutions for children and adults with visual impairments were opened in some Russian cities. The first institution was opened at the Smolny convent in Saint Petersburg. At first, teaching was organized for adult blind persons, later it included children.

Swift development of the system of education of the blind in Russia in the late 19<sup>th</sup> century allowed our country to occupy the leading positions in this field, and in some areas of special education – to outpace some European countries in which, in their turn, national systems of special education had been created. They presupposed the education of three categories of children: with disorders of hearing, vision and intellect. The social demand for education grew high, and the Russian government adopted a law on compulsory general primary education embracing children with hearing, visual and intellectual disorders. The authorities worked out and implemented normative-legal



documentation regulating the functioning of special education (curriculum, principles of enrollment in the institutions of the three types, etc.), and determined the sources of finance. Associations and charitable foundations stimulating and controlling official decisions and initiating the development of the network of special institutions were opened [1, pp. 103-145; 11, pp. 380-400].

After World War II, the attitudes of the people of Russia and other European countries to the values of freedom and human rights, and the understanding of equality and inequality of people radically changed. The West European countries realized the need to educate not only children with hearing, visual and intellectual disorders but also with other developmental deviations. Thus, the system of differentiated education became more clear-cut and regular, for example, groups for teaching children with severe intellectual disability, who used to be considered unteachable, began to be opened. The UN adopted "The *Declaration on the Rights of Mentally Retarded Persons*" (1971) and "The Declaration on the Rights of Disabled Persons" (1975).

In the Soviet period, Russia also works out a differentiated system of education and upbringing. After the October revolution of 1917, schools for children with visual impairments became part of the system of people's education. In 1928, first

Soviet school programs for the blind were adopted. Teaching was carried out on uniform curricula. The next ten years enriched their content. Such subjects as physics, mathematics, natural studies, and others were included in them. In the 30s, there appeared first groups of vision promotion for children with low vision in the structure of mass general education schools. In the early 40s, first schools for pupils with low vision were also opened. At the same time, preschool education institutions for children with visual disorders: blind and partially sighted ones (including children with strabismus and amblyopia) between the ages of 2 and 7 were added to the state system of public education [5, pp. 3-25; 17].

The pedagogical orientation of such institutions came from the programs of education and upbringing of children at general education kindergartens and was aimed at harmonization of the psychological development of the child with visual impairment. The process of education included a special system of teaching, new methods of rehabilitation and development of the organ of vision in children, and paid attention not only to the quality of acquisition of the usual learning program but also to the formation of compensatory skills, activization of the work of safe analyzers, and prepared the pupils for schooling [15, pp. 54-55; 19, pp. 150-190].

At the turn of the 21<sup>st</sup> century, an important place in the pedagogical process was occupied by the interrelationship between rehabilitation-educational and medico-restoration activity towards development of vision, its protection, and health promotion in general. The decree “On Education of Persons with Disabilities (Special Education)” was issued under the Federal Law of July 2, 1999. Article 10 of Chapter III of the given decree designates the forms of receiving special education. Now, children with disabilities can get education not only at special education institutions but also at institutions of integrated learning, at home, or while staying at an in-patient medical establishment [19].

The new decree made it possible to define the types of special education *schools* on the basis of the level and orientation of the educational programs realized, kinds of activity towards rehabilitation, and the age of the pupils [4, pp. 80-92; 9].

The content of the programs included the treatment tasks and the requirements and recommendations of the doctors. The development of visual perception and spatial orientation was conducted by a teacher-defectologist (typhlopedagogue) at rehabilitation and general education classes, and, in addition, in all kinds of children’s activity, in the process of playing, and in everyday life. Other specialists of the pedagogical

profile held special classes in physiotherapy, rhythmic, formation of general hygiene habits, and overcoming speech defects [17].

Thus, over a period of three centuries, a differentiated system of education of children with various developmental pathologies, including visual disorders, was formed in West Europe and in Russia. There appeared syllabi, normative-legal documentation, acts and declarations, and the number of scholars in the field of special pedagogy and psychology has considerably grown. The specialists of several branches have identified and implemented in practical activity a complex medico-pedagogical system of education, the content and organization of which were defined proceeding from the etiology and level of severity of the primary developmental disorder, as well as its social consequences, secondary in their origin. The development of the system of special education was determined by the current change in the political life and worldview of the modern society, by the due understanding of the value of freedom and human rights, and the equality of all people [19].

In the early 21<sup>st</sup> century, Russia has passed on to a new level of economic development, which created the conditions for implementation of various models and forms of integrated learning in education institutions. This became possible also

due to the elaboration of the normative-legal basis which is made up of various international, federal, governmental, departmental and regional documents. Here is a list of some of them: "The Declaration on the Rights of Disabled Persons" (1975); The Constitution of the Russian Federation (Article 43) proclaiming the right of every person to education; the document of the government of the Russian Federation "On Adoption of the Typical Provision about the Special (Rehabilitation) Educational Institution for Students and Pupils with Developmental Disorders" (1997); the State program of the RF "Accessible Environment" (2011-2015), etc. The fruitful work of the scholars-practicians of the 20<sup>th</sup> century (A. L. Venger, A. G. Litvak, V. P. Ermakov, G. A. Yakunin, M. I. Zemtsova, L. I. Fil'chikova, L. I. Solntseva and others) was continued by the researchers-defectologists N. N. Malofeyev, V. Z. Kantor, M. E. Bernadskaya, T. A. Basilova, O. I. Kukshkina, E. L. Goncharova, L. G. Plastunova, G. A. Proglyadova, A. A. Lyubimov, T. P. Kudrina, and others.

A network of special preschool institutions of a mixed type with a certain rehabilitation bias has begun to function in the country. Thus, the group for partially sighted and blind children was organized in a special preschool institution of type III or IV. The main bias of such institutions, apart from the teaching (ped-

agogical) activity, is towards provision of medical treatment and restoration of vision and prevention from its going worse [6, pp. 45-54; 13, pp. 28-39].

Apart from special preschool education institutions, the government created a unified system of early pedagogical and medico-socio-pedagogical support. Early support services, lecotecs, game-bases support centers, counseling centers begin to function. After 15 years of activity, the system of early assistance to families caring for a child with disabilities has become a separate area of educational and social policy of the state.

At present, training or improvement of pedagogical competence of the parents, application of special pedagogical technologies in the process of family education, and realization of the content of a special individual learning program with the help of these technologies constitute the most effective form of organization of rehabilitation work with infants and children at an early age.

The existing domestic pedagogical experience includes the results of long-term scientific-research and practical activity of scholars and pedagogues-psychologists of various institutes and preschool institutions: Institute of Special Pedagogy of the Russian Academy of Sciences, Saint Petersburg Institute of Early Intervention, G. E. Sukhareva

Scientific-Practical Center for Psychological Health of Children and Teenagers, state budgetary institution of health protection “Center of Speech Pathology and Neurorehabilitation”. The suggested concept of early diagnostics and rehabilitation of various developmental disorders in children of the first years of life belongs to such scholars-practicians as N. M. Aksarina, M. I. Lisina, G. M. Lyamina, A. A. Katayeva, E. F. Rau, N. D. Shmatko, E. A. Strebeleva, E. R. Bayenskaya, N. N. Malofeyev, YU. A. Razenkova, O. G. Prikhod’ko, L. I. Solntseva, and others. Their studies show that timely diagnostics, creation of special developing conditions, application of rehabilitation-educational technologies in the process of the child’s education from the moment of discovery of a developmental disorder make it possible either to prevent or to mitigate the manifestation of secondary developmental disorders and to achieve the maximum level of psychological development and the degree of social integration for each child.

Currently, the content of the ABGEP (adapted basic general education program) for preschool and school age children with disabilities has been adopted – see the letter of the Ministry of Education and Science of the Russian Federation of March 11, 2016 No BK-452/07 “On Introduction of the FSES for pupils with disabilities”.

Under the law, the child with a disability, beginning with the age of 2 months, should have access to special educational programs and special developing conditions harmoniously supplementing the individual rehabilitation program. However, the exact procedure of providing and the amount of rehabilitation-pedagogical support for young children are not specified in the existing documents, and no guidelines for the methods of its implementation in various social institutions have been created. And the number of institutions which could realize early rehabilitation-pedagogical support is not sufficient in different regions of the country.

At present, even in the case of possession of a significant scientific-practical basis and work experience, specialists come across various professional barriers, which result in the loss of time and inability to provide timely high-quality psycho-pedagogical help for a “special” child and their parents. In the first place, the psycho-pedagogical specialists – teachers-defectologists (typhlopedagogues, surdopedagogues, oligophrenopedagogues, and logopedists), children’s and clinical psychologists – need to be acquainted with the modern potential of early complex medical rehabilitation of children with developmental disorders, to master the modern scientific clinical component of defectology and methodological

foundations of early rehabilitation-pedagogical support for the child, and to know the technologies of training and providing information for the parents.

The typhlopedagogues rendering rehabilitation-pedagogical support for children with visual impairments have no special diagnostic procedures for examination of infants with visual impairments, and for assessment of perception and skills of practical orientation in the surrounding reality, methods of psychological interaction with the social environment and the close adults. Only several guides for the methods of rehabilitation-pedagogical support by well-known typhlopedagogues can be recommended for practical application:

- “Development of visual perception in children with visual impairments in the process of object-based drawing” (L. I. Plaksina, 1991);
- “Special rehabilitation programs for preschoolers with severe visual disorders” (V. A. Feoktistova, 1995);
- “Kindergarten programs. Rehabilitation work in kindergarten (Type III-IV) (L. I. Plaksina, 1997);
- “Advice for parents how to bring up blind children at an early age” (L. I. Solntseva, S. M. Khorosh, 1983).

These guides have been written for the children at an early and preschool age and cannot be used with reference to rehabilitation work

(diagnostics and training) with infants. Practical teachers have to use the methods designed for other categories of children, for example, for children with speech disorders or for children with intellectual disability.

These difficulties are caused by the fact that theory and practice do not provide the schemes and algorithms of differentiated rehabilitation-pedagogical support for infants with various etiology and degree of manifestation of primary developmental disorders, and specifically multiple deviations, that there are no mechanisms of interdepartmental interaction between medical and psycho-pedagogical services, that there is no definition of the terminology and the boundaries between the professional activity of each specialist working on physical and psychological rehabilitation of the infants' health and the problems of development as such.

The current situation needs a complex study of special educational needs and the dynamics and specificity of psychological development of infants with visual pathologies of various etiology and severity. To this end, it is necessary to work out psycho-pedagogical diagnostic procedures and to specify the equipment of the procedures of psycho-pedagogical examination. Summing up clinical data about the etiology, course and prediction of visual impairments in children may

allow the specialists to predict possible variants of psychological development, to differentiate the content of individual educational programs, to create developing teaching aids and playing tools, and to figure out efficient forms, methods and techniques of teaching children at the early stages of ontogenesis.

The solution to these urgent issues of typhlopедagogy should be found in the course of realization of modern scientific studies.

### Conclusions

1. The development of differentiated content of individual educational programs in the state system of preschool education becomes a new area in the development of the system of special education and state support for children with disabilities.

2. We can make the system of early medico-psycho-pedagogical support for children with visual disorders accessible and more flexible via studying real health and educational needs of infants and designing modern diagnostic and methodological guides for variable pedagogical practices.

3. So, today, professional training and retraining of typhlopедagogues for the work with children at an early age, readiness to become a member of an interdisciplinary team in various social institutes realizing complex rehabilitation and restoration of the health of infants occupy an exceptionally significant place. Typhlopедagogues and other spe-

cialists of the psycho-pedagogical profile should have a good command of the modern scientific and methodological foundations of special pedagogy and psychology, as well as adjacent fields of science (pediatrics, ophthalmology, neurology), which would allow realizing the comprehensive and differentiated approach in the organization of special psycho-pedagogical support for the families of the blind and partially sighted children.

### References

1. Badya, L. V. Istoricheskiy opyt sotsial'noy raboty v Rossii / pod obshch. red. L. V. Badya. — M. : TsSP RAO, 1994.
2. Bazhenova, O. V. Diagnostika psikhicheskogo razvitiya detey pervogo goda zhizni / O. V. Bazhenova. — M. : Izd-vo MGU, 1986.
3. Baranova, N. Yu. Programmy rannego vmeshatel'stva dlya detey s mnozhestvennymi narusheniyami / N. Yu. Baranova // Net «neobuchaemykh detey»: kniga o rannem vmeshatel'stve / N. Yu. Baranova ; pod red. E. V. Kozhevnikovoy, E. V. Klochkovoy. — SPb., 2007.
4. Venger, A. A. Otbor detey v spetsial'nye doskol'nye uchrezhdeniya / A. A. Venger, G. L. Vygodskaya, E. I. Leongard — M. : Prosveshchenie, 1972.
5. Guseva, M. R. Obuchenie i vospitanie doskol'nikov s narusheniyami zreniya / M. R. Guseva, V. G. Dmitriev, L. I. Plaksina. — M. : Prosveshchenie, 1978.
6. Ermakov, V. P. Osnovy tiflopedagogiki. Razvitie, obuchenie i vospitanie detey s narusheniyami zreniya / V. P. Ermakov, G. A. Yakunin. — M., 2000.
7. Zemtsova, M. I. Osobennosti zritel'nogo vospriyatiya pri glubokom narushenii zreniya u detey / M. I. Zemtsova // Spets. shkola / pod red. A. I. D'yachkova. — M. : Prosveshchenie, 1967. — Vyp. 1 (121).
8. Litvak, A. G. Psikhologiya slepykh i slabovidyashchikh : ucheb. posobie dlya

- stud. vyssh. ped. ucheb. zavedeniy / A. G. Litvak ; RGPU im. A. I. Gertsena. — SPb. : RGPU im. A. I. Gertsena, 1998.
9. Malofeev, H. H. Stanovlenie i razvitie gosudarstvennoy sistemy spetsial'nogo obrazovaniya v Rossii : avtoref. dis. ... d-ra ped. nauk v forme nauchnogo doklada / Malofeev N. N. — M., 1996.
10. Malofeev, N. N. Rannyaya pomoshch' — prioritet sovremennoy korrektsionnoy pedagogiki: iz opyta raboty Instituta korrektsionnoy pedagogiki Rossiyskoy akademii obrazovaniya / N. N. Malofeev // Defektologiya. — 2003. — № 4. — S. 7—11.
11. Morova, N. S. Osnovy sotsial'no-pedagogicheskoy reabilitatsii detey s ograni-chennymi vozmozhnostyami : dis. ... d-ra ped. nauk / Morova N. S. — M., 1998.
12. Mudrik, A. B. Sotsializatsiya i «smutnoe vremya» / A. B. Mudrik. — M. : Znanie, 1991.
13. Nazarova, N. M. Zakonomernosti razvitiya integratsii kak sotsial'nogo i pedagogicheskogo fenomena / N. M. Nazarova // Kompensiruyushchee obuchenie: opyt, problemy, perspektivy. — M., 1996. — Ch. 1.
14. Neroev, V. V. Obscherossiyskaya obshchestvennaya organizatsiya. Assotsiatsiya vrachey-oftalmologov [Elektronnyy resurs] / V. V. Neroev. — Elektron. dan. — M. : Moskovskiy NII glaznykh bolezney im. Gel'mgol'tsa, 2013. — Rezhim dostupa: <http://avo-portal.ru/events/reports>.
15. Pal'chik, A. B. Problemy invalidnosti detey vsledstvie perinatal'nykh povrezhdeniy nervnoy sistemy razlichnogo geneza / A. B. Pal'chik, A. A. Svintsov, S. V. Pavlova // Materialy 3-y mezhreg. nauch.-prakt. konf. «Mediko-sotsial'naya ekspertiza i reabilitatsiya v pediatrii». — M. ; SPb., 2005.
16. Rossiyskaya oftalmologiya onlayn [Elektronnyy resurs] / red. Ivanov. — Elektron. dan. — M. : elektronnoe informatsionnoe izdanie (FS77-38688), 2010. — Rezhim dostupa: <http://www.eyepress.ru/>
17. Solntseva, L. I. Sovety roditelyam po vospitaniyu slepykh detey rannego vozrasta / L. I. Solntseva, S. M. Khorosh. — M. : O-vo slepykh, 1983.
18. Strebeleva, E. A. Spetsial'naya doshkol'naya pedagogika / pod red. E. A. Strebelevoy, A. L. Venger, E. A. Ekzhanova. — M. : Akademiya, 2002.
19. Feoktistova, V. A. Khrestomatiya po istorii tiflopedagogiki : ucheb. posobie dlya studentov ped. in-tov po spets. № 2111 «Defektologiya» / sost. V. A. Feoktistova. — 2-e izd., ispr. — M. : Prosveshchenie, 1987.

# THEORY AND PRACTICE OF PEDAGOGY AND PSYCHOLOGY

---

UDK 376.564  
BBK 4424.771  
GSNTI 15.81.21; 14.29.01  
Code VAK 19.00.10; 19.00.07

**N. N. Vasyagina, V. I. Kosmakova**  
Ekaterinburg, Russia

## PECULIARITIES OF NEGATIVE BEHAVIORAL RESPONSES IN CHILDREN AT CHILDREN'S HOMES

**Abstract.** Over the last decade, the approaches to the education of children in public care have undergone significant transformation. Despite the attempts to create the conditions in children's homes that promote maximum socialization and integration of the child in society, the pupils of children's homes still have undesirable, socially disapproved forms of behavior, a special place among which is occupied by negative behavioral responses. This circumstance demonstrates the need for a detailed analysis of the indicated phenomenon.

The purpose of this article is to carry out a theoretical analysis of the phenomenology and an empirical study of the characteristics of negative behavioral responses in pupils at a children's home. The study is based on the ideas of domestic and foreign experts about undesirable behavior that is contrary to public interests, but does not extend beyond the "behavioral norm" (N. N. Vasyagina, M. I. Enikeyev, V. P. Zinchenko, S. L. Kolosova, T. P. Kleynikova, D. Konnor, T. G. Rumyantseva, M. G. Taychinov, I. A. Furmanov, D. V. Khorsand, R. Baron, C. Venar, P. Kerig, D. Richardson, etc.), and about the peculiarities of behavior of pupils of children's homes (N. N. Avdeyeva, R. J. Mukhamedrakhimov, A. G. Ruzskaya, N. N. Tolstykh, L. M. Tsaregorodtseva, etc.)

As a result of the study, the authors specify the content of the concept of "negative behavioral responses"; work out a scheme of observation of negative behavioral responses of the child; figure out that all the pupils of children's homes participating in the experiment demonstrate negative behavioral responses; single out groups of children on the basis of orientation of negative behavioral responses (towards themselves, the surrounding objects, adults, or other children) with a description of characteristic negative behav-



ioral responses; carry out an analysis of the factors of negative behavioral responses in pupils at a children's home. The research materials can be used in the work of specialists of various profiles with pupils at children's homes.

**Keywords:** negative behavioral responses; children's homes; children's behavior; children's response orientation; socially disapproved behavior; social interaction; socialization of children.

**About the author:** Vasyagina Nataliya Nikolaevna, Doctor of Psychology, Professor.

*Place of employment:* Head of Department of Psychology of Education, Institute of psychology, Ural State Pedagogical University, Ekaterinburg, Russia.

*E-mail:* vasyagina\_n@mail.ru.

**About the author:** Kosmakova Vera Igorevna, Candidate of Psychology Applicant.

*Place of employment:* Department of Psychology of Education, Institute of psychology, Ural State Pedagogical University, Ekaterinburg, Russia.

*E-mail:* vera\_sweety@mail.ru.

Over the last decade, as a result of the development of the state-maintained program of provision of living conditions for orphans and children left without parental care, the number of children in children's homes has radically decreased, and the attitudes to the education of children in state care have been significantly transformed. Despite the attempts to create the conditions in children's homes that promote maximum socialization and integration of the child in society, the pupils of children's homes still have undesirable, socially disapproved forms of behavior, a special place among which is occupied by negative behavioral responses. Describing behavioral peculiarities of the pupils of children's homes, special-

ists mention the presence of such undesirable behavioral manifestations as sucking on one's finger, tongue, lip, or clothes; plucking and twisting hairs; biting, scratching oneself and others; expression of rudeness, cruelty, obtrusiveness, motor disinhibition, inhibition, and sluggishness in putting on clothes; lack of initiative, passive performance of the adults' instructions; stereotyped behavior, etc. Such negative behavioral responses may be observed in all children beginning with infancy regardless of the conditions of living. And in the process of socialization of the child brought up in the family the given negative behavioral responses are substituted by new socially approved forms of behavior. Never-

theless, in children brought up in children's homes, the above mentioned and some other negative behavioral responses get reinforced. The works highlighting the peculiarities of the pupils' behavior at children's homes (V. O. Anikina, G. I. Gaysina, V. I. Oslon, N. L. Pelyakina, O. I. Pal'mov, K. V. Soloyed, A. B. Kholmogorova, etc.) convincingly prove that the negative behavioral responses present obstacles not only for the performance of daily routine measures of the process of teaching and learning but also for the future adaptation of the child in a foster family [5; 6]. In view of this, there arises the need for a detailed analysis of the phenomenon indicated, which, in its turn, has suggested the aim of the given article: to carry out a theoretical analysis of the phenomenology and an empirical study of the characteristics of negative behavioral responses in pupils at a children's home.

Home and foreign studies report about the specific nature of psychological development of the pupils of a children's home in comparison to the peers brought up in a family. Thus, the works by M. I. Lisina and S. Yu. Meshcheryakova note that in the process of the child's maturity, failure to meet the needs for communication with close adults takes the form of aggressive behavior of the child towards all adults [9; 10]. M. O. Proselkova mentions abnor-

mal emotional responses of children to praise and blame manifested both in the form of passivity or indifference and irritation or aggressiveness. Disorders of social interaction between the pupils of a children's home and their peers, absence of stable attachments, behavioral deviations and self-control disorders in the pupils of children's homes have been described in the works by N. N. Avdeyeva, R. Zh. Mukhamedra-khimov, A. G. Ruzskaya, N. N. Tolstykh, L. M. Tsaregorodtseva [4; 11; 12; 13]. L. Fisher, R. Johnson, and K. Browne speak about overfriendliness, unfriendliness, uncontrollable (disinhibited) behavior, stereotyped forms of behavior (twisting body, arms, etc), misbehavior while eating or sleeping in the children brought up outside the family.

All the above mentioned patterns of behavior of children can be regarded within the framework of behavior that does not extend beyond the "behavioral norm" but is in fact "problematic". At present, in connection with a great number of studies regarding "problematic" behavior from different angles, there appears a need to use the notion "negative behavioral response" to identify peculiar features of behavior of the pupils of children's homes.

Analysis of the works of home and foreign authors allows singling out a behavioral pattern which can be classified as *undesirable, contra-*

ry to social interests or negative, but still remaining within the frames of “behavioral norm”. Aggressive behavior studied in psychology by both home and foreign researchers (M. I. Enikeyev, V. P. Zinchenko, S. L. Kolosova, D. Konnor, T. G. Rumyantseva, I. A. Furmanov, D. V. Khor sand, R. Baron, C. Venar, P. Kerig, D. Richardson, etc.) can be referred to such kind of behavior [2; 3; 7; 8; 14; 15; 16; 17]. Conflict behavior studied by such home and foreign authors as V. V. Kovalev, M. I. Lisina, A. N. Lichko, T. D. Mart sinkovskaya, N. N. Vasyagina, M. G. Taychinov, D. B. El’konin, R. Campbell, A. Maslow, Z. Freud, K. Horney and others, is also undesirable [9]. The issues of negativism and obstinacy in behavior are broadly represented in the works by A. I. Barkan, L. I. Bozhovich, V. E. Kagan, T. P. Kleynikova, N. N. Vasyagina, G. A. Tsukerman, A. A. Shav yrina, T. B. Brazelton, E. Keller, G. Salmon and others [17].

By way of analysis of the notions “behavior”, “norm”, “deviating behavior”, “aggressive behavior”, “conflict behavior”. “negativism”, and “obstinacy” we have worked out the term “negative behavioral response” under which, drawing on the point of view of M. Ya. Basov, V. P. Zinchenko, B. G. Meshcheryakov, N. N. Vasyagina, and A. A. Shav yrina, we understand actions aimed at doing harm to oneself or an object in the

environment (either animate or inanimate) [1; 10].

The question of the methods is one of the key issues of the study of negative behavioral responses in children. In foreign studies, the assessment of behavior of children at an early age is performed in the situation of diagnostic testing of the cognitive sphere using the Bayley Scales of Infant and Toddler Development which make it possible to record the presence or absence of negative behavioral responses in a certain situation. The Russian specialists N. L. Galiguzova, E. O. Smirnova, T. V. Ermolova and S. Yu. Meshcheryakova suggested the method “Diagnostics of the Psychological Development from Birth to 3 Years of Age” which allows defining some peculiarities of behavior of the child of the given age. Studying the problem of children’s behavior as one of the most significant challenges, N. M. Platonova worked out a model chart of observation of the child’s behavior which helps to measure the level of aggressiveness of the child, but such indicator as “aggressiveness towards animals”, included in the chart, prevents it from being used under the conditions of a children’s home. In general, the psycho-diagnostic methods described above allow stating certain negative behavioral responses in children brought up at a children’s home, but the existing information is not enough to design a

model of prevention of negative behavioral responses, which, in its turn, leads to the necessity to create psycho-diagnostic tools for detection of negative behavioral responses.

Based on the analysis of home and foreign literature devoted to the description of specificity of negative behavioral responses in children (S. L. Kolosova, N. M. Platónova, E. L. Frukht, O. V. Khukhlayeva, R. Baron, C. Venar, P. Kerig, D. Konnor, D. Richardson, A. Freud, etc.) and the methods of psycho-diagnostic investigation of negative behavioral responses (N. L. Galiguzova, E. O. Smirnova, T. V. Ermolova, S. Yu. Meshcheryakova, N. M. Platonova, E. A. Strebeleva, N. Bailey и др.), we have worked work out a “*Scheme of Observation of Negative Behavioral Responses of the Child*”. The suggested scheme allows the experimenter not only to register the fact of emergence of negative behavioral responses but also to describe various situations in which the given response is detected (limitation of the child’s freedom of action; prohibition to do something issued by an adult, taking meals, the process of dressing and undressing, the situation when other children are present in the group, common game with other children, the situation when other children show negative behavioral responses to the actions of the child, the situation of goal achievement by the child, the situa-

tion of psycho-physical fatigue in various life situations, “failure situation”). The negative behavioral response is registered with its simultaneous classification as belonging to one of the two categories: verbal negative behavioral responses and nonverbal negative behavioral responses.

Thus, the main method of research of negative behavioral responses in pupils of children’s homes was observation on the basis of the “*Scheme of Observation of Negative Behavioral Responses of the Child*”. The data were recorded during the period of 30 days. The daily observation of the negative behavioral responses of the children included the period from waking up in the morning till putting them to sleep after lunch, and from waking up from the daytime sleep till putting them to bed at night, including walks.

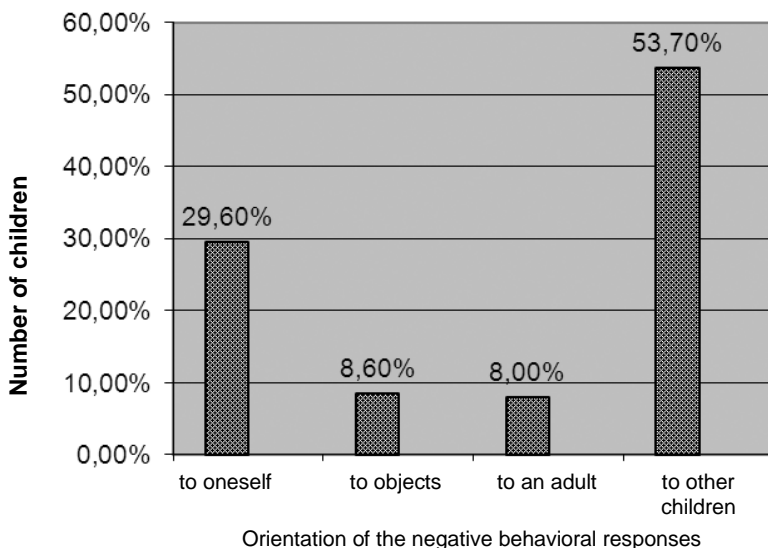
The study was carried out on the base of the state public institution of health protection of Sverdlovsk Oblast “Specialized Children’s Home”. The sample included 162 pupils of the children’s home aged from 2 to 3 years.

The analysis of the experiment results has revealed the presence of negative behavioral responses in all 162 pupils of the children’s home. The negative behavioral responses can be classified according to orientation, degree of manifestation in the situations under study (high –

negative behavioral responses are detected in 6-9 situations under study; moderate – negative behavioral responses are detected in 3-6 situations under study; low – negative behavioral responses are detected in 1-3 situations under study),

and frequency of separate acts of manifestation of different kinds of responses (one-time – less than two acts per minute; manifold – 2 or more acts per minute).

The data obtained are reflected in the diagram in Fig.1.



**Figure 1.** Groups of children’s home pupils depending on the orientation of the negative behavioral responses

It is seen from the data presented in the diagram, that children whose negative behavioral responses are oriented towards other children (53.7 % of the sample) and towards themselves (29.6 % of the sample) prevail among the children brought up at the children’s home. The group of children whose negative behavioral responses are oriented towards an adult person is the smallest one (8.0 %).

Let us dwell on the results obtained in more detail.

48 children of the group of those tested (29.6 % of the sample) have demonstrated negative behavioral responses oriented **towards themselves**. In the *situations under study* the children show the following nonverbal negative behavioral responses: rocking forward and backward while sitting on a chair; suck-

ing and biting fingers and clasped fists; jerking head bent forward; stereotyped turning of wrists; hitting head with the hand; banging one's head on the table or plate; hitting one's head and other parts of the body with a spoon; tugging at one's own hair; recurrent jumps on two legs around the room, etc. The given negative behavioral responses are accompanied by verbal negative behavioral responses: shouting; non-speech sounds resembling growling. The negative behavioral responses described above may be manifested recurrently.

14 children of the group of those tested (8.6 % of the sample) have demonstrated negative behavioral responses oriented *towards surrounding objects*. In the situations under study the children show the following nonverbal negative behavioral responses: overturning the plate with food; overturning the cup; hitting the table with a palm or fist; sliding from the chair and overturning it; biting at the table or chair; spreading food on the table and patting it; kicking the table leg; jumping on the chair, throwing playing and other objects (toys, tooth brush, didactic cards, etc.); kicking playing objects, pieces of furniture, banging the doors of toy furniture; throwing objects off the table; biting playing and other ob-

jects; stripping off clothes or hat from themselves; taking off shoes; demonstrative sitting on the floor and refusing to dress; seizing another child's toy and giving it immediately up. The given negative behavioral responses are accompanied by shouting; laughing or crying. The verbal negative behavioral responses are also represented by words – e.g. “*day*”, “*ne budu*”, “*ne khochu*”, “*net*”, “*uydi*”.

13 children of the group of those tested (8.0 % of the sample) have demonstrated negative behavioral responses oriented *towards an adult person*. In the situations under study the children show the following nonverbal negative behavioral responses: hitting the clothes of a staff member with a palm or fist; tugging at the clothes of a staff member (sleeve, gown pocket, etc.); throwing playing and other objects (toys, tooth brush, clothes, didactic cards, etc.) at a staff member; rocking the chair of a staff member standing beside; tugging at a staff member's hair; etc.

The given negative behavioral responses are accompanied by shouting and laughing. The verbal negative behavioral responses are also represented by words – e.g. “*day*”, “*ne budu*”, “*ne khochu*”, “*net*”, “*uydi*”, “*pusti*”.

**Table 1.** Results of observation of negative behavioral responses in the pupils of a children's home

Orientation of negative behavioral responses	Number of children (% of the total number of children under experiment brought up at the children's home)	Degree of manifestation of negative behavioral responses in situations under study	Number of children (% of the number of children with the given orientation)	Frequency of acts of manifestation of negative behavioral responses	Number of children (% of the number of children with the given degree of manifestation)
Towards oneself	48 (29.6 %)	High	30 (62.5 %)	< 2	0.0 %
				> 2	30 (100 %)
		Moderate	12 (25 %)	< 2	0.0 %
				> 2	12 (100 %)
		Low	6 (12.5 %)	< 2	0.0 %
				> 2	6 (100 %)
Towards surrounding objects	14 (8.6 %)	High	6 (42.9 %)	< 2	2 (33.3 %)
				> 2	4 (66.7 %)
		Moderate	7 (50 %)	< 2	3 (42.9 %)
				> 2	4 (57.1 %)
		Low	1 (7.1 %)	< 2	0.0 %
				> 2	1 (100 %)
Towards an adult	13 (8.0 %)	High	6 (46.1 %)	< 2	4 (66.7 %)
				> 2	2(33.3 %)
		Moderate	2 (15.4 %)	< 2	2(100 %)
				> 2	0.0 %
		Low	5 (38.5 %)	< 2	5 (100 %)
				> 2	0.0 %
Towards other children	87 (53.7 %)	High	49 (56.3 %)	< 2	12 (24.5 %)
				> 2	37 (75.5 %)
		Moderate	17 (19.5 %)	< 2	4 (23.5 %)
				> 2	13 (76.5 %)
		Low	21(24.1 %)	< 2	3 (14.3 %)
				> 2	18 (85.7 %)

87 children of the group of those tested (53.7 % of the sample) have demonstrated negative behavioral responses oriented *towards other children*. In the situations under study the children show the following nonverbal negative behavioral responses: pushing the plate of another child; hitting the head or body of the child next to them with a

spoon or hand; putting the spoon in the plate of another child and throwing the food about; tugging at another child's hair; kicking the chair of the child sitting next to them, throwing playing and other objects (toys, tooth brush, clothes, shoes, didactic cards, etc.) at other children; seizing up various objects of other children; biting at clothes

of other children; biting shoulders, arms, back, cheeks of other children; hair pulling; patting on the back; kicking; grabbing playing objects; tugging at another child's ears; putting a finger in another child's eyes; pushing another child aside (e.g. in the situation when specialists come to the group to take the child to a medical procedure); pushing another child off a chair or sofa; brushing a toy (toy car, bike, swings) off the table; pulling another child off a chair or sofa; pulling a playing object (toy car, bike, swings) off a table.

The given negative behavioral responses may be accompanied by shouting and laughing, or, on the contrary, may be isolated. The verbal negative behavioral responses are also represented by words – e.g. “*uydi*”, “*syad*”, “*polozhi*”, «*moye*», “*ne trogay*”, etc. Moreover, the abovementioned negative behavioral responses can be demonstrated once or recurrently. The quantitative data obtained are presented in table 1.

Our analysis of the data obtained shows that in the groups of children, whose negative behavioral responses are oriented towards themselves, surrounding objects and other children, the frequency of manifestation of response acts is 2 or more times per minute, irrespective of the degree of response manifestation. And in the group of children, whose negative behavioral

responses are oriented towards an adult, the frequency of 2 and less times per minute prevails, irrespective of the degree of response manifestation.

It has been revealed that in the groups of children, whose negative behavioral responses are oriented towards themselves, towards an adult, and towards other children, the majority of children have the high degree of manifestation of negative behavioral responses in the situations under study. The moderate degree of manifestation of negative behavioral responses prevails in the children whose responses are oriented towards the surrounding objects.

One of the tasks of our research was to figure out the factors triggering the negative behavioral responses of the high and moderate degree of manifestation. Having compared the data about the kind of orientation and the factor and the amount of time of staying at the children's home, we can state that 87 children (53.7 %) taking part in the experiment have been at the children's home for less than 6 months and have the high and moderate degree of manifestation of negative behavioral responses oriented towards the surrounding objects, towards an adult, and towards other children. And the most numerous subgroup is made up of the children whose parents (or persons substituting them) have decided to leave the



baby at the institution for some time (48 children), and who have the dominant orientation of negative behavioral responses towards other children (36 children). What is more, all children of the sample, whose negative behavioral responses are oriented towards an adult, have come to the children's home as a result of a temporary refusal of some parents (or persons substituting them) from providing parental care.

In view of this, it is necessary to point out that the families in which parents (or persons substituting them) have made a decision to stop providing parental care for some time, under the current legislation, are not recognized dysfunctional, and in the majority of cases are not registered by the guardianship and custody bodies. As a result, the child who has been brought up in a full family since birth finds themselves in a stressful psycho-traumatic situation when all traditional "family rituals" get ruined. On enrollment to the children's home, the child has to adjust to the new social conditions, rules and norms without consideration of their individual preferences, which, in its turn, may bring forth negative behavioral responses.

The analysis of the factors of negative behavioral responses in the pupils at the children's home has shown that all 48 children with the dominant orientation of negative behavioral responses towards them-

selves have stayed in the children's home since their transfer from the maternity ward and have severe genetic and neurological diseases in their anamneses. In this case, the negative behavioral responses are secondary and tertiary disabilities in the structure of their disorder.

Our study allows stating the presence of negative behavioral responses in the pupils of children's homes which can be oriented towards oneself, towards the surrounding objects, towards an adult, and towards other children.

The frequency of occurrence of negative behavioral responses of different orientation is varied. In most cases, we come across negative behavioral responses oriented towards other children (53.7 %) and towards oneself (29.6 %).

Our analysis of the factors associated with the manifestation of negative behavioral responses of different orientation confirms the fact that temporary refusal of the parents (or persons substituting them) to provide parental care for the child is the most significant cause of negative behavioral responses oriented towards other people, whereas the negative behavioral responses towards oneself are detected in the pupils who have been living in the children's home since birth and have neurological and genetic disorders in their anamneses.

The research materials can be used by specialists of various pro-

files in their work with pupils at children's homes. The results of the study can be taken into consideration while designing a model for prevention of negative behavioral responses in the pupils of a children's home.

#### References

1. Basov, M. Ya. Izbrannye psikhologicheskie proizvedeniya / M. Ya. Basov. — M. : Pedagogika, 1975. — 432 s.
2. Beron, R. Agressiya / R. Beron, D. Richardson ; per. s angl. S. Melenevskoy, D. Viktorovoy, S. Shpak ; red. V. Usmanovoy. — SPb. : Piter, 2000. — 352 s.
3. Vasyagina, N. N. Vliyanie sotsial'nykh emotsiy na kharakter obshcheniya doskol'nikov s ogranichennymi vozmozhnostyami zdorov'ya so sverstnikami [Elektronnyy resurs] / N. N. Vasyagina // Sovremennaya psikhologiya obrazovaniya: problemy i perspektivy razvitiya : sb. materialov Vseros. nauch.-prakt. konf. s mezhdunar. uchastiem (Ekaterinburg, Ural. gos. ped. un-t, 2017). — Ekaterinburg, 2017. S. 116—119.
4. Vozrastnye osobennosti psikhicheskogo razvitiya detey : sb. nauch. trudov / pod red. I. V. Dubrovinoy, M. I. Lisinoy. — M., 1982. — 164 s.
5. Galiguzova, L. I. Psikhologicheskie aspekty vospitaniya detey v domakh rebenka i detskikh domakh / L. I. Galiguzova // Voprosy psikhologii. — 1990. — № 5. — S. 17—25.
6. Diagnostika psikhicheskogo razvitiya detey ot rozhdeniya do 3 let / E. O. Smirnova, L. N. Galiguzova, T. V. Ermolova, S. Yu. Meshcheryakova. — SPb. : Detstvopress, 2005. — 144 s.
7. Kolosova, S. L. Detskaya agressiya / S. L. Kolosova. — SPb. : Piter, 2004. — 224 s.
8. Konnor, D. Agressiya i antisotsial'noe povedenie u detey i podrostkov / D. Konnor. — SPb. : Rech', 2005. — 288 s.
9. Lisina, M. I. Formirovanie lichnosti rebenka v obshchenii / M. I. Lisina. — SPb. : Piter, 2009. — 320 s.
10. Meshcheryakov, B. G. Bol'shoy psikhologicheskiy slovar' / B. G. Meshcheryakov, V. P. Zinchenko. — M. : AST, 2009. — 811 s.
11. Mukhamedrakhimov, R. Zh. Vliyanie opyta zhizni v zakrytom uchrezhdenii na posleduyushchee razvitie rebenka / R. Zh. Mukhamedrakhimov, O. I. Pal'mov, I. V. Nikiforova, K. Groark // Defektologiya. — 2006. — № 1. — S. 21—24.
12. Mukhamedrakhimov, R. Zh. Mat' i mladenets: psikhologicheskoe vzaimodeystvie / R. Zh. Mukhamedrakhimov. — SPb. : Izd-vo S.-Peterb. un-ta, 2001. — 288 s.
13. Filatova, I. A. Model' kompleksnogo soprovozhdeniya detey s tyazhelymi mnozhestvennymi narusheniyami razvitiya, v tom chisle s rasstroystvami avtisticheskogo spektra / I. A. Filatova, E. V. Karakulova ; pod red. E. E. Laykovskoy ; Ural. gos. ped. un-t. — Ekaterinburg, 2017.
14. Furmanov, I. A. Psikhologiya deprivatsionnogo rebenka / I. A. Furmanova, N. V. Furmanova. — M. : Vldos, 2004. — 319 s.
15. Furmanov, I. A. Psikhologiya detey s narusheniyami povedeniya / I. A. Furmanov. — SPb. : Vldos-Press, 2012. — 352 s.
16. Baron, R. The control of human aggression. A strategy based on incompatible responses / R. Baron // Aggression: Theoretical and empirical reviews. — 1983.
17. Brazelton, T. Ann. WAIMN Conferens on the Mental Health of Infant & Parents / T. Brazelton. — Latvia, 1994.

UDK 372.367  
BBK 4410.051  
GSNTI 14.23.05  
Code VAK 13.00.01

**E. V. Korotayeva, N. V. Serebryakova**  
Ekaterinburg, Russia

## **SOCIO-MORAL DEVELOPMENT OF PRESCHOOL CHILDREN: SOME ASPECTS OF THEORY AND PRACTICE**

**Abstract.** The article considers the issues of socio-moral education and development of preschool children. A theoretical survey of the modern state of the given area of investigation made it possible to make a conclusion that today the communitary approach to moral education focusing on the ideas of social order and facilitating the development of social ties and formation of collectivism becomes the dominant one. This purpose is reflected in the modern normative documents: the Federal Law “On Education in the Russian Federation”, “The Concept of Spiritual-Moral Development and Education of the Personality of a Citizen of Russia”, and federal state educational standards. Analysis of theoretical and practice-oriented research in the given area shows that the word combination “moral education” is gradually replaced today by “socio-moral education” and “socio-moral development”. The same tendency is found in preschool pedagogy as well (see the works of such authors as L. V. Abramova, R. S. Bure, S. M. Zyryanova, N. A. Karateva, G. M. Kiseleva, I. F. Sleptsova, etc.). It is the study of socio-moral ideas of preschool children that the majority of modern diagnostic procedures are aimed at: to explain the actions children perform and their relations with each other and adults, to assess these actions (i.e. to correlate the situation with the moral norm). The corresponding study of senior preschool children showed that the respondents involved in the discussion of the children’s actions actively and interestedly, because the situations under analysis were relative to their own experience. Correlation of the situation with a certain moral norm appeared to be more difficult for the children, but it is this component that ensures the communitary orientation of socio-moral development of the growing generation. In general, this fact does not only demonstrate the ideas of children and their acquired rules of behavior in a micro-society, but also gives ground for more precise planning of the work of the tutors and parents in the aspect of socio-moral education.

**Keywords:** socio-moral education; socio-moral development; morality; preschool children; communitary approach; socialization of children.

**About the author:** Korotayeva Evgeniya Vladislavovna, Doctor of Pedagogy, Professor.

*Place of employment:* Head of Department of Pedagogy and Psychology of Childhood, Institute of Pedagogy and Psychology of Childhood, Ural State Pedagogical University, Ekaterinburg, Russia.

*E-mail:* e.v.korotaeva@yandex.ru.

**About the author:** Serebryakova Natal'ya Vladimirovna.

*Place of employment:* Senior Lecturer of Department of Pedagogy and Psychology of Childhood, Institute of Pedagogy and Psychology of Childhood, Ural State Pedagogical University, Ekaterinburg, Russia.

*E-mail:* nt1968@inbox.ru.

The issues of moral education of the growing generation have always been of prime importance for pedagogy. Such outstanding pedagogues of the past as J. A. Comenius, J. J. Rousseau, K. D. Ushinskiy, L. N. Tolstoy, V. A. Sukhomlinskiy and many others addressed the problems of formation of morals and morality in this or that way.

Four traditions can be identified in the process of understanding of the foundations of moral education: paternalist (presupposing respect of the older people as an obligatory component); religious-spiritual (based on the authority of faith and church); enlightenment (including active acquisition of scientific knowledge subject to the judgment of reason); and communitary (proceeding from the idea of social order that facilitates the development of social ties and formation of collectivism). The significant social change that took place in the late 20<sup>th</sup> – early 21<sup>st</sup> centuries (globali-

zation, mass informatization, openness, disintegration of the old ideology, etc.) has lead to the situation in which the communitary approach dominates moral education.

This is quite saliently suggested even by the terms and notions most frequently used in pedagogical theory and practice. The Federal Law “On Education in the Russian Federation” (2012) focuses on the moral-spiritual development, perfection, moral-spiritual culture and the corresponding values [13]. “The Concept of Spiritual-Moral Development and Education of the Personality of a Citizen of Russia” adopted in 2009 is sure to have influenced the situation as well [4].

Today, the word combination “moral education” is gradually replaced by “socio-moral education” and “socio-moral development”. Such substitution stresses the idea that morality is understood not only as a complex of norms determining the behavior of one person but as a

certain mechanism regulating the life of a concrete society, as well as the interaction between individual and groups of individuals and their attitude to social phenomena and life as a whole (A. V. Arkhangel'skiy, O. G. Drobnitskiy, E. V. Korotayeva, I. S. Mar'yenko, P. L. Troshin, I. F. Kharlamov, D. I. Fel'dshcheyn, etc.).

The same tendency is found in preschool pedagogy as well (see the works of such authors as R. S. Bure, N. E. Veraksa, A. G. Gogoberidze, L. V. Kolomyichenko, V. G. Nechayeva, I. F. Sleptsova, etc.). Thus, the federal state requirements to the structure of the basic general education program of preschool education (2010) [3] outlined the educational area "Socialization" which had a fuzzy name and was placed fourth in the list of ten educational areas. But the Federal State Educational Standards for preschool education (2013) already mark socio-communicative development as a priority direction heading the list of five educational areas. And the content of this area is revealed through moral and spiritual values, development of social and emotional intellect, emotional responsiveness, empathy, formation of respect and the feeling of belonging to one's family and the community of children and adults in the preschool institution [13].

The given approach cannot have failed to be reflected in the corre-

sponding programs designed for practical preschool education. For example, "The Typical Program of Education and Upbringing in the Kindergarten" (edited by M. A. Vasil'yeva) had a strong ideological bias, and the section devoted to moral education of preschool children was too laconic and did not match the real facts of social life. Whereas the model program "From Birth till School Age" [7] gives a clear-cut structure of the working area of the socio-communicative development of the preschool child comprising:

- acquisition of the norms and values accepted in society, education of moral and spiritual properties of the child, formation of the skills of assessment of their own actions and those of their peers;
- formation of readiness for joint activity, development of the skills to negotiate and resolve conflicts with the peers independently;
- development of emotional responsiveness, empathy, respect and kind attitude towards the surrounding people;
- formation of the image of one's own "Ego" in the family, in the institution, in the children's and adult communities, etc.

It is worthy of note that the model educational programs for preschool education do not use the word combination "moral-spiritual", but contain an orientation towards "socio-moral development

and education” (L. V. Abramova, R. S. Bure, S. M. Zyryanova, N. A. Karatayeva, G. M. Kiseleva, I. F. Sleptsova, etc.). It is not by chance that the diagnostic procedures that allow measuring the level of moral development of the preschooler are based on attempts to understand the situations of communication and the contacts with peers and adults. It especially stresses the socio-moral orientation of diagnostics.

The children are offered four situations (for example: *Petya and Vova were playing together and broke a nice expensive toy. Father*

*came and asked, “Who has broken the toy?” Then Petya said ... What did Petya say? Why? What did Petya do? Why?* [11, pp. 59-61]. Each situation has a problem of choice, as well as an urging both to explain the action of a concrete child and to sum up the situation on the whole.

Drawing on the given diagnostic procedure of G. A. Uruntayeva and Yu. A. Afon’kina, we carried out a corresponding study of the moral concepts of senior preschool children in one of the kindergartens of Ekaterinburg.

**Table 1.** Results of the test of moral concepts of senior preschool children

Respondent	Names the moral norm				Assesses the behavior of the children				Assesses the motivation				Total
	№1	№2	№3	№4	№1	№2	№3	№4	№1	№2	№3	№4	
Lyubov’ S.	–	–	–	1	–	1	–	1	–	1	–	1	5
Anna Z.	1	1	–	–	1	1	–	1	–	–	–	1	6
Nikita K.	1	–	–	1	1	1	1	1	1	–	–	1	8
Konstantin L.	–	1	1	1	1	1	1	1	–	–	–	1	8
Timofey T.	–	1	1	1	–	1	1	1	–	1	1	–	8
Aleksey SH.	–	–	–	–	1	1	1	1	1	1	1	1	8
Evgeniy M.	1	–	1	1	1	1	1	1	–	–	1	1	9
Anastasiya P.	1	1	1	–	1	1	1	1	1	–	1	–	9
Egor B.	1	1	1	–	1	1	1	1	1	1	1	–	10
Vladimir L.	1	1	1	–	1	1	1	1	–	1	1	1	10
Ekaterina N.	1	1	–	–	1	1	1	1	1	1	1	1	10
Sof’ya P.	1	1	1	1	1	1	1	1	–	–	1	1	10
Mark R.	1	–	1	–	1	1	1	1	1	1	1	1	10
Arseniy G.	–	1	1	1	1	1	1	1	1	1	1	1	11
Semen D.	1	1	1	1	1	1	1	1	1	1	–	1	11
Evgeniy K.	1	1	1	1	1	1	1	1	1	–	1	1	11
Matvey CH.	–	1	1	1	1	1	1	1	1	1	1	1	11
Polina CH.	1	1	1	–	1	1	1	1	1	1	1	1	11
Marina SH.	1	1	1	1	1	1	1	1	1	1	–	1	11
Irina B.	1	1	1	–	1	1	1	1	1	1	1	1	11
Dmitriy K.	1	1	1	1	1	1	1	1	1	1	1	1	12
Anna S.	1	1	1	1	1	1	1	1	1	1	1	1	12
	16	17	17	13	20	22	20	22	15	15	16	19	

The assessment scale included the following quantitative and qualitative indicators: 0 scores – refuses to answer, 1 score – gives assessment of the children's actions in a concrete situation and provides an explanation, even an assessment of the action (behavior) of the children on the whole.

The quantitative analysis of the data obtained is shown in the table.

As seen from the table, it was rather easy for the preschoolers to assess the actions and behavior of the children in the situations under discussion. This column shows the greatest number of full answers (sum total is 84), whereas explanation of the motives (sum total is 65) and correlation of the actions with a moral norm (sum total is 63) lag considerably behind.

25% of preschoolers avoided explaining why an action could be regarded good or bad: they kept silent, or answered, "I don't know." etc. This fact means that preschoolers correlate concrete situations with their personal experience which already contains corresponding assessments on the part of adults or other children. And sometimes children are reluctant to give indirect assessment of their own deeds via discussion of "somebody else's" situations.

What is more, far from all senior preschoolers can associate concrete actions with a generally accepted moral norm. Quite often the as-

essment of actions in a socio-moral situation depends on the subsequent expectancies of the children, in which they again proceed from personal experience.

Thus, while explaining why a boy lied in a certain situation, part of the preschoolers said that he "got frightened", "was afraid he would be blamed", "would be punished", etc. This fact proves that the children are familiar with the consequences of morally disapproved actions. We believe that it is worth while observing these particular children and their relations with the parents: the latter may be too strict after all, and it would be good to see whether they take into consideration the age-related boundaries of perception of socio-moral norms at the preschool age.

Nevertheless, there were answers quite "mature" for the given age: "One has to confess" (of something done), "because it is necessary to share", "because girls always give in", "because the girl has good manners" (!), "was wrong because you mustn't lie!".

The table shows that two children (at the top of the list) have rather serious problems with socio-moral development – they have scored only 5 and 6 points out of 12. And only two children have scored the maximum number of points. But on the whole, the socio-moral atmosphere in the given group is relatively satisfactory:

more than half of the children take active part in the talks about morals, give a correct assessment of the socio-moral vector of an action, and assess it properly. And with due work on the part of the teacher, this leads to the formation of the concepts not about a concrete action but about the moral behavioral norm accepted both in the micro- and in the macro-society.

For preservation of the socio-moral vector in education and development of preschool children, we can recommend the preschool teachers to work out a program that presupposes four consecutive stages:

1) “This is Me”: to help the child form the image of themselves, outline their personality traits, understand themselves as a subject of activity (learning, labor, communicative, etc.);

2) “Me and You”: to teach preschoolers to establish dialogue with peers, to help to treat the communication partner as a friend, to correct one’s concepts about moral behavior (one’s own and that of other people);

3) “Me and We”: to expand the child’s concepts about oneself as a part of community (group), to identify the zone of comfort and the risk zone in communication and interaction with peers and adults, to accept the rules of social interaction;

4) “Me and the World”: to lead to the understanding of the child’s

inclusion in the socio-cultural space (of the kindergarten, school, family, micro-society, etc.) which is vitally important in the pre-school period, to prepare for the new social stage – schooling, for new social contacts, new social role, realization of the value of education, etc.

By way of summing up, we would like to say the following.

Any science, and specifically pedagogy develops effectively only in interaction between the corresponding theory and practice. The communitary tradition in the organization of moral development and education of preschool children both in the scientific approaches and in practical activity facilitates careful attitude towards the surrounding people, considerate forms of interaction with the peers, acceptance and realization of the moral norms and rules regulating the behavior and relationships of all subjects of the education process, etc. It is the approach that can be rightfully defined as the “area of socio-moral development of preschool children”.

#### References

1. Abramova, L. V. Sotsial'no-kommunikativnoe razvitiye doshkol'nikov / L. V. Abramova, I. F. Sleptsova. — M. : Mozaika-sintez, 2016.
2. Bure, R. S. Sotsial'no-nravstvennoe vospitanie doshkol'nikov / R. S. Bure. — M. : Mozaika-sintez, 2017.
3. Veraksa, N. E. Ot rozhdeniya do shkoly. Primernaya obshcheobrazovatel'naya programma doshkol'nogo obrazovaniya / pod red. N. E. Veraksy, T. S. Komarovoy, M. A. Vasil'evoy. — M. : Mozaika sintez, 2014.



4. Danilyuk, A. Ya. Kontseptsiya dukhovno-nravstvennogo razvitiya i vospitaniya lichnosti grazhdanina Rossii / A. Ya. Danilyuk, A. M. Kondakov, V. A. Tishkov. — M. : Prosveshchenie, 2014.
5. Zyryanova, S. M. Sotsial'no-nravstvennoe vospitanie detey doshkol'nogo vozrasta : ucheb. posobie / S. M. Zyryanova, N. A. Karataeva, G. M. Kiseleva, L. L. Lashkova. — Shadrinsk : Shadr. gos. ped. in-t, 2011.
6. Kolomiychenko, L. V. Dorogoyu dobra : kontseptsiya i programma sotsial'no-kommunikativnogo razvitiya i sotsial'nogo vospitaniya doshkol'nikov / L. V. Kolomiychenko. — M. : TTs «Sfera», 2015.
7. Korotaeva, E. V. Dukhovno-nravstvennoe vospitanie: vchera i segodnya / E. V. Korotaeva // Russkiy yazyk v shkole. — 2011. — № 12. — S. 10—14.
8. Miklyaeva, N. V. Sotsial'no-nravstvennoe vospitanie doshkol'nikov / N. V. Miklyaeva. — M. : TTs «Sfera», 2013.
9. Ob utverzhenii i vvedenii v deystvie federal'nykh gosudarstvennykh trebovaniy k strukture osnovnoy obsheobrazovatel'noy programmy doshkol'nogo obrazovaniya [Elektronnyy resurs] : prikaz Min-va obrazovaniya i nauki Rossiyskoy Federatsii (Minobrnauki Rossii) : ot 23 noyab. 2009 g. N 655. — Elektron. tekstov. dannye. — Rezhim dostupa: <http://base.garant.ru/197482> (data obrashcheniya: 19.08.2018).
10. Petrova, V. I. Eticheskije besedy s doshkol'nikami : dlya zanyatij s det'mi 4—7 let / V. I. Petrova, T. D. Stul'nik. — M. : Mozaika-sintez, 2016.
11. Troshin, P. L. Nravstvennoe vospitanie: ponyatie, sushchnost', zadachi [Elektronnyy resurs] / P. L. Troshin // Molodoy uchenyy. — 2016. — № 8. — S. 884—887. — Elektron. tekstov. dannye. — Rezhim dostupa: <https://moluch.ru/archive/112/28290/> (data obrashcheniya: 19.08.2018).
12. Uruntaeva, G. A. Praktikum po detskoj psikhologii / G. A. Uruntaeva, Yu. A. Afon'kina. — M. : VLADOS, 1995.
13. Federal'nyy gosudarstvennyy obrazovatel'nyy standart doshkol'nogo obrazovaniya [Elektronnyy resurs]. — Elektron. tekstov. dannye. — Rezhim dostupa: <http://www.rg.ru/2013/11/25/doshk-standart-dok.html> (data obrashcheniya: 19.08.2018).
14. Federal'nyy zakon «Ob obrazovanii v Rossiyskoy Federatsii» [Elektronnyy resurs]. — Elektron. tekstov. dannye. — Rezhim dostupa: <http://base.consultant.ru/cons/cgi/online.cgi?base=LAW;n=182943;req=doc> (data obrashcheniya: 21.04.2017).
15. Fel'dshteyn, D. I. Prioritetnye napravleniya psikhologo-pedagogicheskikh issledovaniy v usloviyakh znachimykh izmeneniy rebenka i situatsii ego razvitiya : doklad na vyezdnom zasedanii Prezidiuma RAO v Nizhnem Novgorode 19—20 apr. 2010 g. / Ros. akad. obrazovaniya, Moskovskiy psikhologo-sotsial'nyy in-t. — M. : MPSI ; Vopronezh : MODEK, 2010. — 14 s. — ISBN 978-5-9770-0504-3.



*95<sup>th</sup> anniversary of the birth  
of Vladimir Ivanovich Lubovskiy*

UDK 616-072.8

BBK IO97

GSNTI 14.07.03

Code VAK 13.00.03; 19.00.10

**V. I. Lubovskiy**

Moscow, Russia

**WHAT IS THE “STRUCTURE OF DEFECT”?**

**Abstract.** This article is the last work prepared by the outstanding Russian psychologist, the founder of the school of special psychology, academician V. I. Lubovsky (15.12.1923 — 08.11.2017). The material was sent to the editorial board by the scholar’s widow T. V. Lavrent’yeva and prepared for publication by his post-graduate students.

The article discusses the inability to reflect the content of the basic notion of special pedagogy — “the structure of defect” — as a set of certain quantitative indicators of psychological/psychophysiological functions, which is associated with extreme variability and coincidence between the quantitative indicators of a number of functions in some types of developmental disorders.

The analysis of the process of psycho-diagnostics of several types of developmental disorders allowed singling out the stage of differential diagnos-

tics and its object — cognitive sphere and psychophysiological abilities. And it was revealed that within each type of development, variability of the indicators of certain functions coexists with definite correlations: the function most highly developed in comparison to others, in all individual variants and dynamic changes keeps the highest position, the same as other functions stay on their original levels. This correlation represents the main components of the structure of defect.

The article is published because the theory of the new approach in diagnostics is actually based on the concept of “the structure of defect”; so this mechanism needs detailed consideration.

**Keywords:** structure of defect; defects (disorders) of development; differential psycho-diagnostics; visual-imagery thinking; zone of proximal development (teachability); standardized intellectual tests; quantitative estimation; method of cognitive interaction (or method of interaction with environment).

**About the author:** Lubovskiy Vladimir Ivanovich (1923—2017), Candidate of Pedagogy, Doctor of Psychology, Professor, Academician of the Russian Academy of Education, Institute of Special Education and Complex Rehabilitation, Moscow City Pedagogical University, Moscow, Russia.

What is the structure of defect? The term is widely used by specialists in various areas of defectology: by pedagogues-defectologists, logopedists, special psychologists, and physicians working with children with disabilities. And it is used to denote two related but not identical notions.

The first notion refers to the main characteristic of developmental disorders in a concrete subject (a child or an adult). In this case they would say, for example: “The structure of defect of the boy is typical of disorder of psychological development” or “This boy is a typical oligophrenic”. So they characterize the subject as a representative of a

certain type of developmental disorder. (We admit that there is more phenomenology than structure at the basis of such supposition. For psychiatrists, such assessment, based on experience, is treated as “general clinical impression”, i.e. primary diagnosis without specifying the structure.) As we know, all children sent to the psycho-medico-pedagogical commission (PMPC) undergo medical examination, which is the first part of the stage of differential diagnostics. Irrespective of the attributes that can be used by doctors to characterize the children, and in spite of all quantitative characteristics they might provide (this refers, first of all, to the subjects

with visual and auditory impairments), the final stage of differential diagnostics and the design of the individual educational route are the responsibilities of special psychologists. It often happens that the child diagnosed as partially sighted uses only tactile perception for spatial orientation and activity, and, vice versa, the child considered to be blind acts using visual perception. We suggest introducing the notion of “method of interaction with the environment” (or “method of cognitive interaction”) for assessment and description of such situations. The next stage of the process of diagnostics – study of individual abilities – has been described in detail by many researchers.

In another variant of usage, the term under consideration serves to denote the specificity of a type of development: “structure of defect in intellectual disability”, “structure of defect in visual impairment”, etc., i.e. in this case a set of developmental features and regularities is believed to define the essence of the whole category of individuals who could be referred to the given type irrespective of individual differences (and the latter are characterized by quite a significant variation).

The first variant of the usage of the term – the first notion – is accepted by all and does not cause any problems. But the second meaning of the term is a subject of profes-

sional controversy. So it needs serious consideration. The definition of the structure of defect can be found neither in special pedagogy, nor in general psychological literature. Let us take the most general definition based on the unity of two notions “structure” and “defect” and corresponding to the commonly accepted application of the term: structure of defect is a system of inadequate psychological functions differentiating this particular type of defect [5; 11]. Several questions immediately arise. One of them is about the quantitative and qualitative content of the functional set (that is why a differential diagnosis subdividing children – for example, with disorders of cognitive development – into different categories is impossible without analyzing qualitative characteristics).

Our study involves a detailed description of the participation of medical workers in the first part of the process of differential diagnostics. It is only natural that in all cases they take into account the results of objective observation of the child. And these phenomenological data are expressed in some cases (hearing and vision disorders) in the form of exact quantitative indicators. Still, when the special psychologist joins in the process of differential diagnostics, he must determine the level of intellectual development in all cases, because the learning route designed for each

pupil depends on its state. And it often turns out that the psychological activity and all manifestations of interaction with the environment do not match the medical qualification of analyzer disorders. For example, a child whose diagnosis is “loss of vision” orients in space using residual vision, reading a flat printed text taking it very close to their eyes. And, vice versa, with the vision of more than 0.04, the child uses tactile spatial orientation. The same may be said about hearing indicators. Some time ago, T.A. Vlasova devoted a monograph to this issue [4].

Almost all underdeveloped or defective psychological functions are characteristic of not one but two or more types of dysontogenesis. Thus, for example, intellectual disabilities of different degrees of manifestation are characteristic of not only intellectual disability as such, but also of disorders of psychological development. In a limited form and with reference to verbal thinking only they are manifested in general speech underdevelopment [3], and even in order to differentiate a typically developing child in the process of diagnostics, it is necessary to undertake detailed evaluation of their intellectual development.

Analyzing results of diagnostic intelligence tests we can see that quantitative differences between the indicators of several types partially coincide: the range of indicators for typical children is partially over-

lapped by the indicator range of children with disorders of psychological development, and practically fully coincides with that of the children with general speech underdevelopment. It is only the indicators of children with intellectual disability that are radically different from the norm (see: last column of Table 1).

Success is a measure of the level of thinking formation, and teachability is indicated by the number reciprocal to the number of instances of help provision. But the indicators of the children of other categories partially coincide with the range of indicators of children with disorders of psychological development. Nevertheless, any specialist working with the children with these types of developmental disorders will tell you that the intellectual disabilities of different levels of manifestation constitute the basic feature (characteristic) both of children with intellectual disability and of those with disorders of psychological development. And we should keep in mind that the data shown in table 1 reflect the results obtained after rendering help to the children, i.e. are indicators of the zone of proximal development. If we look at the results of standardized intelligence tests (WJSC-R Test), the indicators of the children with disorders of psychological development coincide with those of the children with intellectual disability to an even greater degree [12].

**Table 1.** Indicators of the level of formation of visual reasoning by the Raven's Progressive Matrices Test

Children	Average result (out of 35 points)	Standard deviation	Rendering help (average number of cases)			Highest and lowest results in the group (in points)
			1 (singling out)	2 (insert)	3 (identification)	
Norm	24.6	±1.5	3.0	0.8	1.8	18.5-31.25
DPD	19.0	±1.5	5.0	2.7	1.0	14.75-21.5
ID	12.0	±3.7	7.0	4.2	0	6.25-16.5
GSU	21.1	±3.5	2.3	0.5	1.0	16.0-28.5
Deaf	23.5	±1.5	2.9	1.3	0.8	

*Note:* DPD – disorders of psychological development

ID – intellectual disability

GSU – general speech underdevelopment

Insufficiency of quantitative estimation is reported even in the cases when, dealing with visual and auditory disorders, medical workers use pre-set quantitative boundaries between such types of developmental disorders as low vision and blindness, or deafness and hearing loss.

Thus, for example, it is believed that in visual impairments, the borderline between blindness and low vision is the acuity of 0.04. Persons with lower acuity refer to the category of the blind, and those with higher acuity – to the category of low vision. Still it often turns out that irrespective of the vision acuity, the subject with a lower indicator should be referred to the group of low vision, because they use vision and not tactile perception to

orient in the environment and to perform all kinds of feasible activity. There are reverse cases as well: tactile perception takes the lead even when the vision acuity is higher than 0.04. Thus, the method of “cognitive interaction” with the environment turns out to be the dominant indicator for reference to a certain type of development. This specificity cannot be evaluated via any quantitative indicators.

In 1989, working on the problem of differential diagnostics of children with various types of developmental disorders having similar impairments of psychological activity, we suggested using indicators of completion of tasks addressing three kinds of reasoning, assessment of detailed peculiarities of

speech development, and teachability for their clear-cut delimitation. We suggested a table which allowed seeing salient differences between the children with a mild degree of intellectual disability (ID), disorders of psychological development (DPD) and general speech underdevelopment (GSU) via application of a certain set of procedures [6].

The table complemented in accordance with later research results

with the columns “imagery” and “verbal memory” is given below (Table 2).

If we fill in the table with the corresponding indicators for children of the same age, referring to different types of development characterized by similar defects of the same functions, we will see the differences between them. It was the first step towards understanding the structure of defect.

**Table 2.** Systemic functions

Level of function formation								
Reasoning			Speech			Teachability	Memory	
Visually enabled active	Visual	Verbal-logical	vocabulary	grammar	phonetics		visual	verbal

The chapter about the diagnostics of developmental disorders in the textbook “Foundations of Psychodiagnostics” [7] could have become *the second step*. It was the only (out of many) guide for general psychodiagnostics the editor of which decided that this chapter was needed. Those who got acquainted with the textbook may have an impression, on the basis of vague recollections of the chapter, that the given article simply reproduces something that has already been published before. But this is not so. The percentage indicators were used in the textbook for global measurement of the level of formation of three cognitive functions: thinking, speech and teachability.

And **the three levels** specified: (normal), mild, moderate and severe manifestations of defect were evaluated by randomly assigned percentage. This assessment had nothing to do with the structure of defect, and was actually a tribute to the intuitive-empirical approach, or, in fact, a step backwards. The true second step (20 years later!) was made by the creation of a new concept of developmental disorder diagnostics. It was actually the result of understanding of the opportunities of application of the differences found out as far back as 1985 for creation of a true quantitative-qualitative differential diagnostics of developmental disorders. The new concept has been published at last [8; 9].

It is clear from what has been said above that no quantitative indicator specific for a single type of development can ever exist. Especially since these indicators are subject to considerable change in the course of education and development. And at the same time, irrespective of quantitative change, the defect (i.e. the type of developmental disorder) stays. The structure of defect of each type of development must **possess something that remains unchanged. It is this element** that is the “keeper of specificity” of each type of developmental disorder.

So it becomes evident that neither exact quantitative indicators of the level of formation of psychological functions constituting the structure of defect, nor any quantitative intervals can serve as foundations for referring defect to a certain type of dysontogenesis.

Let us sum up the reasons.

1. The same psychological functions (or, rather, a set of development indicators of the functions chosen irrespective of the type of development) constitute the structure of defect of different types of development, including the “norm”. And then their statistically stable variations (in qualitative and quantitative expression) may characterize this or that type of development (*see*: Table 1 and the diagram in Fig.1). Each type has its own range of indicators, and these values

sometimes overlap each other (compare, for example, ID and DPD, in which the difference between the highest and the lowest indicators at preschool age is minimal. Naturally, if we take other function and single out the systemic indicators – for example, not visual but verbal-logical reasoning, the indicators in the correlation will be different, but the distinctions between the types will stay!).

2. Significant range of individual indicators of all functions.

3. Partial (more or less significant) coincidence of the ranges of individual indicators of the level of formation of psychological functions in the samples of different types of development.

4. The quantitative indicators of the functions increase considerably in the process of education and development coming close to the norm (with the exception of intellectual disability).

5. Even when exact medical indications of the sensory functions belonging to a certain type of dysontogenesis are used, they rather seldom determine the type of development.

However, there is something perceived by the specialists on the subconscious (non-verbalized) level allowing approximate quantitative estimation (“mild”, “moderate”, “severe” degree of defect manifestation) serving as a safe indicator of a certain type of development. But what is it, after all?



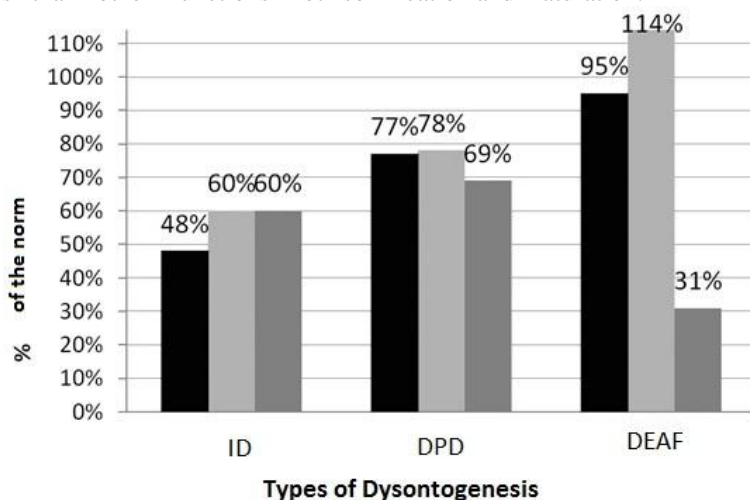
Let us look at the graphic representation of the structure of defect in Figures 1 and 2. In fact, it is a quantitative correlation of the functions that remains the same at different ages, and changes with the change of the type of development. The only thing that remains the same under the conditions of the quantitative versatility and inconsistency described above is a *certain relationship between the indicators of the functions forming the structure of defect*. This means that the functions most highly developed in comparison to others, always, both within the range of individual indicators and in the process of development, demonstrate higher values than other functions not so

highly developed at the given moment. This forms the basis of the stability of the type of development.

Our research employs the percentile scale seldom found in our home studies but widely used by Western scholars to rank the indicators (scores) of certain functions of the experiment participants [13].

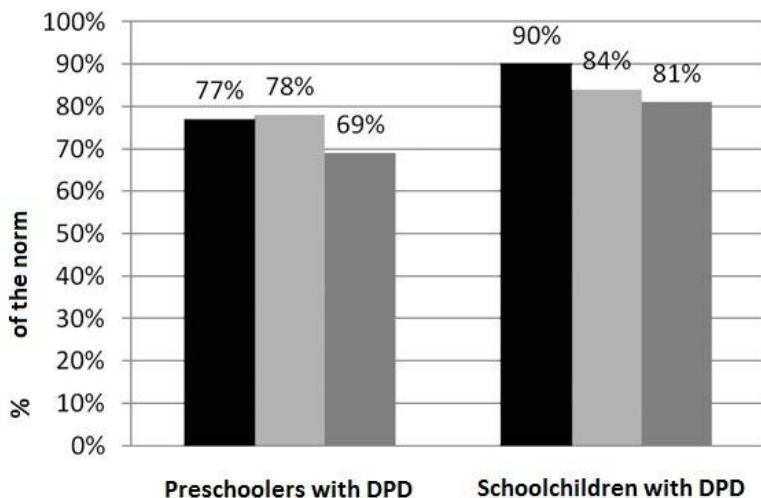
The average indicator of the group of typically developing peers is considered to constitute 100%. Calculations are made for each function separately.

Figure 2 demonstrates the preservation of correlation between the functions with considerable increase of the indicators of the level of formation in the process of education and maturation.



**Figure 1.** Basic components of the structure of defect of preschoolers with intellectual disability, disorders of psychological development and hearing loss

Legend: ■ — visual reasoning; ■ — teachability; ■ — speech



**Figure 2.** Correlation between the basic components of the structure of defect in DPD at different stages of development

*Legend:* ■ — visual reasoning; ■ — teachability; ■ — speech

In all cases, we used the procedures from the diagnostic set by T. V. Rozanova [10]. In addition, some tasks from the children's variant of the Wechsler Adult Intelligence Scale were also used. Unfortunately, we can hardly speak about the correctness of application of the method, because just a few highly qualified experts-psychologists of the VNIID – leading specialists in the corresponding areas – carried out such enormous work.

The average indicator of the group of typically developing peers is considered to constitute 100%. For the sake of uniformity of indicator representation, teachability is calculated as a value inverse to the

sum total of the cases when help with task completion was rendered to the child.

Why was this regularity not discovered by home or foreign psychologists earlier? The matter is that it was revealed only due to the analysis of the results of heterogeneous fundamental comparative research which provided data about the completion of the same tasks by respondents with different types of behavior. Such research has not been actually conducted anywhere till the 1970s. Fortunately enough, we have such material accumulated by the team of psychologists of the Institute of Defectology (now Institute of Special Pedagogy) over the

period from the 1970s to the turn of the 21<sup>st</sup> century.

Meanwhile, the understanding of the structure of defect at least explains the intuitive-empirical approach to the diagnostics of developmental disorders existing now in our country and abroad.

It is quite clear that the structure of defect is made up of not only cognitive and sensory functions but also emotional-volitional ones. But their identification needs material of multilateral studies of the corresponding functions, and, first and foremost, detection of the systemic elements of many manifestations of the emotional-volitional sphere.

Such an attempt was made in the work by I. A. Korobeynikov who suggested a scheme of qualitative-quantitative analysis of psychological activity in the process of experimental psychological investigation of children with DPD and mild ID [6]. Alongside the traditional parameters of analysis of the intellectual-mnemonic activity of children, the author has introduced assessment scales allowing the experimenter to reflect manifestations of the emotional-volitional and partly behavioral spheres which should be taken into consideration in the process of analysis and interpretation of all the formal achievements of the child. Such approach has turned out to be rather effective within the model of differential “express diagnostics”, but the principles laid at its basis are

quite suitable for the study of the structure of defect in various categories of children with developmental disorders. The study by S. M. Vallyavko states the specificity of personal development in different types of speech dysontogenesis [1; 2]. Moreover, diagnostics of the cognitive sphere is vitally important for the differential diagnostics in childhood, especially at the senior preschool and junior school ages.

Formation of the scientific concepts about the structure of defect opens up vast horizons for further research in this area, the potential topics of which suit dissertation research and are important for specification of a number of problems. Here is one example: it is necessary to figure out the degree to which a particular structure of defect embraces the population of which it is typical. To this end, it is essential to investigate the “periphery” of the area of the same-age population. We could not do it, because we have only aggregate figures. A similar problem is associated with dynamic change. It was far from easy to organize such research at all times, and today it seems to be practically impossible.

We have acquainted the reader with the outcomes of research which is an attempt to create a new theory. Keeping in mind the aphorism of the famous German chemist Kirchoff, “There is nothing more practical than a good theory”, and

without claiming a high quality of the suggested material, we argue that the theory presented is quite demonstrative and convincing as a hypothesis. And it has wonderfully proved its effectiveness: 1) a new concept of diagnostics of developmental disorders has been created on its basis, which has, at last, realized the dream of L. S. Vygotskiy about “qualitative diagnostics instead of quantitative one [see: 4; 11]; 2) a truly qualitative description of each type of developmental disorder is possible (which has turned out to be a foundation of the new approach to differential diagnostics); 3) there opens a possibility of a search for a new approach to the ever disputable question about the method of measuring the level of typical (normal) development. It becomes evident that constant stable quantitative indicators are impossible, which was also stated by L. S. Vygotskiy: there is no one single norm; there are a hundred norms [11].

We have given detailed proof (reasons) of this impossibility. And at the same time we have discovered such a quantitative indicator which, dynamically changing with reference to the size of population and the age and education of the subjects, still remains unchanged. It is the correlation between the systemic functions. As it has been shown above, it is relatively constant for each type of developmental

disorder. And the so-called “typically (or normally) developing person” is also a type of development, just like any disorder, and, therefore, has its specific and unique correlation of systemic functions.

#### References

1. Valyavko, S. M. O tipologii lichnostnogo razvitiya doshkol'nikov v norme i s narusheniyami rechevogo razvitiya / S. M. Valyavko // *Osobyete deti v obshchestve* : sb. nauch. dokladov i tezisov vystupleniy uchastnikov I Vseros. s"ezda defektologov / pod redaktsiyey O. G. Prikhod'ko, I. L. Solov'evoy. — 2015. — S. 24—29.
2. Valyavko, S. M. Sravnitel'no-sopostavitel'nyy analiz razvitiya motivatsionnoy sfery starshikh doshkol'nikov v norme i s narusheniyami rechevogo razvitiya / S. M. Valyavko // *Sistemnaya psikhologiya i sotsiologiya*. — 2014. — № 4 (12). — S. 65—73.
3. Vlasenko, I. T. Osobennosti slovesnogo myshleniya vzroslykh i detey s narusheniyami rechi / I. T. Vlasenko. — M. : Pedagogika, 1990.
4. Vlasova, T. A. O vliyaniy narusheniy slukha na razvitie rebenka / T. A. Vlasova // *K voprosu komplektovaniya vspomogatel'nykh shkol*. — M., 1956.
5. Vygotskiy, L. S. *Sobr. soch.* V 6 t. T. 5 / L. S. Vygotskiy. — M., 1983.
6. Korobeynikov, I. A. *Psikhologicheskaya differentsiatsiya narusheniy razvitiya u starshikh doshkol'nikov* : metod. rekomendatsii / I. A. Korobeynikov ; MZ RSFSR. — M., 1982. — 33 s.
7. Lubovskiy, V. I. *Psikhologicheskie problemy diagnostiki anomal'nogo razvitiya detey* / V. I. Lubovskiy. — M. : Pedagogika, 1989.
8. Lubovskiy, V. I. *Diagnostika narusheniy razvitiya* / V. I. Lubovskiy // *Osnovy psikhodiagnostiki* / pod red. A. G. Shmeleva. — Rostov n/ D. : Feniks, 1996. — S. 231—257.
9. Lubovskiy, V. I. *Zadachi, printsipy i vozmozhnosti rekonstruirovaniya sistemy psikhologicheskoy diagnostiki narusheniy razvitiya* / V. I. Lubovskiy, I. A. Korobeynikov, S. M. Valyavko // *Defektologiya*. — 2015. — № 6. — S. 47—56.

10. Lubovskiy, V. I. Novaya kontsepsiya psikhologicheskoy diagnostiki narusheniy razvitiya / V. I. Lubovskiy, I. A. Korobeynikov, S. M. Valyavko // *Psikhologicheskaya nauka i obrazovanie*. — 2016. — T. 21. — № 4. — S. 50—60.
11. Rozanova, T. V. Metody psikhologicheskogo obsledovaniya glukhikh detey, ispytyvayushchikh povyshennye trudnosti v obuchenii / T. V. Rozanova, N. V. Yashkova // *Kliniko-psikhologicheskie issledovaniya glukhikh detey so slozhnym defektom*. — M., 1980.
12. Slovar' L. S. Vygotskogo / pod red. D. A. Leont'eva. — M. : Smysl, 2007.
13. Shaumarov, G. B. K otsenke znacheniya intellektual'nykh testov v diagnostike i izuchenii detey s intellektual'noy nedostatochnost'yu / G. B. Shaumarov // *Defektologiya*. — 1979. — № 6. — S. 16—24.
14. Mahan, T. *Assessing Children with special Needs* / Thomas Mahan, Aline Mahan. — New York ; London : Holt, Rinehart & Winstone, 1981.

UDK 377.1(091)  
BBK 4450.3  
GSNTI 14.09.29  
Code VAK 13.00.01

**M. A. Stepanova**  
Moscow, Russia

**HISTORY OF SPECIAL PEDAGOGY IN FACTS AND FIGURES.  
TO THE 110<sup>TH</sup> ANNIVERSARY OF THE V. P. KASHCHENKO  
SANATORIUM SCHOOL FOR CHILDREN WITH DISABILITIES**

**Abstract.** The paper attempts to reconstruct the history of one of the first medico-educational institutions for children with developmental disorders in Russia — sanatorium school for children with disabilities founded by Vsevolod Petrovich Kashchenko (1870—1943). This private institution was opened in Moscow in 1908 for children who had problems with social adaptation of different nature. The pupils of the sanatorium school included both children with intellectually disability and those with emotional instability; in addition, there were pedagogically neglected children brought up under unfavorable family conditions. Based on historical documentation (information, methodological and scientific-practical guidelines published by V. P. Kashchenko), the author gives a general characteristic of the children enrolled at the sanatorium. She provides a detailed description of the system of their teaching and upbringing: living conditions, daily routine, upkeep and forms of academic and out-of-class activities. The author emphasizes the special educational role of manual labor. Alongside with the works by V. P. Kashchenko, the reconstruction of the spirit of the sanatorium and of the atmosphere facilitating successful socialization of the children to a great extent benefited from the memoirs of V. P. Kashchenko's daughter Anna Vsevolodovna Kashchenko (1908—2016), who carefully preserved all the materials connected with professional activity of her father.

The article traces the change of the sanatorium status during the whole period when V.P. Kashchenko was its headmaster, until he was dismissed from office in 1926. Special attention is paid to the description of the scientific-methodological work carried out under the guidance of V.P. Kashchenko in the sanatorium school. Specifically, the author reports the data related to the creation of the first and only in the history of psychopedagogical science museum of pedology and pedagogy of special childhood. The article demonstrates the contribution of V. P. Kashchenko to

elaboration of the principles of medical pedagogy formulated on the basis of generalization of the medico-pedagogical activity of the sanatorium and the results of scientific research.

**Keywords:** medical pedagogy; history of defectology, children with disabilities; disabilities; special children; difficult child; sanatorium schools.

**About the author:** Stepanova Marina Anatol'yevna, Candidate of Psychology.

*Place of employment:* Associate Professor of Department of Psychology of Education and Pedagogy, Faculty of Psychology, Lomonosov Moscow State University, Moscow, Russia.

*E-mail:* marina.stepanova@list.ru.

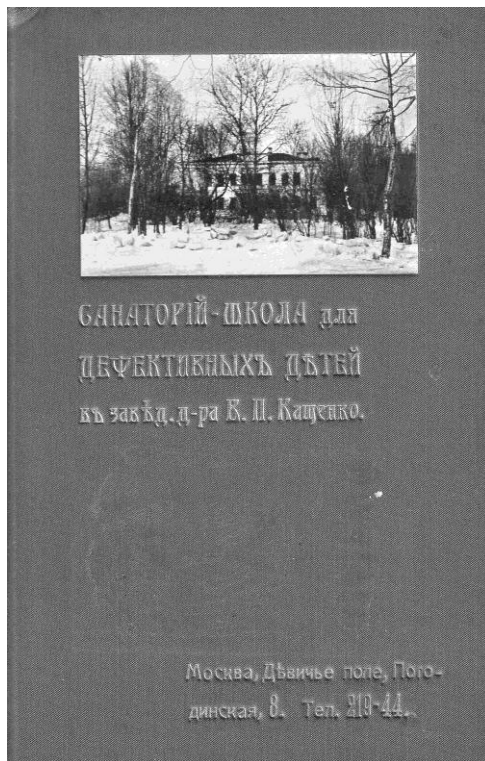
*There are two kinds of pity. One, the weak and sentimental kind, which is really no more than the heart's impatience <...> and the other, the only one that counts, the unsentimental but creative kind ...*

— Stefan Zweig, *Beware of Pity*

Reconstruction of the history of defectology as an independent branch of scientific knowledge is a difficult enough and painstaking historical-pedagogical task [3; 6; 11; 12; 14; 17; 18], and this fact explains why the question what event marks the beginning of this sphere of activity has remained unanswered till now. The birth of defectology might as well be marked by several logically connected events, not just one. There is no doubt that “a significant place in the history of domestic oligophrenopedagogy and defectology on the whole is occupied by the private medico-educational institution “Sanatorium School for Children with Disabilities” opened in Moscow in

Pogodin Street in 1908, and the activity of its founder V. P. Kashchenko” [6, p. 260].

In 1911, there appeared an illustrated publication “Sanatorium School for Defective Children Headed by Dr V.P. Kashchenko” [15] which allows the reader to get a general impression of this institution. We would like to make it clear from the very start that the given article does not purport to create a comprehensive scientific-pedagogical biography of Vsevolod Petrovich Kashchenko (1870—1943). Our task is much more humble: the given paper deals with only one, perhaps the most important aspect of professional activity of V.P. Kashchenko.



**Figure 1.** The cover of the book about the V.P. Kashchenko sanatorium school for children with disabilities (1911).

The name of the sanatorium contains the term defective child for the first time in the history of pedagogy (see in more detail in: M.A.Stepanova. “V.P. Kashchenko and L. S. Vygotskiy: to the History of the Name of the Science about the Defective Child” [16]). V.P. Kashchenko later wrote that he had introduced the term in 1912 and referred the reader

to the collection of articles “Defective Children and School” [2]. Specifically, V.P. Kashchenko mentions this fact in the paper co-authored with G. V. Murashev “Pedology of Special Childhood” included in Volume 1 of the first publication of the “Pedagogical Encyclopedia” [11, p. 192].

In 1914, the book by V.P. Kashchenko and S. N. Kryukov “Edu-



cation-Upbringing of Difficult Children” came out in which *defective children* are defined as “a numerous group of children with various deviations or *disabilities*” [9, p. 3]. These disabilities may be manifested in the sphere of intellect, emotion and will, disposition and morals, and there are also mixed types of disabilities. All types of defective children have many gradations of defect: from severe forms to the manifestations on the borderline with the norm. The latter got the name of *difficult children*, and such pupils made up the majority in the sanatorium school.

### Prehistory

Anna Vsevolodovna Kashchenko, the daughter of V.P. Kashchenko, who devoted her life to the preservation of her father’s name and the restoration of the stages of his activity, wrote in her memoirs as follows: “... in 1908, the Sanatorium school for defective children is opened ... Some time later, father would say that in 1908 his two twins were born – the younger daughter Anna and the son Sanatorium” [7, № 4, p. 12]. In a private talk, A.V. Kashchenko recollected how father jokingly said that he had three children: two daughters – Valeria and Anna, and a son – Sanatorium.

V.P. Kashchenko received medical education and began to work as

a country doctor, but participation in revolutionary activities of 1905 deprived him of the right to public service, and he decided to found a medico-pedagogical institution for difficult and defective children. As Kh. S. Zamskiy reports [6], V.P. Kashchenko made meticulous preparations for that. He attended seminars in the children’s psycho-pathology and psychology scientific circle under the guidance of N. A. Bernshteyn, and worked in the experimental psychological laboratory of G. I. Rossolimo. He perfected his knowledge in the laboratories of A. P. Nechayev and A. F. Lazurskiy. At that time, V.P. Kashchenko got acquainted with the children’s psychiatrist Prof. A. S. Griboyedov (1875-1944).

In 1908, V.P. Kashchenko went on a long half-year visit abroad to study the existing experience of organizing institutions for children with developmental disorders. He visited Germany, Switzerland, Italy and Belgium and on coming back home, opened an institution for children with disabilities on the analogy with the foreign institutions.

A. V. Kashchenko recalls the family legend of the Sanatorium school creation. V.P. Kashchenko’s nephew, the younger son of P.P. Kashchenko, Yuriy was a difficult child, and once he made fire in the loft of the hospital (the family of P.P. Kashchenko lived in the build-

ing of the hospital), after which he was sent into exile to live with uncle Vsevolod. These private events might have facilitated the formation of V. P. Kashchenko's idea about the need to work out a special approach to the education of difficult children.

The sanatorium was founded with private money: "Father had no capital; he opened a very modest Sanatorium school on his savings from the doctor's salary at a private hospital. For this purpose, a two-storey spacious house of M. F. Blandova, situated in a big garden with a maple ally, bushes of lilac and jasmine and apple and cherry trees was rented in 1908" [7, № 4, p. 12].

There is an issue of the daily paper "Golos Moskyv" of April 11, 1909 in

the private archive of A. V. Kashchenko which carries an advertisement about the sanatorium of Dr V. P. Kashchenko "for retarded, nervous and other children difficult in terms of education".

### **Experience of teaching and educating defective children by V. P. Kashchenko**

Reading the book "Sanatorium School for Defective Children Headed by Dr V.P. Kashchenko" [15] and the works of V. P. Kashchenko published during his life, one can restore the details of events that took place more than a century ago.



**Figure 2.** V. P. Kashchenko (photo)

### ***Information about the sanatorium children***

“Sanatorium for unsuccessful, nervous and other children difficult in educational terms <...> is a medico-educational institution for children of both sexes aged 4 through 16 years” [15, p. 7]. The sanatorium provided medical treatment, upbringing, and education to children.

According to the reminiscences of A. V. Kashchenko, there were only school-age boys in the sanatorium.

The sanatorium contingent was the following.

1. Children with intellectual underdevelopment, unsuccessful and lagging behind.

2. Children with reduced memory, attention deficit disorder, low working capacity, weak-willed, and lazy.

3. Children with unstable or deviating personality traits (stubborn, garrulous, fearful, insecure, deceitful, rude, careless, and immoderate); children with self-regulation disorders.

4. Sedentary, sluggish, reserved, and passive children.

5. Children with physical and mental hyperactivity, easily excitable, and undisciplined (pathologically active).

6. Physically over- or underdeveloped children.

7. Children with mixedema (swelling) and obesity.

8. Hysterical children.

9. Children without psychological disorders but with problems of ad-

aptation to ordinary school (lazy, spoilt) or children whose parents cannot control their education.

Children with a profound physical disability, extreme mental retardation, with marked symptoms of intellectual disability, those suffering from epilepsy and jitteriness could not be admitted to the sanatorium school.

V.P. Kashchenko believed it vital-ly important to create the conditions for the sanatorium pupils preventing negative impact upon them on the part of other children. It is to this end that the child was meticulously tested for the presence of any “malevolent personal traits” [15, p. 8], and their presence automatically excluded the child from the sanatorium.

Admission to the sanatorium school was possible all the year round if there were vacant places.

Sanatorium accommodation was fee-paying, and the fee depended on the kind of defect and the complexity of the child’s education and upkeep.

### ***Conditions of the children’s life in the sanatorium***

The postal address of the sanatorium was: *Moscow, Devich’ye pole, Pogodinskaya St., 8.*

Then it was a suburb of Moscow: “... a quiet, sparsely populated, healthy place, in the vicinity of university clinics” [15, p. 8].

The sanatorium was situated in a two-storey building with 37 rooms:

9 rooms were allotted for bedrooms, 5 – for classrooms, 3 – for dining rooms, 3 – for workshops, and 1 – for the medical facility. The remaining rooms were designated for rest and recreation, medico-pedagogical examination, visitors, and the pedagogical and service personnel; there was a kitchen, a laundry, etc.

The sanatorium could admit 22 pupils united into three pedagogical families. Each family had its own tutor. The families lived almost independently of each other so that the children might be under constant control of the tutor. The families were subdivided into subgroups for learning depending on their psychological constitution – disposition, intellectual and moral development and the volume of background knowledge.

The pedagogical staff included the headmaster, one resident tutor and two resident caregivers, visiting teachers of general education subjects, nature study teacher, teachers of music, singing, manual labor, and drawing; in addition, tutors were invited to take the children on long Sunday excursions.

The medical staff included the sanatorium director V.P. Kashchenko, the consultant G. I. Rossolimo, and a dentist; other specialists came in case of need.

Apart from the pedagogical and medical staff, there was a household and service staff.

### *Pedagogical methods and the pupils' living conditions*

“The aim of the given institution is not only to guarantee the provision of pleasant and useful life for the pupils but, before anything else and to a greater degree, to correct various drawbacks irrespective of the sphere they refer to, to equip children with satisfactory intellectual-moral development, knowledge, working habits and skills, and thus prepare them properly for feasible and useful life in the family and society” [15, c. 12].

This aim was achieved via various methods of medical pedagogy. Special activities focused on improvement of the physical and psychological conditions of the children were held. The latter presupposed the solution of the following problems:

- development and rehabilitation of intellectual abilities and moral inclinations deviating from the norm;
- development of reasoning independence;
- development of consistency and persistency;
- development of skills to control oneself and limit one's wishes;
- development of the feeling of duty, honesty, sincerity, and respect for other person's property;
- development of the skills of obedience;
- teaching to keep the room and oneself tidy and clean;

- teaching and training for schooling or resuming a course of learning at secondary school;
- in cases of inability to attend regular school – translation of basic information necessary for practical life and preparation for occupations matching the individual abilities of the child.

It was not only special instruction and other activities but also a special family atmosphere of the sanatorium and the presence of specialists who loved their profession that V.P. Kashchenko referred to the conditions ensuring the achievement of the established goals. Here is what A.V. Kashchenko wrote about it: “Our family life was dominated by the interests of the Sanatorium – “of the boys”. Mother worked shoulder to shoulder with father, helping him and backing him in all his undertakings. If father was the brains, mother was the soul of the sanatorium. All household activities of the family were supervised by our grandmother Zinaida Lukinichna. While she was in good health, there were no maids or any other servants in the house. Neither were there any nurses. I grew up alone and free in our enormous garden. It might have been only our janitor Akim Ivanovich, a man strongly attached to the family, who looked after me from time to time [7, № 4, p. 13].

V.P. Kashchenko emphasized the necessity to observe the princi-

ple of individualization of learning which was reflected in the low number of pupils in a class – from 3 to 6 pupils with equal level of knowledge development. V.P. Kashchenko wrote: “Specific quality of knowledge, differences in working capacity, wit, technical skills, creative potential, abilities in certain subjects, etc. bring about the need for differentiation of our requirements, tasks, questions addressed to the children, etc.” [9, p. 26].

Special role was assigned to visual arts and manual labor as activities developing intellectual abilities and fostering attention, will, habits for independence, child’s interests and discipline. Two hours were allotted to these lessons a day in the senior groups, and about three hours – in the junior ones. Physical development and stimulation of activity and wit were facilitated by outdoor games and sports (skating, skiing, and rowing) held with reference to individual abilities.

The children looked after squirrels, rabbits, guinea pigs, fishes, and birds that lived in the sanatorium; there was even an artificial ant hill.

### *Daily routine*

The daily routine was similar in all groups, but there were some differences, specifically, more time was allotted to intellectual activity in the senior groups.

Sleep time was long (about 11 hours), which was connected with

weak nervous constitution of the pupils.

The children got up at 8, washed themselves, took a shower (if prescribed), did their beds, polished shoes and dressed. After the prayer, they had breakfast. Then, from 9:00 to 13:00 they had classes: 4 lessons with intervals between them. During each interval, the pupils left their classrooms and played on playgrounds outside the building. Lunch began at 13:15, after which some children were to lie in the open air, all the rest spent time according to their interests but under constant supervision of the tutor. At 16:00 they had tea, followed by classes alternating according to the day of the week: singing, popular talks on nature study, or music.

From 17:30 to 19:30 the pupils went for daily manual labor at special workshops spending some hours in drawing and modeling. The following kinds of manual work were practiced: carpentry, turnery, fretwork, woodburning, metal embossing, photography, basketry, box and file making, book binding, knitting from thread, wire or rope, pottery firing, artistic decoration of objects made by children, handwork, etc. In summer, some of the works enumerated above were substituted by work in the orchard and vegetable garden.

Kh. S. Zamskiy stressed that manual labor was regarded by V.P. Kashchenko not only as a method

of acquisition and reinforcement of knowledge but also as a rehabilitation means of a person [6]. And V.P. Kashchenko worked out a special method of teaching manual labor which presupposed the necessity to start teaching with awakening the child's interest to the labor outcomes and to the thing produced. At first, the products of such labor included toys, then household utensils; and the interest was aroused via demonstrating a well made thing and its practical application. The wish to have the thing was followed by the desire to make it. As far as senior children were concerned, manual labor was used in all subjects: "Children weigh, measure, draw, make up tables, schemes, gather collections, make gadgets, model from clay and other materials by themselves. In these kinds of activity, the child involuntarily comes in contact with various aspects of what they learn <...> and the learned material becomes their own *experience*, an inseparable part of their personality" [9, p. 25].

At 8:00 p.m. the children had supper, from 8:30 to 9:00 p.m. they prayed, made beds, washed themselves and went to bed. The sleeping rooms were equipped for 2-4 children.

### ***Grouping pupils and organization of classes***

For academic purposes, the pupils were subdivided into forms or groups – senior and junior groups.

In the senior groups, the children took a course of secondary education and learned the following subjects: religious studies, Russian, arithmetic, German, French, history, geography, nature study, etc. The timetable was designed in such a way that the children would be able to learn the most difficult subjects at the most productive hours of the day. Classes were aimed at the development of associative reasoning, attention, and the processes of generalization, abstraction and supposition. And close relationship between the subjects was designed to motivate the pupils towards knowledge acquisition.

The usual system of grouping for lessons was modified so that the pupils could be grouped on the basis of their knowledge in a particular subject (setting by ability). Thus, one and the same pupil could learn arithmetic in one group, Russian – in another, and geography – in yet another group. V.P. Kashchenko believed it possible to refuse from the uniform compulsory program: “If on the one hand we come across lack of interest towards learning in our pupils, and if our task consists in looking for an interest or inclination in the child in order to use them in our work with the pupil; and, on the other hand, if it is the quality of knowledge and not its quantity that matters, a uniform program is out of the question” [9, p. 24]. Instead of programs for each particular sub-

ject, the sanatorium teachers worked out detailed curricula which they used in their classrooms. The main attention was paid to the quality of learning: “Let the group learn little, but this “little” should be well thought over, learned independently and thoroughly [9, p. 24].

The junior group was made up of children who, because of their intellectual disabilities, could not take a course at a secondary education institution. Special developing classes on the basis of the teaching guides written by the pedagogues (on the analogy with the guides brought by V.P. Kashchenko from abroad) were organized for them. Classes in junior groups focused on gymnastic exercises (to music), outdoor games with exercises for the development of oral speech, elementary explanatory reading, illustrating, visual teaching of arithmetic, playing with Froebel gifts, exercises on written speech development, exercises on development of perception, exercises on development of spatial and temporal concepts, etc. The children were also given separate tasks and took part in discussions of objects and pictures.

On Thursdays, in the morning, all children went on educational excursions to widen the range of their concepts about reality and to illustrate the material learned – they visited palaces, museums, exhibitions, Zoological Gardens, work-

shops, factories, plants, etc. On Sundays, long walking tours and skiing or boating trips were organized. During such excursions, the children visited the Kutuzov House in Fili, the Ostankino park and palace, the water tower and the city water supply pump house in Vorobyovy Gory and Rublevo.

According to A. V. Kashchenko's memoirs, in winter, on Sundays, the children went to sledge down the hill near the Novodevichy Convent with great pleasure.

The children's life at the sanatorium presupposed alternation of lessons and recreation, which made it possible to avoid overstrain widely spread in a usual school, and there was no need of holidays traditionally defined as a time free from academic classes. During great holidays (Easter and Christmas) there were no classes during 5 days only; in summer, classes went on as usual.

In summer, the sanatorium moved to Finland: the children lived in a country house on the shore of Finnish Bay. Regular lessons were a little shorter because long walking and steamboat trips, as well as sailing and rowing boat voyages were taken. The children bathed in the sea, learned to swim, row a boat, catch fish, went in for growing vegetables and fruit, and made collections of plants and animals. A. V. Kashchenko wrote: "Beautiful nature, forests, small rocks, the close sea,

and a wonderful climate made children's life very attractive and full: swimming, rowing and sailing, walks and bicycle rides, potatoes baked in the campfire, long voyages to the Imatra waterfall, along the Saimaa canal, etc." [7, № 4, p. 13].

Regular medical examinations and psycho-pedagogical observation procedures were conducted to check up the state of the children. The results were discussed at united conferences of the medico-pedagogical and pastoral personnel of the sanatorium. These conferences were often held in V.P. Kashchenko's flat. The sanatorium specialists made up school reports about the pupils which reflected the dynamics of their development. V.P. Kashchenko defended the principle of holistic study of the child based on their long-term observation by pedagogues and tutors: "The study of the child, if possible, many-sided and complete (biological), lies at the basis of the work of our sanatorium school" [9, p. 13].

Out-of-class activities included visiting morning performances and lectures for pupils. The children visited museums and the Tretyakov Gallery.

Amateur performances, musical-literary evenings, competitions and holidays were held sometimes – in these cases, the children made the scenery and costumes themselves at the lessons of drawing and manual labor. Unforgettable impressions



were associated with the Christmas tree. A. V. Kashchenko recollected: "Under a high decorated Christmas tree, guarded by Ded Moroz was a pile of bright bags with presents; each person got such a bag ... There were many people invited – relatives and friends. Father was on friendly terms with the Sats family. His daughters Natasha and Nina Sats came to one of our Christmas holidays [7, № 4, p. 13].

### ***Rules of upbringing (pastoral activity)***

The system of pastoral activity of the sanatorium school is especially interesting.

The school focused on the creation of an educational environment, as "*timely* special measures in many cases are able to turn children with disabilities into fully able members of society, or at least make them more adapted to life" [9, p. 11].

We know that there were many difficult children among the sanatorium pupils – pedagogically neglected children, those prone to vagrancy, pyromaniacs, kleptomaniacs, etc. The main thing V.P. Kashchenko paid attention to was stimulating the emergence in the child of a self-attitude that would bring forth the striving to correct their bad behavior. "Our efforts are targeted not only at the reinforcement of active *will* but also, and to a greater degree, at the development of *moral feelings and emotions*" [9, p. 30].

V.P. Kashchenko looked at daily routine as an educating (psychotherapeutic) factor. He noted that children liked order and were often displeased when the traditional daily schedule was changed due to urgent circumstances. He wrote: "... it is from constant arrangement of things that unbalanced, nervous children get sufficient help to their unstable will. <...> festivities, even our short 4-5 days holidays, when there is no regular labor and are comparatively many impressions <...> unsettle our pupils" [9, p. 34].

At the same time, all pedagogical requirements were explained and addressed to the child's consciousness: "We do not demand only blind obedience from our pupils. <...> We do not deny them the right to critical attitude to the school rules and our requirements ... We regard their bad actions as mistakes or errors; we treat them as inevitable blunders often caused by their condition" [9, p. 32]. Obedience was not considered as a self-sufficient goal but as a way to self-discipline, to the formation of stable disposition and self-dependent personality with high morals.

The pedagogues and all adults surrounding the children displayed a considerate, kind, loving, and warm attitude, devoid of any semblance of formality, towards the children, which, more importantly, was always weighed and temperate. V.P. Kashchenko took great pleas-

ure to note that the pupils, who used to be rude with their parents at home, did not behave in this way at school.

The uniformity of the pedagogues' requirements was a principal issue in the education: "What is once prohibited is prohibited by all; permission shall not be challenged by separate members of the pedagogical staff" [9, p. 35]. According to V.P. Kashchenko, the unconditionality and categorical nature of requirements possessed a disciplinary potential, which was especially essential for weak-willed, unstable and capricious children characterized by a swift change of desires. As a result, the children "do not get lost when they face contradictory requirements of different teachers, and they are not confused by arbitrary assessment of their behavior, as it often happens in the families where things that give delight to the mother, provoke outrage of the father, or vice versa" [9, p. 35].

Much attention was paid in the sanatorium to the development and training of strong will – both positive and negative, active and passive. The positive will was enhanced by the labor-oriented situation at the sanatorium. And manual labor was not treated as a boring obligation; the pedagogues tried to interest the child with various kinds of work; therefore, initiative was

welcome at the lessons of manual labor. As a result of the fact that the children's independence is not limited, they "feel themselves as creators, conquerors of the crude matter into which they have embodied their thought; they turn into living, *independent, creative personalities*" [9, p. 39].

Education of an independent person, or *independence of living* as a "certain sum total of the necessary living skills giving a chance to do without anybody's help" [9, p. 39] is one of the main goals which is achieved via organization of the child's life without nurses or maids.

### ***Communication with parents***

The parents had an opportunity to see their children at specially allotted hours. A leave home was possible on the permission of the headmaster depending on the psychological state of the pupil.

The children were allowed to have family photos, books, albums, stationary, camera, games, and toys. The sweets brought to the child went to the common buffet, and the child treated other pupils to them in the dining room.

The parents received information about their children once a month; and three times a year they were informed about their progress.

The children wrote letters to their parents every week.

### Scientific-experimental work of V.P. Kashchenko at the sanatorium

A.V. Kashchenko recollected that alongside educational-pedagogical activity, father carried out scientific-experimental work in which G. I. Rossolimo participated as consultant.

Kh. S. Zamskiy quotes the memoirs of the famous oligophrenopedagogue A. N. Graborov who had visited the V.P. Kashchenko sanatorium school: "The thing that surprised me during my first visit to the V.P. Kashchenko sanatorium school was the well-thought-out system of work: it was the creative research atmosphere which permeated the whole activity of the sanatorium school and the amazing ability of Vsevolod Petrovich to make his colleague think, search, investigate, and meticulously accumulate experience" [as cited in: 6, p. 263].

The scientific-research museum of pedology and pedagogy of special childhood opened at the school sanatorium in 1918 is worth mentioning separately. As Kh. S. Zamskiy wrote later, it was "a *unique* institution the goal of which was popularization of the issues of defectology and methods of teaching non-typical children, demonstration of learning and visual aids, and exhibition of the objects made by children" (italics added – M.S.) [4, p. 105].

Information about the museum was included in the Moscow Museum Guide published in 1926 [13]. It is necessary to note that according to V.P. Kashchenko, the term *children's deficiency* is narrower than the term *exclusiveness* as *deficiency* means deviation towards disability, whereas *exclusiveness* can mean both deficit and abundance. Nevertheless, he used them as synonyms and stressed: "The difference between exclusiveness (deficiency) and norm <...> is interpreted as a difference only in the quantity, in the *degree*, but not in *quality* [10, p. 8].

There were three main sections in the museum: child studies, medical (rehabilitation) pedagogy, and children's labor and creativity. V.P. Kashchenko believed that the task of the child studies section was to acquaint those interested with the methods of pedological research and the typology of exclusive childhood: there were materials both about gifted and talented children with disposition or temperament problems, and about children with intellectual disabilities. Special attention was paid to children's creativity – children's drawings, objects made of wood and clay, and literary works were collected and exhibited. The section of rehabilitation pedagogy reflected the experience accumulated in the sanatorium (results of medical and psychological examination of the children and rehabili-

tation work) and gave an opportunity to look through the collection of special methods guides worked out by the personnel of the sanatorium. The section of children's labor and creativity acquainted visitors with the methods of learning drawing, with various kinds of creative activity (carving on wood, woodburning, weaving, etc.), and with amateur theatrical activity (models, scenery, costumes), etc.

The museum had no future: according to V.P. Kashchenko it was destroyed.

In 1918 (the data are quoted from the book: *Kh. S. Zamskiy. Umstvenno otstalyye deti: istoriya ikh izucheniya, vospitaniya i obucheniya s drevnikh vremen do serediny XX veka* [Children with intellectual disability: History of the study, upbringing and education from ancient times to the mid 20th century], [6]), the House for Child Studies was opened on the base of the sanatorium, which was reorganized in 1921 into a medico-pedagogical clinic and in 1923-1924 – into the Medico-Pedagogical Experimental Center headed by V.P. Kashchenko. Later on, the Experimental Defectological Institute was founded on its base; some time later (in 1934) it was reorganized into the Scientific-Practical Institute of Special Schools and Children's Homes, and in 1943 – into the Scientific-Research Institute of Defectology of

the Academy of Pedagogical Sciences of the RSFSR (now Institute of Special Pedagogy of the Russian Academy of Sciences).

### **The sanatorium school in the life of V.P. Kashchenko. Dismissal from office**

V.P. Kashchenko was dismissed from his office of Director of the Medico-Pedagogical Experimental Center in 1926. A.V. Kashchenko wrote in her memoirs that the official policy towards the old members of the staff changed in 1926. Anna Vsevolodovna was dismissed first, and Vsevolod Petrovich was dismissed some time later. "It was a hard blow for Father, because he was not only director but also the founder of this institution. It was his child, brought up with his love and energy.

It is in this sad and tragic way that his work in the Medico-Pedagogical Experimental Center organized on the base of the sanatorium school came to an end in 1926" [7, № 5, p. 6].

A.V. Kashchenko provides some facts from the future life of the pupils of the sanatorium whom the Revolution and the Civil War scattered across the globe. Some of them maintained friendly relations with Vsevolod Petrovich and Anna Vsevolodovna Kashchenko.

## Medical pedagogy of V.P. Kashchenko

In his book “19 Years’ Experience of a Special Medico-Pedagogical Institution of RSFSR – Medico-Pedagogical Center of Narkompros in Moscow” [10, p. 7] (it is the second edition of the book, the first one was published in 1926), V.P. Kashchenko wrote: “The *social* character of pedagogical treatment of exclusiveness (deficiency) is the most typical feature of modern medical pedagogy, upon which it builds up its knowledge” [10, p. 6]. Speaking about the specificity of the institution, V.P. Kashchenko underlines the special methods it uses: the same as teaching the blind and the deaf needs certain special techniques, teaching and upbringing of children with intellectual disabilities and temperament disorders presuppose certain approaches to the child.

<...> As far as tasks of the pedagogical activity of the clinic are concerned, the basis is the *same* as in typical school. This basic task is to bring up a socially holistic personality of the child. But the clinic has one more additional task – to ensure *rehabilitation of the disabilities of this personality*.

In fact, we can say that medical pedagogy includes the whole system of social pedagogy *plus* a certain specific addition” [10, p. 7].

In the 30s, V.P. Kashchenko prepared the book “Pedagogical

Rehabilitation” for print, which was published almost 60 years later – in 1992. The book presents the analysis of the practical experience collected by the author through the prism of medical pedagogy. V.P. Kashchenko appeals to the pedagogues working “with the *defective child*, with the *exclusive child*, with the *child difficult to educate*, socially neglected, socially unsettled, suffering from a more or less severe “social twist” [8, p. 202]. And he especially stresses that the children with temperament disorders attend mass schools and kindergartens; therefore, each pedagogue should possess the necessary knowledge for their rehabilitation.

V.P. Kashchenko enumerates the principles of medical pedagogy:

- social necessity and social nature of the creative work of the pedagogue in general and the pedagogue-defectologist in particular;
- measures against personality deficiency are really true and valid means;
- management of the environment and control of a particular social situation constitute the task of the pedagogue; the potential of education is enormous: “it can both ruin the child socially and it may turn them into a socially valuable personality” [8, p. 206];
- combination of the pedagogical work with the exclusive child with constant and continuous activity towards their study: it is necessary

to “*know the child* – to know them deeper and better than we know the construction of the machines we work with, <...> *to know the methods and techniques of their education* like we know the rules of machine operation [8, p. 23];

– cooperation between the pedagogue and the doctor.

V.P. Kashchenko envisaged that the problem of difficult (exclusive, deficient) children would be hardly solved even in the distant future, which, nevertheless, did not prevent him from believing that “the problem would be overcome, that the medical and pedagogical measures aimed at correction and rehabilitation of the defects of psychological and physical development of children would be successful in the long run” [8, p. 25].

The book is concluded with the words: “Education institutions and faculties for training pedagogues-specialists are opened, <...> medico-pedagogical institutions are formed, scientific-popular work is conducted among the population, and the corresponding literature is published. To all this, *the author has made his contribution and is happy to realize that it has been useful, that the seeds he sowed have sprouted, and the life fully devoted to higher human motivation has not been lived in vain.*

When I write these lines, I see the eyes of not only the readers of today but also those who will open

my book tomorrow; <...> many things written on its pages may become outdated, may need specification, or even complete change. <...> But still I am absolutely positive that the thoughtful reader will find useful things in my writings even in the future” (italics added – M.S.) [8, pp. 200-201].

And indeed, the achievements of V.P. Kashchenko, although not at once, have been highly praised by the scholars of next generations. The contribution of V.P. Kashchenko was first mentioned by D. I. Azbukin in 1947, who called him “one of the pioneers in the field of defectology” [1, p. 109]; and in 1959, Kh. S. Zamskiy referred V.P. Kashchenko (a brief scientific biography was written by Kh. S. Zamskiy to the 100th anniversary of V.P. Kashchenko’s birth [5]) “to the group of the first scholars of our home defectology, the most active fighters for general education and upbringing of children with higher nervous activity disorders and psychological and physical disabilities [4, p. 95].

On the eve of the 150th anniversary of Vsevolod Petrovich Kashchenko’s birth these words sound as a call to turn to his scientific-pedagogical legacy providing the scholars with safe and valid methods of rehabilitation of behavior of difficult children.

#### References

1. Azbukin, D. I. Obshchestvenno-pedagogicheskaya deyatelnost' V. P. Kashchenko / D. I. Azbukin // Uch. zap. MGPI im. V. I. Le-

- nina. — 1947. — T. 49. — Vyp. 3. — S. 101—109.
2. Defektivnye deti i shkola / pod red. V. P. Kashchenko. — M. : Knigoizdatel'stvo K. I. Tikhomirova, 1912.
3. D'yachkov, A. I. Osnovnye etapy razvitiya sovetskoy defektologii / A. I. D'yachkov // Spetsial'naya shkola. — 1968. — Vyp. 1. — S. 8—14.
4. Zamskiy, Kh. S. Vrachebno-pedagogicheskaya deyatelnost' professora Vsevoloda Petrovicha Kashchenko i ee rol' v razviti vspomogatel'noy shkoly SSSR / Kh. S. Zamskiy // Uch. zap. MGPI im. V. I. Lenina. — 1959. — T. 131. — Vyp. 7. — S. 95—108.
5. Zamskiy, Kh. S. Vsevolod Petrovich Kashchenko (k 100-letiyu so dnya rozhdeniya) / Kh. S. Zamskiy // Defektologiya. — 1970. — № 5. — S. 78—81.
6. Zamskiy, Kh. S. Umstvenno otstalye deti: istoriya ikh izucheniya, vospitaniya i obucheniya s drevnikh vremen do serediny KhKh veka / Kh. S. Zamskiy. — M. : NPO «Obrazovanie», 1995.
7. Kashchenko, A. V. I vse eto bylo... / A. V. Kashchenko // Defektologiya. — 2006. — № 4. — S. 8—17; № 5. S. 3—14.
8. Kashchenko, V. P. Pedagogicheskaya korrektsiya / V. P. Kashchenko. — M. : Prosveshchenie, 1992.
9. Kashchenko, V. P. Vospitanie i obucheniye trudnykh detey / V. P. Kashchenko, S. N. Kryukov. — M. : [b. i.], 1914.
10. Kashchenko, V. P. Isklyuchitel'nye deti. Ikh izuchenie i vospitanie / V. P. Kashchenko, G. V. Murashev ; s predisl. N. A. Semashko. — M. : Rabotnik prosveshcheniya, 1929.
11. Kashchenko, V. P. Pedologiya isklyuchitel'nogo detstva / V. P. Kashchenko, G. V. Murashev // Pedagogicheskaya entsiklopediya / pod red. A. G. Kalashnikova pri uchastii M. S. Epshteyna. — M. : Rabotnik prosveshcheniya, 1927. — T. 1. — S. 192—214.
12. Lubovskiy, V. I. «Vrastanie v kul'turu» rebenka s narusheniyami razvitiya / V. I. Lubovskiy // Kul'turno-istoricheskaya psikhologiya. — 2006. — № 3. — S. 3—7.
13. Muzey pedologii i pedagogiki // Nauchno-prikladnye i estestvenno-istoricheskie muzei Moskvy. Putevoditel'. — M. : Izd-vo Mosk. komm. khoz-va, 1926. — S. 71—73.
14. Novik, F. M. Istoriya vospitaniya i obucheniya umstvenno-otstalykh detey / F. M. Novik. — M. : Uchpedgiz, 1939.
15. Sanatoriy-shkola dlya defektivnykh detey v zavedyvanii doktora V. P. Kashchenko. — M. : Gorodskaya tipografiya, 1911.
16. Stepanova, M. A. V. P. Kashchenko i L. S. Vygotskiy: k istorii nazvaniya nauki o defektivnom rebenke / M. A. Stepanova // Voprosy psikhologii. — 2017. — № 3. — S. 119—136.
17. Troshin, G. Ya. Detskaya nenormal'nost' za poslednie sto let / G. Ya. Troshin // Voprosy pedagogicheskoy patologii v sem'e i shkole / pod red. A. Vladimirovskogo, A. Orshanskogo i G. Fal'borka. — SPb., 1912. — Vyp. 2. — S. 3—68.
18. McCagg, W. The origins of defectology / W. Cagg // The Disabled in the Soviet Union: Past and Present, Theory and Practice / W. McCagg, L. Siegelbaum (eds). — Pittsburg, PA : Univ. of Pittsburg Pr., 1989. — P. 39—62.

## APPENDIX

### Submission Guidelines for Prospective Authors

DEAR COLLEAGUES!

Materials for publication are accepted only by e-mail for the purpose of their orderly and safe storage.

The editorial board of *Special Education* accepts articles in the fields covered by the journal in case the article has not been published before. All articles are reviewed by independent experts. The final decision about the publication of the article is taken by the editorial board. If the article is rejected by the board the author is sent a well-founded refusal to publish the article. Doctors of sciences and post-graduate students are exempt from payment for the publication.

All submitted articles are tested by the “Antiplagiat” system. If the text of the article violates the norms of originality and contains borrowed ideas without reference to the source of citation the article shall be rejected in accordance with the norms of the scientific community.

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  
**Иванов, И. И.** Название книги / И. И. Иванов. — М. : Наука, 2004. **Внимание!** Пробел до и после знака «двоеточие»
- A book of 2-3 authors  
**Иванов, И. И.** 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.
- An article in a collection  
**Иванов, И. И.** Название : дис. ... канд. ист. наук : 07.00.02 : защищена 22.01.04 : утв. 15.07.04 / Иванов Иван Иванович. — Екатеринбург, 2004.
- An article in a journal  
**Иванов, И. И.** Название статьи / И. И. Иванов, А. А. Петров // Название сборника / Урал. гос. пед. ун-т. — Екатеринбург, 2004.
- Electronic resource (according to GOST 7.82—2001)  
**Иванов, И. И.** Название статьи / И. И. Иванов // Наука и жизнь. — 2004. — № 1.
- Иванов, И. И.** Компьютерная графика [Электронный ресурс] : рабочая программа : для студентов-заочников / И. И. Иванов ; Урал. гос. пед. ун-т. — Электрон. дан. и 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](http://journals.uspu.ru).

Separate files should be created for pictures (black-and-white, no half-tones): 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.

To be published the article should meet the requirements of the Russian Science Citation Index (РИНЦ), that is in addition to the basic text it should contain the following information in Russian and English.

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

- full family name, first name and patronymic;
- 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.

The review should include:

- title of the article;
- author or authors;
- correspondence to the fields covered by the journal;
- assessment of urgency, novelty and possibility of practical application of the materials;
- critical remarks on the contents and formatting;
- recommendations about the publication, the need of adjustment or rejection of the manuscript with due reasons.

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.

**Dear readers!**

The scientific journal *Special Education* is included in the Rospechat' Catalogue – subscription index 81956.

Subscription may be ordered at any post office of the Russian Federation. Further information about subscription and publication may be obtained by e-mail from **specobr@uspu.me**

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

**Editorial Board Address:** 620017, Ekaterinburg, Cosmonauts Ave, 26, Room 134, Russia.

**Электронная почта:** [specobr@uspu.me](mailto:specobr@uspu.me)

**Телефон/факс редакции:** (343) 336-14-38

**Editor-in- Chief:** Director of the Institute of Special Education  
of Ural State Pedagogical University  
Filatova Irina Aleksandrovna