

**SOCIAL AND EDUCATIONAL SUPPORT  
IN LIFELONG HUMAN DEVELOPMENT**

THE JOHN PAUL II CATHOLIC UNIVERSITY OF LUBLIN  
The Faculty of Social Sciences





# SOCIAL AND EDUCATIONAL SUPPORT IN LIFELONG HUMAN DEVELOPMENT

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## TABLE OF CONTENTS

Introduction ( <i>Ewa Domagała-Zysk, Dorota Bis, Alina Rynio</i> ) . . . . .	7
------------------------------------------------------------------------------	---

### PART ONE

#### SOCIAL AND EDUCATIONAL SUPPORT AT SCHOOLS AND IN FAMILIES

<b>Heli Paaso, Minna Veistilä</b> <i>Child and Youth Well-Being</i> . . . . .	13
<b>Dorota Bis</b> <i>Communication Competences and Lifestyles of School Age Children</i> . . . . .	37
<b>Danuta Opozda</b> <i>Changes in the Relationship between Family and School. Abilities and Boundary Conditions in People's Development</i> . . . . .	61
<b>Harri Mäkinen</b> <i>The Importance and Teaching of Intercultural Communication</i> . . . . .	81
<b>Blanca Escudero Panda</b> <i>Erasmus LLP Programs as a Chance for the Students' Development</i> . . . . .	95

### PART TWO

#### SOCIAL AND EDUCATIONAL SUPPORT IN CASE OF DISABILITY

<b>Alina Rynio</b> <i>Implications of the Question Concerning the Meaning of Children's Suffering</i> . . . .	107
<b>Bożena Sidor-Piekarska</b> <i>Early Intervention as the Process of Supporting the Development of a Child with Disability and Parents</i> . . . . .	121

<b>Kazimiera Krakowiak, Ewa Domagała-Zyśk, Anna Podlewska</b> <i>Cued Speech – a Tool to Enhance Development, Education and Full Family Life</i> .....	141
<b>Ewa Domagała-Zyśk</b> <i>Supporting Deaf and Hard of Hearing Learners in Foreign Language Classes in an Inclusive Setting</i> .....	161
<b>Thomas Hülshoff</b> <i>When People with Intellectual Disabilities Develop Worse Health in Old Age. A New Challenge for Special Education?</i> .....	181
Notes on Contributors .....	199

## INTRODUCTION

Contemporary pedagogy is no longer being regarded as a science concerned only with education of children and adolescents. What we perceive as a sign of the present times is a significant widening of the subject of pedagogy and the necessity of searching for new approaches to effectively support different social groups, both educationally and socially. These new issues are mostly connected with the idea of lifelong learning, which in the case of pedagogy also takes the name of lifelong supporting and assisting different groups of people in need or endangered with crisis situations at different stages of their lives.

Two processes seem to be significant while analyzing this situation: the process of inclusion and internationalization. The first one promotes an idea of a balanced education for everybody in a common, usually in the local setting, where both the disabled and non-disabled students feel invited and supported. This process in a way diminishes or even destroys borders between pedagogues and special pedagogues: from now on, non-disabled and disabled persons can meet together in each educational environment, work and play together and have their needs satisfied to the utmost. This creates the necessity for pedagogues to be aware of disability issues and the special needs of both disabled and non-disabled persons of all ages. The second significant process is internationalization, which makes it possible (and necessary) to diagnose and support the people of different cultures and nationalities in mainstream educational settings. Comparing the situation of European education, many problems seem to be common and the solutions used in one place might be fruitfully incorporated in different countries. It not only helps to avoid the situation of balancing the open door, but also helps it to work more effectively.

The book “Social and Educational Support in Lifelong Human Development” answers the needs of contemporary pedagogy: it addresses selected

pedagogical situations of both the disabled and non-disabled people in different educational and social settings. Thanks to contributions from four different countries (Germany, Spain, Finland and Poland) and different educational and social environments which diagnosed it helps to have a realistic picture of the advantages and disadvantages of different approaches to both disabled and non-disabled persons and different international settings.

The book is divided into two parts consisting of ten chapters. The first part is devoted to the issues of supporting the development of non-disabled persons, whereas the chapters of the second part deal with the development of disabled people and ways of supporting them in educational and social settings.

In chapter one, Finnish researchers Minna Veistila and Heli Paaso from Finland present the issue of children and adolescent well-being, especially in the light of the attachment theory. Young people's development is here perceived through protection and participation theories. In the second part of the paper, the issue of well-being is addressed from the point of view presented in social sciences. The conclusion is that an interdisciplinary understanding of child and youth well-being is necessary to describe it properly and use these descriptions as a tool to promote the children and youth's well-being. The next two papers go on to explore selected developmental challenges of school-aged children. Dorota Bis presents media pedagogy research focusing on the significance of the mass media in forming the lifestyles of school age children, whereas Danuta Opozda analyses the importance of interactions between the family and the school and the restraints of an individual development in the light of changes in the relationship between the family and school. Chapter four, written by a Finnish scientist Harri Mäkinen, considers the issue of intercultural competence, pointing to the fact that in contemporary society it is essential to be sensitive and competent in order to communicate and understand each other. The author's practical experience leads to the conclusion that it is essential to teach the students "cultural awareness," the attitude of acceptance and willingness to live in one global society, despite the obvious differences and resentments. Chapter five, the last chapter in this part was prepared by Blanca Escudero Panda from Spain. The author analyses the idea and practice of the Erasmus EU program as a tool that not only supports students but also professors and business staff who want to teach abroad, as well as helps university staff to receive international training. Thus, the program is presented as a meaningful tool promoting intercultural cooperation.

Part two is devoted to the issues of social and educational support in the cases of development distorted by illness of disability. It begins with a chapter by Alina Rynio from the John Paul II Catholic University of Lublin, who explores the issue of the prevalent nature of suffering in general and in reference to children in particular. The analysis is based on several sources of papal teaching and publications of an interdisciplinary group of authors exploring this issue. In chapter six, Bożena Sidor-Piekarska goes on to explore the theme of early diagnosis and early intervention. She pinpoints the extreme significance of this form of support for young children and advocates for a more systematic activities in this field. The next chapter is prepared by three researchers working with deaf and hard of hearing students, Kazimiera Krakowiak, Ewa Domagała-Zyśk and Anna Podlewska. It aims to present Cued Speech as a significant tool that might enhance the social life and family development of hearing impaired persons of different ages. A special section of the paper is devoted to exploring the possibilities of using Cued Speech as a system supporting foreign language learning. The theme of hearing impairment is continued in the next chapter, in a paper prepared by Ewa Domagała-Zyśk. The author searches the conditions under which integration and inclusion are possible as an effective way to educate deaf and hard of hearing persons. This study's importance also lies in the fact that the author precisely defines and differentiates the terms that are often used as synonyms in Polish pedagogical literature.

The last chapter of the book deals with the final phase of life of disabled persons. Thomas Hulshoff from Germany explores the ways mentally disabled elderly persons who experience some other illnesses or disorders connected with their age suffer. The author reminds us that just as there has been an increase in the number of older people in the general population, there has also been an increase in older people living with age-related diseases. New pedagogical challenges should then be connected with supporting, among others, elderly mentally disabled people with Alzheimer's disease, diabetics or depression.

In conclusion, the book presents a set of new pedagogical challenges and therapeutic strategies that are connected with new social and educational phenomena. It should be an important source of inspiration about modern ways of diagnosing these problems both in Poland and in other countries, and undertaking effective strategies of solving the problems of supporting the disabled and non-disable persons during every stage of their lives.

The book was possible thanks to the brave decision of some people who overcome their problems of tight schedules and notorious lack of time and prepared a book that might serve as a reference for all those interested in issues connected with supporting lifelong human development. We acknowledge the chapter authors for their hard work, sensitivity for describing contemporary pedagogical problems and creativity in searching for ways to possibly support those in need of it.

*Ewa Domagała-Zyśk, Dorota Bis, Alina Rynio*

PART ONE

**SOCIAL AND EDUCATIONAL SUPPORT AT SCHOOLS  
AND IN FAMILIES**



# CHILD AND YOUTH WELL-BEING

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## ABSTRACT

In Part 1, senior lecturer Heli Paaso considers an infant's psychological well-being through developmental psychology, especially in the light of the attachment theory and the results of contemporary research. Attachment researchers focus on how parent-child relationships, including children's attachment status/behaviors or maternal sensitivity, relate to the child's regulation and negative emotionality. Attachment theorists have also emphasized continuity in the child's attachment status from infancy into childhood (Harris 1994; Mäkelä 2006; Silvén 2002; Sinkkonen 2006).

Heli Paaso also considers an infant's psychological well-being through protection and participation. They are related to a parent's care and sensitivity, development and properties of emotions, language, memory and play. Parent and child temperament and stress are mediators and regulators. Infant development and circumstances of development are considered through continuity and discontinuity. It is important to know the continuity of favorable development and well-being and prevent unfavorable development. The continuity of positive factors adds to a child's resources and well-being, and close relations between parents or caregivers contribute to the children's well-being (Feldman & Klein, 2003; Komsu, 2009).

In Part 2, Minna Veistilä discusses well-being from a social sciences point of view. The key concept that will be defined by her in this article is "child and youth well-being." Her goal is to discuss this concept in accordance with research professor Marjatta Bardy "with criticism and creative care" (Bardy 2009a, Bardy 2010, 27). Contemporary international research on well-being questions over and over again the viewpoint of concepts and evaluation methods on what well-being really is. Veistilä looks at some Finnish well-being

theories and indicators and combines them into an interdisciplinary well-being indicator matrix.

The Finnish word “hyvinvointi” can be interpreted in English as “welfare” or “well-being.” The concept can be related to either society or human behavior. The field of social work increasing people’s welfare and well-being as presently defined internationally is the main orientation of this work (Niemelä 2010, 16). This article combines two points of view towards an interdisciplinary understanding of child and youth well-being.

## KEYWORDS

*Infant’s psychological well-being, development of emotions, selective attachment, inner working model, joint attention, social referencing,*

## I. DEVELOPMENT AND WELL-BEING

### I.1. INFANT WELL-BEING AND PARENTHOOD

An infant develops in different areas of psychological activities as a result of basic care and as a result of face to face interaction with his or her parents or caregiver. In early childhood, development is very holistic. Closeness develops brain functionality, sensory perception, the autonomous nervous system, emotions, memory, language, play and thinking. The most important elements of early interaction between an infant and the parent are care and attachment. The quality of attachment depends on an infant’s temperament and the parental attachment, his or her belief of attachment and how the parents keep the child in mind (Kouvo, & Silvén 2010; Mäkelä 2003; 2006; Salo 2006; Sroufe 1996; Sinkkonen 2008).

Characteristics of personality and temperament are theoretically and empirically related and closely associated with an individual’s well-being and psychosocial adjustment (e.g., Rothbart et.al., 2006; Komsu 2009). This research conceptualized temperament as constitutional individual differences in reactivity and self-regulation, influenced over time by the interactions of heredity, maturation and experience.

A parent’s or caregiver’s most important duty during early childhood is to relieve the child’s stress. This relationship also raises an infant’s undifferentiated feelings and is a message to the infant that a parent or caregiver is present

and keeps the infant in mind (Mäkelä 2006; Salo 2006). Hunger, pain and tiredness are stressful for an infant, while the child tries to stay close and connect with his or her parent by sucking, crying, smiling and trying to be held (Salo 2006). While a parent or caregiver removes or decreases stress by care or by holding, she or he protects the development of the autonomous nervous system, senses and emotional regulation. This kind of care creates the foundation of attachment and generates basic-security (Mäkelä, 2003; 2006).

This kind of care and holding develops an infant's memory and cerebration. Experiences of care are recorded in subconscious memory, which is implicit memory. These kinds of memories are the body's memory, memories of affects and procedural memory. The body's memory is immediate and subconscious recording memory of heart aches, breathing intensity or release of stomach acid in different situations. Affective memory records, for example, the effects of hunger, pain or tiredness. Procedural memory records the order of different functions and automatic motions (Mäkelä 2006).

After the first months of life, an infant's brain has developed enough to connect and categorize perceptions and phenomena, together causing the emotions they evoked. The development of cerebration demands interaction, for which the parent or caregiver psyches himself or herself up for an infant's emotions (Mäkelä, 2003; 2006; Paaso, 2008). A parent or caregiver recognizes an infant's positive emotions and reflects it back to the baby through facial expression, gestures, tone and movements. A parent or caregiver also reassures and calms down a baby when she or he feels distress and fear. A parent or caregiver recognizes and interprets aloud emotions and in this manner helps the baby to differentiate between emotions (Salo, 2006). Through such interaction, an adult's more developed central nervous system is transferred slowly to an infant's inner procedure. In this manner, the development of emotions from mutual regulation to inner self-regulation begins. This kind of interaction through the procedural memory system initiates an infant's attachment to a parent or caregiver (Hautamäki, 2001; 2001; Mäkelä, 2003; 2006).

After the first six months of life, an infant's memory has been recorded in the limbic system memory's interaction with parents or caregivers, who reassure the infant's emotions. A child's early emotional regulation is a secure base phenomenon, which joins a child's continual balance between safety confirmation and examination of the environment. The infant uses a parent or caregiver as his or her secure base phenomenon when new situations and strong emotions occur. The infant regulates his or her emotions with the help of a parent or caregiver (Hautamäki, 2000; 2001; Broberg ym., 2005).

With a secure base phenomenon, the infant can learn and explore the environment. In this way, one of the tasks of attachment is accomplished (Salo, 2006).

### 1.2. SELECTIVE ATTACHMENT AND THE BASIS OF COGNITIVE SKILLS

When the infant is about eight months old, he or she displays selective attachment and selective attention. The infant is especially interested in following a parent's or caregiver's attention focus and how the parent feels about his or her perceptions. For example, a parent or caregiver and an infant pay attention to a toy or a dog at the same time, and they are both aware of this perception. The infant's ability for joint attention is the basis of language, communication and development of attention. These kinds of situations are shared through picture-book reading, when a parent or caregiver and child focus perception on the same object. These kinds of situations are extremely necessary for an infant's development (Lyytinen & Lyytinen, 2006; Salo, 2006; Sroufe, 1996).

Experiences of joint attention and experiences of secure base phenomenon start the canonic babble stage in language development. The infant repeats a series of consonant-vowel or vowel-consonant sounds. This transition to babble is connected with the development of attachment between a parent or caregiver and the infant. The basis of learning phonemes and babbles is speech hearing (Lyytinen & Lyytinen, 2006). There is plenty of correlation evidence suggesting that attention shared by the mother and the child on objects and events facilitates word learning during second-year play interactions. This is especially true if the parent follows rather than directs the child's attention focus while naming objects. Engagement in joint attention is thought to provide the children with the necessary experiences for learning the meanings of words (Silvén, 2002).

At the end of the first year, the basic capacity for social interaction develops. This is evident when the infant plays and a strange person enters the room. The infant looks at his or her parent or caregiver and gets worried and surprised, for example, asking: "Mother, is this strange person dangerous?" When the mother notices the infant's message and answers, the infant will be quiet and continues playing. This is called social referencing. It is a mutual feeling. It is important for the infant how the parent or caregiver looks at the infant while she or he speaks about the situation. Mutual sharing and

experience evoke special emotions. These memories outline the infant's perceptions and define for infants their personal and their parents' or caregivers' social role (Broberg et. al., 2005; Harris, 1994).

### 1.3. INNER WORKING MODEL, MUTUAL PLAY AND EMOTION REGULATION WITH OTHER PEOPLE

During the first year of life, an infant develops expectations of a parent's or caregiver's behavior in interaction with him or her. Memories of these expectations and experiences are recorded in procedural memory. This memory system keeps in mind knowledge of daily and repeated basic-care situations, order, interactions and emotional tone with the parent or caregiver. A child's experiences about him- or herself with a parent or caregiver include affections and knowledge (Mäkelä, 2006). These repeated experiences about themselves with other people generalize models in the mind. An infant's attachment with a parent or caregiver is composed of these inner working models.

A securely attached infant develops the expectation that his or her emotional signals and needs will be reacted to by the parent or caregiver in a responsive, consistent manner. Securely attached infants learn to freely express their emotions, and the development of emotion regulation is enhanced because of the supportive emotional environment children experience (Casidy, 1988; Eisenberg & Morris, 2002). In this way, one of the goals of attachment is achieved (Salo, 2006).

An insecurely attached infant is believed to develop the expectation that his or her emotional needs will not be responded to or will be responded to in a selective and inconsistent manner (Eisenberg & Morris, 2002). When a child expects a parent or caregiver to be unresponsive and inconsistent in this way, it may restrict the display of emotions or display negative emotions to receive attention from a parent or caregiver, and the development of emotion regulation suffers (Eisenberg & Morris, 2002; Mäkelä, 2006; Sinkkonen, 2008).

Early play develops during face to face interaction with the parent or caregiver and an infant. These experiences are recorded in the inner working model. At the end of the first year of life, action with objects differs. An infant's play is putting familiar objects one on top of another, one inside the other and turning and rolling objects. The play of a securely attached infant is more multi-faceted, because infants are more willing to examine their environ-

ment and are also willing to be a playmate. Secure attachment with parents or caregivers improves learning skills (Lyytinen & Lyytinen, 2006).

#### 1.4. SEMANTIC MEMORY, LANGUAGE AND PLAY DEVELOPMENT WITH PARENT OR CAREGIVER INTERACTION

The cortex develops intensively after an infant is one and half years old. Disappointments evoke negative emotions. A parent or caregiver helps a child to bear these disappointments by holding a child in the same way as a baby, by thinking about the child and by recognizing the child's emotions (Mäkelä, 2006).

The development of the cortex also improves in cognitive development. Semantic memory develops during the second year of life and is connected with, among others, a child's early description about himself or herself and about daily events. Memories are general verbal schemes about him or herself in connection with attachment objects. Episodic memory means representations of happenings, which occur at a certain time and place. Memories include emotions and construct the connections of holistic sensory perceptions and also construct how current stimulus outlines a certain time and place (Hautamäki, 2000; 2001).

A child learns to produce words during the end of the first or at the beginning of the second year of life. Word productivity grows individually after one and a half years. To produce words demands from a child understanding the word's meaning, pronouncing it and using language as a means of communication. Studies indicate continuity in language skills. Early learners of first words also produce early diverse conjugations and sentences. A quickly expanding lexicon increases the child's ability to structure communication with language and participate in conversation. Finnish studies indicate that children who are interested in books have a broader lexicon. They start to look at picture books and papers earlier than others, and they ask parents to read them books. These children have the ability to concentrate on reading for a longer time than children who have no interest in books (Lyytinen & Lyytinen, 2006).

Language skills are very important for cognitive development. Through language, the child analyses his or her perceptions, becomes acquainted with his or her environment, receives and learns knowledge. Early language skills are also related to basic reading skills (Silvén, 2002). The development of memory and language leads a child to symbolic play at the beginning of the second year. First,

imaginary actions are connected with daily events, such as eating, sleeping, driving and caring. When play expands to external live (parents, caregivers, sisters) and lifeless objects (cars, puppets, teddy-bears), it shows a child's attempt to communicate and share experiences with others. A child can feel pleasure while she or he transfers learned schemes onto new targets. For example, parents have tucked the child into bed and the child tucks a teddy-bear into bed in the same way (Lyytinen & Lyytinen, 2006). This is very important for a child's well-being through developing play that parents commit themselves to play and encourage the child's play (Kalliala, 2008).

Symbolic play and language develop at the same time. For example, when a child starts to pronounce sentences, which contain many words, the course of events in symbolic play also becomes longer. Attention and play also have connections. The capacity to maintain attention is necessary but not a sufficient condition for the development of play. Temperament also regulates attention (Lyytinen & Lyytinen, 2006).

#### 1.5. THE DEVELOPMENT OF EMOTIONS AND SOCIAL SKILLS AFTER TWO YEARS OF AGE

Most researchers determined that the development of a child's emotions consists of emotion expression, emotion knowledge and emotion regulation. Knowledge of emotions consists of emotional recognition, identification and emotional understanding (Denham, Blair, DeMulder, Levitas, Sawyer, Auerbach-Major & Queenan, 2003; Paaso, 2008). Researchers who study emotion recognition in different ways by using pictures of facial expression found that almost all three-year-old children could correctly recognize facial expression of anger, happiness, and sadness, whereas expressions of fear and surprise were harder to recognize (Denham, 1986; Denham, McKinley, Couchoud & Holt, 1990; Denham *et al.*, 2003; Suviola, *et al.* 2007). A child's ability to perceive and recognize other people's emotions is an important skill for social interaction. The child's own emotion expression is connected with emotional understanding and helps the child express his or her personal feelings and understand causes between emotions and events (e.g. Denham 1986; Denham *et al.*, 1994).

During the third year of life, the securely attached child begins to develop theories in its mind. The development of memory and language supports the progress of this development. During interaction, the child learns that other

children and parents have different thoughts, intentions and goals than he or she has. The child develops the capacity for empathy. In this way, the process of social information develops. He or she, better than previously, learns how to perceive other people and interaction situations. At the same time, she or he learns to make conclusions based on them. In this way, the child's social skills develop (Hautamäki, 2000; 2001; Salo, 2006).

In order to learn to regulate his or her own actions and emotions in different situations, a child must be aware of his or her emotions. He or she will learn to recognize and to evaluate emotions and knowledge in particular situations. This is called epistemic space. Secure attachment improves the development of epistemic space. This development influences the process of perception and information and develops the child's social skills (Hautamäki, 2000; 2001).

Play and stories are good methods for developing emotion regulation. Using them, the child can express and experience emotions more naturally than by speaking. In play and by listening to a story, a child can experience different feelings, difficult experiences, and also carry out different solutions. She or he can translate passive experience into active experience. In this way, play and stories provide tools for maintaining well-being (Kalliala, 2001; Sinkkonen, 2006).

## 1.6. INFANT INDICATORS OF PSYCHOLOGICAL WELL-BEING

Concluding this part, it should be stressed that the theories presented here give rise to the indicators of infant psychological well-being (Table 1). Indicators of child well-being are expressed in activities of the parent or caregiver and in the activities of the infant. Adults are responsible for protection and improvement of an infant's psychological well-being. A child should have rights to protection and participation. An adult's duty is to protect and make the child's participation possible in accordance with the child's developmental stage. The indicators of psychological well-being can be considered to be a process of attaining resources and areas indicating well-being or directions of development for the future. Parents and caregivers can evaluate indicators in a children's regular clinical visits and in day care centers at an agreed upon time, e.g. during one designated week four times a year. The indicators represent a theoretical model, which can be used by researchers, and tests empirical data in order to generate new practical innovations.

Table 1. Indicators of infant and child well-being

Indicators	Parent/caregiver protection	fr.	An infant 1 year old participation	fr.	A child 2 year old participation	fr.	A child 3 year old participation	fr.
Sensitivity to children's emotions and needs	Parent/caregiver holds an infant in his/her mind. Parent/caregiver is available for an infant. Parent/caregiver enjoys to be with an infant. Parent/caregiver responds to an infants needs at the right time (hunger, tiredness, distress).		An infant trusts in parent/caregiver. An infant enjoys to be with parent/caregiver. An infant gets food at that time when she or he is hungry. An infant can sleep when she or he is tired.		A child trusts in parent/caregiver. A child enjoys to be with parent/caregiver. An infant gets food at that time when she or he is hungry. An infant can sleep when she or he is tired.		A child seeks out parent/caregiver to get help. A child enjoys to be with parent/caretaker. An infant gets food at that time when she or he is hungry. An infant can sleep when she or he is tired.	
Emotions	Parent/caregiver is empathic toward an infant's emotions and reflects these emotions back to an infant. Parent/caregiver is holding an angry and sad infant. Parent/caregiver holds an infant on his/her arms. Parent/caregiver shares joy with an infant. Parent/caregiver helps an infant to recognise facial expressions.		An infant lives feelings with parent/caregiver = mutual emotions Mutual emotion regulation with parent/caregiver. An infant can be on adults lap. An infant answers Parents/caregivers face expressions and emotions. An infant has a permanent adult. An infant is glad and in a good mood.		A child has the courage to throw a temper tantrum  A child can be on adults lap.  A child has a permanent adult. A child is glad and In a good mood.		A child has the courage to throw a temper tantrum  A child recognises in face expressions and in face pictures: - glad - hate - fear - surprise A child is glad and in a good mood. A child speaks emotional words. A child tells about his/her feelings during play.	

Emotions	<p><u>Parent/caregiver</u> can be a secure base to an infant.</p> <p><u>Parent/caregiver</u> gives words to an infant's feelings.</p> <p><u>Parent/caregiver</u> holds up an infant's feelings in his/-her mind during play.</p>	<p>An infant uses parent/caregiver for his/her secure base phenomenon.</p>			
Play	<p><u>Parent/caregiver</u> commits to play.</p> <p><u>Parent/caregiver</u> gives stimulus for play.</p> <p><u>Parent/caregiver</u> constructs environments for play.</p> <p><u>Parent/caregiver</u> is present and concentrated in play.</p> <p><u>Parent/caregiver</u> holds up and expands child's play.</p> <p><u>Parent/caregiver</u></p>	<p>An infant plays objects play.</p> <p><u>An infant</u> has shared play sessions with parent/caregiver.</p> <p><u>An infant</u> has shared picture-book reading with parent/caregiver.</p> <p><u>An infant</u> commits to play.</p> <p><u>An infant</u> plays side by side with other child.</p>	<p>A child plays symbolic play.</p> <p><u>A child</u> commits to play.</p> <p><u>A child</u> plays with another child.</p> <p><u>A child</u> uses his/her own experiences in play.</p> <p><u>A child</u> tells his/her roles during play.</p> <p><u>A child</u> can play in a group.</p> <p><u>A child</u> tells his/her roles during play.</p>	<p>A child plays many-sided symbolic plays.</p> <p>A child commits to play.</p> <p>A child uses his/her own experiences in play.</p> <p>A child tells his/her roles during play.</p> <p>A child can play in a group.</p> <p>A child tells his/her roles during play.</p>	
Language	<p><u>Parent/caregiver</u> talks to an infant during care and during play.</p> <p><u>Parent/caregiver</u> is discussing with an infant.</p> <p><u>Parent/caregiver</u> tells stories to a child.</p> <p><u>Parent/caregiver</u> is singing to a child.</p>	<p>An infant phonemes.</p> <p><u>An infant</u> gurgles.</p> <p><u>An infant</u> speaks words.</p>	<p>A child speaks two words in sentence.</p> <p><u>A child</u> speaks three words in sentence.</p> <p><u>A child</u> asks questions.</p>	<p>A child speaks three words in sentence.</p> <p><u>A child</u> speaks more than three words in sentence.</p> <p>A child uses tenses during his/her speaking.</p> <p><u>A child</u> asks questions.</p> <p><u>A child</u> proposes during speaking.</p>	

Indicators	Parent/caregiver protection	fr.	An infant 1 year old participation	fr.	A child 2 year old participation	fr.	A child 3 year old participation	fr.
Other communication's tools	<p>Parent/caregiver can understand child's expression</p> <p>Parent/caregiver responds to</p> <ul style="list-style-type: none"> <li>-language of crying.</li> <li>-language of motion and body.</li> <li>-language of aggression.</li> <li>-language of sleeping.</li> <li>-language of eating.</li> <li>-language of playing.</li> <li>-language of drawing.</li> <li>-language of memory and forgetfulness.</li> <li>-language of touch.</li> <li>-language of facial expression.</li> <li>-language of words.</li> </ul>	fr.	<p>An infant dares express</p> <ul style="list-style-type: none"> <li>-pleasure</li> <li>-happiness</li> <li>-fear</li> <li>-anger</li> </ul> <p>An infant is crying while distressed.</p> <p>An infant displays anger by aggression.</p> <p>An infant sleeps well.</p> <p>An infant eats well.</p> <p>An infant likes to play.</p> <p>An infant communicates by facial expressions.</p> <p>An infant likes some smells, noises and colours.</p>	fr.	<p>A child dares express</p> <ul style="list-style-type: none"> <li>-pleasure</li> <li>-happiness</li> <li>-fear</li> <li>-anger</li> </ul> <p>A child is crying while distressed.</p> <p>A child displays anger by aggression.</p> <p>A child sleeps well.</p> <p>A child eats well.</p> <p>A child likes to play.</p> <p>A child communicates by facial expressions.</p> <p>A child likes some smells, noises and colours.</p>	fr.	<p>A child dares express</p> <ul style="list-style-type: none"> <li>-pleasure</li> <li>-happiness</li> <li>-fear</li> <li>-anger</li> </ul> <p>A child is crying while distressed.</p> <p>A child displays anger by aggression.</p> <p>A child sleeps well.</p> <p>A child eats well.</p> <p>A child likes to play.</p> <p>A child communicates by facial expressions.</p> <p>A child can tell in words about happenings</p> <p>A child can tell in words about his/her favourite colours, smells, music and noises.</p>	fr.

## 2. SOCIETY AND WELL-BEING

### 2.1. WELL-BEING AS A RESEARCH SUBJECT

Well-being research generally categorizes well-being as objective and subjective, evaluative and experienced or interpreted factors. Nordic well-being research is dominated by a resource-based study of well-being. In other words, well-being is seen as resources or instruments used by individuals in order for them to guide the course of their own lives, make choices and decisions and simply live as they want. This is also very close to the concept of lifestyle, where well-being can be seen as the possibility to follow the most pleasing lifestyle. Our well-being is relative: we evaluate and interpret it in relation to sociocultural norms and experiences (Bardy 2010, 27-32; Niemelä 2010, 17-21).

UNICEF has, since 1980, published a series called *The State of the World's Children*. In this series, the organization follows, with multiple indicators, how the UN's Children's Rights are being accomplished around the world. The indicators in this series are a compromise of available statistics: infant mortality rate, neonatal mortality rate, annual number of child births, GNI per capita, life expectancy at birth, total adult literacy rate, primary school attendance and household incomes (Mocchia et al 2009). These indicators are necessary and in a way un-negotiable in order to understand child well-being in general. They cannot, however, fulfill the need to take a closer view at children's well-being in our Finnish culture and way of life.

Antti Karisto's research group has carried out in Päijät-Häme, Southern Finland, in the years 2002, 2005 and 2008 a well-being barometer, in which the concept of well-being has been carefully formulated to meet the criticism towards previous research on well-being and the new emphases of theoretical discussion concerning everyday life (Karisto et al 2003, Haapola et al 2009). Karisto's well-being barometer discusses the well-being of adults with the following elements

The central issue in this barometer has been that residents of a municipality have been asked how these preceding elements of well-being are realized in their current life and how they expect them to be realized in the future. The residents were also asked what kind of meaning they give to each element of well-being. This barometer has been thought to make it possible to find, for example, such elements of well-being that at the moment are poorly realized, but that are considered to be highly meaningful. In this way, services could be allocated exactly for these elements.

Table 2. Elements of well-being (Haapola et al. 2009)

spouse and family	relatives	neighbours	relationships
appearance	health	physical condition	sex life
wealth	consumption possibilities	permanence of a job	meaningfulness of a job
amiability	faith	travelling	physical exercise
learning	cultural interests	entertainment and recreation	community
organizational activities	respect	influence	choices
accommodation	neighbourhood	home environment	closeness of services
pleasures of everyday life	homely environment		

This barometer also uses a combination of need-based and resource-based tripartite classification of well-being: having – loving – being (doing), outlined by Erik Allardt in 1976 (Allardt 1976). This classification is still considered current in social science well-being research. How well does it suit as the basis of research on child and youth well-being? What kind of barometer would we need to receive enough information on child and youth well-being? What about the viewpoints of action, inclusion and exclusion?

The discussion on child and youth well-being often focuses on the provision and protection of well-being. Thus, adults' responsibility for child and youth well-being becomes the perspective. A child alone is no longer the centre of discussions on well-being, but children's rights to the special protection in the society, to the share common resources, and to participate in issues concerning children themselves take central place. In research on child and youth well-being from the perspective of solicitude, Marjatta Bardy (Bardy 2009b) compiles the elements of well-being as the central elements of rights, Provision – Protection – Participation, in the UN Convention on the Rights of the Child according to the following figure:



Figure 1. Dimensions of well-being in solicitude for children and youth  
(based on Bardy 2009b, 36)

Different dimensions of child and youth well-being overlap each other, but neither of them can replace another. By being measurable and having an effect on socio-political action, the having-element has, however, been dominant in the research and other discussions on adult as well as child and youth well-being. In Finnish socio-political research discussions, subjective experience and themes of participation can be interpreted as dominant paradigms in the 21st century. Since 1990s, child and childhood research has provided and tested a wide range of tools that can expound information and experiences of children and youth (e.g. storytelling, interviews with children, ethnographic research on interaction, youth barometers). However, these have barely been utilized in the large-scale discussion on child and youth well-being. The loving-element seems to be a particularly difficult research subject. The Finnish Academy has now started a wide research programme on this topic: the SKIDI/KIDS – programme will take place from 2010-13 with multi-dimensional research projects regarding children and youth, childhood and adolescence (Suomen Akatemia 2010).

Furthermore, Marjatta Bardy has brought out the historical viewpoint on the well-being of families with children: in history, the ways of earning a living and living conditions of families, the acceptance of new generations and community relations, as well as orientation towards the world, participation, significance and identity have influenced the well-being of children and families. From this point of view, the mutual relations between a family and a society, changes in responsibilities, for example, changes in the ways of earning one's living, and numerous cultural manners in the discussion on human existence are emphasized (Bardy 2009a). How should this viewpoint be noticed when defining the indicators of child and youth well-being?

Pauli Niemelä (2009) has researched the dimensions of well-being in a classification based on needs, participation and resources. He structures human action into being, doing and having and suggests the material, social and spiritual as the basic dimensions of action. Thus, according to his point of view, well-being can be conceptualized as good feeling (well-being), good action and living (well-doing), and good having/success (welfare). In every basic dimension, these concepts are represented in various ways, and in addition, they can be discussed through experience (well-being). Figure 3 presents a table based on Niemelä's suggestion on elements of well-being. What is well-being in this kind of research from the viewpoint of children and youth?

Table 3. Conception of well-being based on the theory of functionality  
(Niemelä 2009, 218; Niemelä 2010, 25-33)

Elements of well-being	Dimensions of well-being: material	social	spiritual
resources, having welfare	financial wealth, income, accommodation, material confidence	political influence, social confidence, social capital (power, trust)	know-how, profession, education, spiritual confidence
participation, doing well-doing	working life, work community, physical self-actualisation	civic- and organizational activity, social self-actualisation	cultural activities, studies, spiritual self-actualisation
satisfaction of needs, being well-being	nutrition, clothing, health, physical well-being	family, friends, love, happiness, good relationships	authenticity, safety, autonomy, self-acceptance

Last but not least, it is worth noting that well-being in our country is often seen as a negation of malaise, when utilizing the existing statistics of, for example, services and support. In this case, the statement is that the fewer people there are in need of income support, without education, as well as children and youth taken into care and as clients of mental health services, the better the condition of children and youth. The first objection is, of course, that the statistics of service users can be assessed to tell more about the availability and quality of services than about the actual situation of children and youth. On the other hand, research as proving negation of malaise does not bring out the various elements or experiences of well-being. The way of talking about children in our society has in fact been defined as “talking about worries” (Harrikari 2009).

When defining the indicators of child and youth well-being, how are the models of Karisto, Allardt, Bardy and Niemelä and the existing information on negation of malaise seen? There are at the moment at least three ongoing research projects and compilations of indicators in our country: the KASTE programme, School Health Promotion Study by the National Institute for Health and Welfare, and the policy programme for the well-being of children and youth. Each have in their own perspective taken a stand on what should be evaluated and researched from the viewpoint of well-being of children and youth in our country. In the following section, I will discuss these indicator compilations more closely.

## 2.2. KASTE INDICATORS

The National Development Programme for Social Welfare and Health Care (KASTE) 2008–2011 has 19 various indicators. We can assume that these indicators are at the moment the central indicators of social and health care in our country. These indicators are presented in the program as goals that are pursued by various projects of the program. Indicators of the services for children, youth and families are the following:

- The number of children placed in care outside the home in relation to the age group will begin to decline.
- The proportion of 17–24 year-olds with no education after comprehensive school will remain below 10 percent of the age group.
- The proportion of 18–24 year-olds receiving long-term income support to the corresponding age group will be halved.

- The proportion of 16–18 year-old smokers will decrease by five percentage points.
- The low income level of families with children will drop below 10 percent (Sosiaali- ja terveydenhuollon kansallinen kehittämissuunnitelma, 2010).

To achieve the goals as these indicators suggest, social and health care services should therefore improve children's home environment, ensure education for young people, secure the financial situation of children, youth and families, and improve young people's healthy lifestyles regarding smoking. It can be noted that in this program, child and youth well-being is seen as a combination of home, school, finance and a healthy lifestyle.

### 2.3. INDICATORS OF THE NATIONAL INSTITUTE FOR HEALTH AND WELFARE

Every other year, the National Institute for Health and Welfare, through the School Health Promotion Study, monitors the well-being of 8th and 9th graders in comprehensive school and 1st and 2nd graders in upper secondary and vocational schools with 44 various indicators. These indicators are divided into five categories: living conditions, school as a working environment, health and health-related habits as well as health knowledge and student welfare services.

The category of living conditions includes questions about family structure, smoking and unemployment of parents, a youth's spending money, parents' knowledge of where their children spend weekend nights, conversational problems with parents, friends, experiences of physical threat, and minor offences.

School as a working environment includes physical working conditions, accidents, the atmosphere at work, the feeling of being heard, amount of work, difficulties in studies, lack of help, bullying, truancy, and enjoying going to school.

Questions concerning health include state of health, chronic diseases, overweight, symptoms, tiredness, neck and shoulder pain, headaches, depression and exhaustion.

The category of health-related habits include questions about eating of school meals, unhealthy snacks, brushing one's teeth, amount of exercise, bed-times, smoking, being drunk, and experimenting with narcotics.

Health knowledge and student welfare services include questions about health education and how interesting these topics are, how the education

has improved their ability to take care of their health, information on sexual health, information on intoxicants, lack of help, how easy it is to make an appointment with the school nurse or doctor, and contentment with school health care (Kouluterveyskyselyn indikaattorit, 2010).

Can we assume that such broadly investigated parts of young people's lives best describe the well-being of youth of this age? At least they give an extensive picture of the number and changes of youth malaise. One goal of the National Institute for Health and Welfare in this research seems to be to find such severe trends that require the service system to intervene.

#### 2.4. POLICY PROGRAMME INDICATORS

The working group of the policy programme for the well-being of children and youth appointed by Matti Vanhanen's second Government has worked during the current government term to develop the indicator package appropriate for the evaluation of child and youth well-being (Lasten ja nuorten hyvinvoinnin kansalliset indikaattorit, 2011). The indicators are supposed to particularly describe the implementation of the UN Convention on the Rights of the Child in Finland, a convention that Finland also ratified twenty years ago. The working group's job has been completed during the writing process of this article.

The professionals gathered together by the policy programme think that child and youth well-being consists of:

- living standard,
- health and well-being,
- education and learning,
- safe everyday life and home environment,
- participation and social activities, and
- support and protection provided by society.

Is it possible to find within these headlines an adequate picture of child and youth well-being? The report of the group is most carefully written, and gives a wide and deep picture of the issue of child and youth welfare indicators. However, most of the suggested indicators still describe well-being from the negation of malaise point of view, mostly according to the service provider's interests.

These indicators are, as mentioned before, mainly built to serve the need to describe the Finnish implementation of the UN Convention. After research-

ing the member states of the EU, Finland is in fifth place in the overall statistics of child and youth well-being. Our children do especially well in the sectors of material well-being and housing, but health and personal relations are weakest. In the OECD comparison that has been made with slightly different indicators, Finland is seventh. According to it, the educational well-being of children and youth is especially good in our country, and risk behaviour and the quality of school life are weakest (Doing Better for Children, 2009). There are no, however, indicators for all indicator categories of these comparisons in the statistics that are at the moment compiled in Finland. What does it tell us about the particular information on subjective experiences, families and social relations, which are not systematically compiled here?

Table 4. Elements and dimensions of child and youth well-being  
(based on Allardt 1976, Bardy 2009 and Niemelä 2009)

Elements of well-being in the life of child and youth	Indicators in the dimensions of well-being: material	social	spiritual
resources, welfare - having Provision	financial security, housing, spending money	leisure activities, social capital, cosiness of neighbourhood	early education / day care, education, learning, study possibilities
participation, doing well-doing – being/doing Participation	housework, summer jobs, possibility to influence on the family's purchases, travelling	playing, organizational activities, use of media, friends, entertainment and recreation, experiences in participation	cultural activities, experiences in significance, ethical choices
satisfaction of needs, being well-being loving Protection	basic care, nutrition, clothing, health, appearance, physical well-being	family, friends, love, happiness, well-being in relationships, quality of early interaction, dating/sexuality	authenticity, faith, autonomy, self-acceptance, safety of growth and development

## CONCLUSION

The research on child and youth well-being is challenging and significant. We still need multidimensional scientific research on what child and youth well-being looks like today. The compilation and research of indicators is one

part of this study. With indicators, we have a quick and relatively versatile picture as to the economic-political decision-making of the life of children and youth in our country. Nordic and European comparability of indicators makes extensive research of regional differences possible.

The evaluation relating to the use of services is not included in the previous indicator compilation I suggested. Following the use of services for children and young people is without question important, for example, to make services suitable. It may well be that demand in some way follows supply in our existing services. As I said previously, by following the use of services, we can mostly receive information on the use of services, not on the phenomena behind it. It is, for example, impossible to say that an increase in the amount of children and youth taken into care or the lines for mental health services indicate the deterioration of child and youth well-being. It may be a sign of this, but it may as well be a sign of a service system that functions too well or poorly. Influencing factors can be the lack of proactive or early support services, financial choices, lack or incompetence of employees, changes in working methods and training of employees – to mention only a few. Because of this, I would say that the choice of indicators of child and youth well-being should be separated from the research of the child and youth service system.

However, researching indicators is not enough. Well-being is so strongly qualitative that it is necessary to widen the research perspective with qualitative research methods, case studies, ethnographies, creative methods relating to hearing and improving the participation of children and young people, as well as with versatile means of expression of art and culture. With this fascinating combination, it is possible to attach entirely new strands.

In the last figure, there is a combination of different theoretical and practical indicators mentioned above. Is it be possible to use such a wide selection of indicators in order to find out more about the well-being of our children and youth?

## REFERENCES

- Allardt, E. (1976). *Hyvinvoinnin ulottuvuuksia*. Helsinki: WSOY.
- Bardy, M. (2009a). *Hyvinvoinnin ulottuvuudet – perheen ja yhteiskunnan suhteissa*. In Lammi-Taskula, J., Karvonen, S. & Ahlström, S. (eds) *Lapsiperheiden hyvinvointi*. Helsinki: THL.

- Bardy, M. (2009b). Lapsuus, aikuisuus ja yhteiskunta. In Bardy, M. (toim.). Lastensuojelun ytimissä. Helsinki: THL.
- Bardy, M. (2010). Hyvinvoinnin poliittisuus - ja henkilökohtaisuus. In: Bardy, M. & Parrukoski, S. (ed.). Hyvinvointi ilmastonmuutoksen oloissa? Keskustelunavauksia tulevaisuusvaliokunnalle. Helsinki: Yliopistopaino.
- Bradshaw, J. Cross country comparisons of child well-being in Europe. Seminar presentation 3.9.2009. III Lapsitiedonfoorumi.
- Broberg, A., Almqvist, K. & Tjus, T. (2005). Kliininen lapsipsykologia. Helsinki: Edita.
- Brown, J. R. & Dunn, J. (1996). Continuities in emotion understanding from three to six years. *Child Development*, 67, 789-802.
- Cassidy, J. (1998). Child-Mother Attachment and the Self in Six-Year-Olds. *Child Development*, 59, 121-134.
- Denham, S. A. (1986). Social Cognition, Prosocial Behavior, and Emotion in Preschoolers: Contextual Validation. *Child Development*, 57, 194-201.
- Denham, S. A., McKinley, M., Couchoud, E.A. & Holt, R. (1990). Emotional and Behavioral Predictors of Preschool Peer Ratings. *Child Development*, 61, 1145-1152.
- Denham, S.A., Zoller, D. & Couchoud, E.A. (1994). Socialization of Preschoolers' Emotion Understanding. *Developmental Psychology*, 6, 928-936.
- Denham, S. A., Blair, K. A., DeMulder, E., Levitas, J. Sawyer, K., Auerbach-Major, S. & Queenan, P. (2003). Preschool Emotional Competence: Pathway to Social Competence. *Child Development*, 1, 238-256.
- Doing Better for Children. (2009). Comparative Child Well-being across the OECD. New York: UNICEF.
- Dunn, J. Brown, J. & Beardsall, L. (1991). Family talk about feeling states and children's later understanding of others' emotions. *Developmental Psychology*, 3, 448-455.
- Eisenberg, N. & Morris, A. S. (2002). Children's emotion-related regulation. *Advances in Child Development and Behavior*, 30, 189-229.
- Feldman, R. & Klein, P. S. (2003). Toddlers' self-regulated compliance to mothers, caregivers, and fathers: Implications for theories of socialization. *Developmental Psychology*, 4, 680-692.
- Haapola, I., Karisto, A. & Kuusinen-James, K. (2009). Hyvinvoinnin ja palvelujen muutossuunnat. Päijät-Hämeen hyvinvointibarometrin 2008 tuloksia. Verson julkaisu 4/2009.
- Harrikari, T. (2008). Riskillä merkityt. Lapset ja nuoret huolen ja puuttumisen politiikassa. Helsinki: Nuorisotutkimusseura/Nuorisotutkimusverkosto.
- Harris, P.L. (1994). The Child's Understanding of Emotion: Developmental Change and the Family Environment. *Journal of Child Psychology and Psychiatry*, 11, 3-28.
- Hautamäki, A. (2000). Kiinnittymisteoria. Teoria yksilön kiinnittymisestä tärkeisiin toisiin ihmisiin, kiinnittymisen merkityksestä kehitykselle ja kiinnittymisen katkokista. *Psykologia*, 35, 4-29.
- Hautamäki, A. (2001). Kiintymyssuhdeteoria – teoria yksilön kiinnittymisestä tärkeisiin toisiin ihmisiin, kiintymyssuhteen katkokista ja merkityksestä kehitykselle. Teok-

- nessä: Sinkkonen, J. & Kalland, M. (toim.) Varhaiset ihmissuhteet ja niiden häiriintyminen. Helsinki: WSOY. 13-66.
- Kalliala, M. (2008). Kato mua. Kohtaako aikuinen lapsen päiväkodissa. Helsinki: Gaudamus.
- Karisto, A. (2003). Kohti hyvinvoinnin kokonaistarkastelua. In: Hirvonen, J., Konttinen, R., Haapola, I. & Karisto, A. Alueellinen hyvinvointibarometri. Helsinki University of Technology, The Publication Series of the Institute for Regional Economics and Business Strategy 18.
- Keltikangas-Järvinen, L. (2004). Temperamentti – persooallisuutemme perusta. Helsinki: WSOY.
- Komsi, N. (2009). Child temperament and parental personality: continuity and transactional change. University of Helsinki. Department of psychology, Studies 60.
- Kouluterveyskyselyindikaattorit. Available at <http://info.stakes.fi/kouluterveyskysely/FI/tulokset/indikaattorit/index.htm> [30.11.2010].
- Kouvo, A. & Silvén, M. (2010). Finnish mother's and father's attachment representations during child's first year predict psychosocial adjustment in preadolescence. *Attachment & Human Development*, 12, 1-21. Published online first.
- Lasten, nuortenjaperheidenpolitiikkaohjelma. Available at [http://www.minedu.fi/lapset\\_nuoret\\_perheet/](http://www.minedu.fi/lapset_nuoret_perheet/) [ 26.8.2010] .
- Lyytinen, H. & Lyytinen, H. (2006). Tiedollinen kehitys lapsuudessa. Teoksessa: Sinkkonen, J. (toim.) Pesästä lentoon. Kirja lapsen kehityksestä kasvattajalle. Helsinki: WSOY. 87-120.
- Moccia, P., Anthony, D., Brazier, C., Dettori, E., DiNoia, M., Gebre-Egziabher, H., Lai, A., Leston, N., Maitre, C., Mekonnen, M., Moehlmann, K., Nayak, P., Rutgers, C., Shankar, S. & Yemane, J. (eds) (2009). *The State of the World's Children 2010. Special Edition*. New York: Brodock Press.
- Mäkelä, J. (2003). Piirteitä aivojen varhaisesta kehityksestä. Teoksessa: Niemelä, P., Siltala, P. & Tamminen, T. (toim.), Äidin ja vauvan varhainen vuorovaikutus. 107- 124. Helsinki: WSOY.
- Mäkelä, J. (2006). Aivojen varhainen kehitys vuorovaikutussuhteissa. Teoksessa: Sinkkonen, J. (toim.) Pesästä lentoon. Kirja lapsen kehityksestä kasvattajalle. Helsinki: WSOY. 13-43.
- Niemelä, P. (2006). Hyvinvoinnin käsite toiminnan teorian valossa. In: Niemelä, P. & Pursiainen, T. Hyvinvointi yhteiskuntapoliittisena tavoitteena. Sosiaalipoliittisen yhdistyksen tutkimuksia 62. Kuopio: Kuopion yliopisto.
- Niemelä, P. (2009). Ihmisen toiminnallisuus ja hyvinvointi sosiaalityön teoreettisen ymmärryksen perustana. In: Mäntysaari et al (eds). Sosiaalityö ja teoria. PS-kustannus.
- Niemelä, P. (ed.) 2010. Hyvinvointipoliittikka. Helsinki: WSOYpro Oy.
- Paaso, H. (2008). Tunteiden säätelyn yhteys sosiaalisiin suhteisiin ja mielenterveyteen. Kymenlaakson ammattikorkeakoulun julkaisu. Sarja B.
- Pekkola, J. (2010). Miten nuoret voivat hyvin ja huonosti. In *Tutkimusjulkaisu 2010*. Kymenlaakson ammattikorkeakoulu. Sarja B.

- Persoonallisuuden ja sosiaalisen käyttäytymisen kehitys lapsesta aikuiseksi. Available at <https://www.jyu.fi/ytk/laitokset/psykologia/tutkimus/laku> [30.11.2010].
- Rothbart, M. K. & Bates, J. E. (2006). Temperament. In Damon, W. & Lerner R. M. (Editos-In-Chief) & N. Eisenberg (Vol. Ed.), *Handbook of Child Psychology, Volume 3, Social, Emotional and Personality Development*.
- Salo, S. (2006). Kiintymyssuhteen merkitys elämänkaaren aikana. Teoksessa: Sinkkonen, J. (toim.) *Pesästä lentoon. Kirja lapsen kehityksestä kasvattajalle. (44-77)*. Helsinki: WSOY.
- Sauli, H., Reinikainen, P., Säkkinen, S. & Rousu, S. Lasten hyvinvoinnin kansalliset indikaattorit. Lapsen oikeuksien sopimuksen ja lapsipolitiikan toteuttamisen valossa. Seminar presentation 3.9.2009. III Lapsitiedon foorumi.
- Silvén, M. (2002). "Something from almost nothing" Early Interaction and Language in Finnish Children: Cascading Effects from First Words to Reading? *Annales Universitatis Turkuensis*.
- Sinkkonen, J. (2006). Lapsen arvoituksen äärellä. Teoksessa: Sinkkonen, J. (toim.) *Pesästä lentoon. Kirja lapsen kehityksestä kasvattajalle. (7-12)*. Helsinki: WSOY.
- Sinkkonen, J. (2008). *Mitä lapsi tarvitsee hyvään kasvuun*. Helsinki: WSOY.
- Sosiaali- ja terveydenhuollon kansallinen kehittämisohjelma (Kaste). Available at [http://www.stm.fi/vireilla/kehittamisohjelmat\\_ja\\_hankkeet/kaste](http://www.stm.fi/vireilla/kehittamisohjelmat_ja_hankkeet/kaste) [30.11.2010].
- Sroufe, A. (1996). *Emotional Development. The Organization of Emotional life in the early years*. Cambridge Studies in Social & Emotional Development. New York: Cambridge University Press.
- Suomalainen lapsi (2007). Helsinki: Stakes.
- Suomen Akatemia. Uusi tutkimusohjelma kehittämään lasten ja nuorten hyvinvointia. Available at <http://www.research.fi/ajankohtaista/skidi> [5.11.2010].



# COMMUNICATION COMPETENCES AND LIFESTYLES OF SCHOOL AGE CHILDREN

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## ABSTRACT

The presented article constitutes a part of media pedagogy research focusing on the complexity of issues connected with the role of the mass media and multimedia in forming the lifestyles of school age children. In recent years, media, regarding the environment accompanying human life, are more and more often perceived as the inherent attribute of a new lifestyle. Undoubtedly, it is also the development of information technology and media that underlies the variations of lifestyle conditions in an individual and social dimension, setting the latest trends in the process of forming a personality.

## KEYWORDS

*Communication competencies, school age children, media*

## INTRODUCTION

In the light of the research, the “lifestyle” category dates back to the beginnings of the 20<sup>th</sup> century when in Europe, especially in Germany, the phenomenon of seeking a new quality of life and a different lifestyle (*neue Lebensstil*) as

well as a new youth culture by young people was noticed (Nowak, Nanni, 1990, 23-24). In the article, the “lifestyle” category is analysed with reference to the period of adolescence as the stage of development at which their lifestyle forms most intensively and which falls at 11-16 years of age in the child’s life (Hurlock, 1985, 85). In the article, the area of research is narrowed to a group of 11-14 year old children, that is the age of pupils from the 5<sup>th</sup> grade of primary school to the 1<sup>st</sup> grade of junior secondary school. The choice of this age period is not random because it involves intense physical, emotional and cognitive changes.

The age of adolescence can be characterised by a strong need for being accepted and feeling a sense of security, therefore relationships with peers gain special meaning. Seeking patterns of behaviour and creating one’s own hierarchy of values take place – there is great sensitivity regarding the spheres of ethics, morality and aesthetics. Then an identity crisis can be observed, which one should understand as a turning point constituting a great developmental opportunity. It is also the time of forming their sexual identity and finally, one can observe the process of dispersing roles and lack of emotional stability in behaviour, which is mainly noticeable in interpersonal relationships (Erikson 1963a, 261-263; Chłopkiewicz, 1989, 235-236).

Substantiating the subject, it must be emphasized that it happens very often to young people that media become an agent for getting to know about the world, helping in communication between people, creating a specific language for describing reality and at the same time providing a special educational environment which reflects a specific lifestyle. In the light of the laws of series, copying or models, this reality presented in the form of ambiguous generalizations becomes, especially for a child, very attractive and at the same time possessive, since in a way it forces them to accept the promoted types of behaviour and a specific lifestyle. The indicated area of research analysis, through the characteristics of the period of adolescence and various communication competences of the recipients, led to distinguishing their three basic lifestyles: “active,” “imitative,” and “passive,” which are conditioned by the amount of time spent on using the media.

## I. AN UNDERSTANDING OF LIFESTYLE

A lifestyle, similarly to every form of existence, expresses a specific person’s image, which the person chooses in their private and social life, led in

a conscious way and with a distinct intentional goal. This category also has interpretations and is understood in educational methods. A special intensity of people's interest in matters of everyday living falls on the 1960s. These interests were expressed by forming many new sociological concepts, which tried to answer a number of questions referring to the developmental potentials of an individual and connected with noticeable differences in the models of behaviour and attitudes manifested in western and eastern Europe. The above mentioned differences in perceiving ways and lifestyles as well as criteria for the quality of life correlated with them were a point of reference in search of variations in the patterns of behaviour.

In the literature on the subject, we find a lot of typologies of lifestyles adopting various criteria for distinguishing them, based both on theoretical analyses and on empirical research (Siciński, 1976b, 15-20; Jawłowska, 1976, 205-206). In the course of years, the way of understanding this very notion underwent numerous transformations, therefore, classifications and typologies differ from one another on account of various ways of defining a "lifestyle" and the "style of living." Moreover, besides classifications justified substantially and formally, there are pseudo-classifications of lifestyles as well as various sources and cognitive bases of these divisions and different criteria considered for specific categorizations and typologies (Siciński, 1993d, 17-18).

The variety of contents, forms and internal structural connections a lifestyle manifests and expresses make its description and classification difficult. Within the multitude of these typologies, one should distinguish two approaches (Siciński, 1988c, 39). The first, a behavioural approach, concerns understanding and defining the style of living, which is usually a form of an accurate and photographic image of a person's or a social group's lifestyle, and the description of the direct reality. The second is an understanding approach, which attempts to define a lifestyle and uses a rather theoretical construct constituting an essential element of theoretical concepts of phenomena or general sociological knowledge.

Another classification concerning a lifestyle is shown by the holistic approach, which directs research at presenting the entirety of everyday life as far as possible from a selective viewpoint, which considers the analyses in terms of a given sphere of life and usually refers to leisure time, work and consumption (Siciński, 1988c 37-40). Regardless of how a lifestyle is understood, it is always considered in the aspect of expressed human behaviour, and due to this fact, is discernible, as well as typical behaviour, which includes socially practiced models and standards.

A lifestyle is correlated with sex, age, psychophysical construction, character, emotions, personality reactivity as well as with spirituality and the influence of the environment. It integrates the listed elements for the purpose of obtaining balance between the internal attitude and its outside manifestation. Typical of a child's lifestyle are: impermanence, changeability, instability and unpredictability. It is therefore worth noting the fact that from the pedagogical point of view, a lifestyle is a subject concerned with orienting and raising. It can be characterised in terms of the repeated forms of imitation, criticism and rejection, a search for oneself as well as individual and social creativity. A lifestyle is a way of non-direct upbringing, aiming towards the personal choice of the concept of life with an accepted system of values and the ability to communicate socially (Gianola, 1997, 1066).

The "lifestyle" category was introduced to psychology by A. Adler, who emphasized that it refers to an individual, specific for a given person's way of living, all of the motives, attributes, interests, values, behaviour, the way of perceiving the world and reacting taken together. This notion is also used with reference to the lifestyle of children, which in Adler's opinion ends - finds its conclusion, supplement - in the fourteenth or fifteenth year of age, when it does not yet undergo violent and radical changes (Adler, 1928, 18-20; Foulquié, 1991, 449-450).

A lifestyle is determined by a variety of economic, social, cultural, psychological and geographic-spatial factors. The person's activity is a vital element contributing to a lifestyle in terms of satisfying needs and realizing values and life activity (Jawłowska, 208-209). A lifestyle is closely connected with the accepted system of values, the level and type of education, the level of affluence, the type of employment, the way of spending leisure time, the level and character of consumption, involvement in cultural life, social activity, the type of personal background and life as well as the kinds of human relationships. At the same time, the factors mentioned above diversify society and divide it into many spheres, which confirms the thesis that a lifestyle is a characteristic correlate of the functioning and singling out of social groups. A lifestyle depends on social norms and social background the person identifies with and personal convictions and values. It also depends on the general economic and political structure of a given society.

In seeking the determinants of a lifestyle, one should take into account mutual relations of various spheres of activity and their psychophysical effects. All comparatively independent choices in the field of a lifestyle are not only socially and culturally conditioned but to a considerable degree they are lim-

ited by health and the state of the psychosomatic structure of a person, which influence both the choice of values as well as capabilities to express them. The psychophysical dimension gains a special meaning in the situation of a greater common threat of diseases associated with the progress of civilization, which is connected with the person's indisposition to make any effort and remain active as well as ponderousness and various manifestations of long-lasting exhaustion, all of which are treated as psychophysical disorders (Pawelczyńska, 1976, 148). Such a view wins greater common recognition both among doctors, physiologists, psychologists, sociologists and teachers. A contemporary man, exposed to the negative consequences of a technological civilization, must therefore develop space for a healthy lifestyle.

Our technological civilization requires introducing a conscious order into the social life. Implementing the intellectual, moral and emotional orders is essential. It also requires a functional, aesthetic and organizational order (Pawelczyńska, 178). The meaning and rank of a person's spheres of living set the place for specific types of behaviour within the structure of a given lifestyle (Siciński, 1977b, 288). One should remember that the mechanisms which lead to choosing a specific lifestyle are not all well-known, it is only possible to point out psychological, social and cultural conditioning.

A lifestyle which is representative for a specific group of people manifests itself in a typical manner for this community in the society. In addition, as A. Siciński explains, this "manner is a specific group of everyday behavioural types for members of that community, constituting demonstrations of their social situation, and thanks to this, enabling them to possess identification" (Siciński, 1976a, 13-14). Many models of living usually function in society, however, a person chooses the one which expresses her or his individuality or the feeling of belonging to a given social group and at the same time marking their place in the structure of the group. One can assume that where a given person sees the realization of their plans depends on the dominating life orientation adopted by them. Social groups most often create lifestyles typical for them, which they present and express through their kinds, attributes and specificity. On the other hand, the lifestyle of a given person is their sign of being part of a specific social group. It can be both the object of goals and aspirations or even those not being accepted or the ones rejected by the person, just as for the entire group (Siciński, 1977b, 301-303; Hejnicka-Bezwińska, 1991, 39-40; Dyczewski, 1992, 231-232).

Pointing to the multitude of definitions of the term "style," A. L. Kröber emphasises that it is possible to distinguish three dominating categories:

1) style is a typical thing, 2) singling out and 3) referring to the style of living. He also indicates the constancy of forms and emphasizes that the forms constituting style are coherent enough to integrate in terms of specific patterns of behaviour. Kröber also assumes that it is possible to talk about a style only when there is some freedom of choice and behaviour types are not completely forced (Kroeber, 1963, 3-4).

A lifestyle is usually connected with making everyday choices resulting from adopted principles and cultural patterns, being applicable in a given social environment for a child's life. Basic for a "lifestyle" are particular types of behaviour, meaning specific attributes and properties on the basis of which we can make conclusions about real or predicted conduct of people or a group. A lifestyle is also encompassed in the context of time management in reference to various forms of activity and communication among people, their interrelation and choices (Gianola, 1066).

The conditioning of actual everyday behaviour is caused by the influence of direct and indirect factors (through the system of values, traditions and social relations). One should include individual attributes as well as whole sets of features, such as elements of a lifestyle, in the context of behaviour, i.e. activity and action. In the notion "lifestyle," both the forms of the person's behaviour as well as the psychophysical mechanisms constituting their basis are included – that is motivations, needs, types of behaviour, accepted values, the way of perceiving the world and reacting. Seeking determinants of a lifestyle, one should concentrate on the mutual relations of various spheres of activity and their psychophysical effects. All relatively independent choices in the field of a lifestyle are conditioned both socially and culturally as well as to a large extent limited by the state of the organism and the regularities of its functioning. Taking interest in the lifestyle is also connected with the change in attitudes towards culture. Regarding culture as an area of forming the conditions of people's everyday existence, it encourages reflection on its core values, functionality of continuing norms, patterns and standards of behaviour (Jawłowska, 206).

A lifestyle is formed as every type of existence forms, develops and changes. It is correlated with age, sex, psychophysical construction, character, emotionalism and reactivity of the personality, especially within spirituality, not ignoring the influences of the social environment. It merges into one or aspires to the adjustment between the harshness (strictness) blocked from the inside and reaches (is manifested) outside. It forms, grows and develops during the process of a person becoming an individual. From a pedagogic point of view,

a lifestyle can be comprehended as a part of the content of upbringing which is born thanks to its methods, the quality and expectations, the results. Highly valued, it is an exceptional “object” of upbringing. In fact, a lifestyle is “raisable,” undergoes forms of imitation repeating itself, criticism or rejection, search and attempts, individual or group creativity. The formation process of a lifestyle is a process of giving a specific form to various kinds of activity and establishing relatively constant relations between them. Groups or social circles can form it and give it to one person or they can have a tendency of imposing it upon everyone. A personal education style has numerous consequences, not only in the dimension of imitating the example. It is important to head towards one’s own lifestyle, which is a means of non-direct upbringing, includes the entirety of comparatively permanent forms of a person’s or group’s activity, expresses the private and public way of perceiving oneself and values as well as being a way of communicating and perceiving reality.

## 2. THE CHARACTERISTICS OF CHILDHOOD AND THE PERIOD OF ADOLESCENCE

Referring to the theory of childhood, both in the humanistic concept of psychology and pedagogy as well as political transformations occurring in Poland, it is possible to assume that the notion of childhood in the social and cultural category denotes the child’s world: his experiences, activity and behaviour as well as relations with other people and their effects, which have their source in: a person’s living conditions and environment, family, school, peer group, everyday life, contacts with culture, especially television and other electronic media (Smolińska-Theiss, 1997b; Izdebska, 2000, 23).

In the literature on the subject, there are two presentations of childhood mentioned: as an object and as a subject – with the basis in perceiving in an integral way the unity of the world the child lives in and where the child is an active and creative subject. B. Smolińska-Theiss understands subjectivity as “socially accepted conviction about the place of a child in the social structure and about the fact that it is a co-partner, co-citizen, co-designer. The child’s subjectivity means above all that its development takes place due to a young person’s own activity in their contacts with reality” (Smolińska-Theiss, 1993a,

11). An integral look at a child allows noticing many determinants which influence her or his life and also points out the threats and recognizes the benefits in the process of growing up. In the research on the social dimensions of childhood, one should take into consideration: mental, social and cultural meanings which determine the way of spending time, social environment of the child and recognizing the escalation and the ways of reducing negative effects of the influence of extreme situations on children and teenagers (Theiss, 1996, 12).

The period of growing up is the time when the types of behaviour and extremely important experiences for the young person's development become apparent. Essential for explaining the child – media relation is referring to this as the period of growing up – called adolescence by psychologists – which the examined pupils are in. Soon after reaching the age of 10, the person starts maturing sexually and procreation is possible. This period is called puberty and even though physical developmental changes are the most obvious at that time, the changes apply both to the cognitive sphere and social interactions as well as to emotions and the “I” awareness (Birch, Malim, 1998, 120). However, adolescence, defined as the period lasting from the beginning of puberty to the stage of maturity, is a longer period than puberty. According to E. Erikson, adolescence is a period in development when the person seeks his or her personal identity (Erikson, 1968b).

The crisis of a “sense of identity – versus dispersing roles” characteristic for adolescence is treated by many psychologists as crucial for the entire development. The main objective of a person growing up is to obtain a sense of security, the stable “I” identity and self-awareness. Therefore, in order to acquire this sense of maturity, a young person tries out many roles and types of behaviour, but at first without too much commitment. As A. Birch and T. Malim emphasize: “in this way, long-lasting attitudes and values develop gradually, professional, family and life choices take place, becoming understandable for the individual and other people around him” (Birch, Malim, 122). Next, failure to achieve the feeling of a long-lasting and satisfying identity results in dispersing roles or the sense of confusion as for who the person is. Also, excessive pressure on the part of the parents and other important people develop the sense of loneliness and lack of acceptance, which can lead to mental or physical withdrawal from the social and cultural life.

In the most dramatic cases of dispersing roles, a teenage person can adopt a negative identity, which can be characterised by rebellion and other forms or types of behaviour not accepted by parents. Difficulties appearing in the

everyday functioning of a child, particularly in relationships with parents, apply both to an individual as well as a social dimension, since they are also connected with the necessity to make first decisions in relation to one's own future. One should emphasize the exquisitely important role of parents in achieving a long-lasting and relevant sense of identity by a child growing up. Research in this area shows that teenagers who demonstrate improper social adaptation and have mental problems more often experienced rejection and a sense of hostility rather than acceptance and love from their parents (Birch, Malim, 123). Therefore, a significant factor determining the character of the relation between the parents and the child is the way the parental hold is realised.

The theory of cognitive development by J. Piaget mentions the new level of thinking, which appears at the same time as entering the period of puberty. This is formal-operational thinking, which expresses the ability to think logically, verify abstract hypotheses systematically included into the language of logical sentences without referring to a specific reality.

During the period of adolescence, essential transformations of the cognitive sphere take place as well. Through processes of growing up, people gain a more analytical character and become the subject of deliberate control to a large degree. They more often display the ability to design and improve problem-solving strategies both at school and in everyday social situations. It is also a time when both orientation at developing specific interests as well as planning and taking directed choices for the future, among other things concerning the choice of the future profession, take place.

It is also very important to take into account transformations in the cognitive sphere with reference to moral development. Research work by L. Kohlberg (Kohlberg, 1976) concerning moral development shows that moral values in the period of adolescence are on a conventional level. In early adolescence (conventional level), moral thought of a teenager is focused on the concern for the family's and society's interest and patriotic values. On the other hand, the more mature and older teenagers become (post conventional level), being at the stage of moral principles, they base their judgements on their own conscience. It is the time when a young person asks themselves questions concerning the sense and goal of life and seeks answers to these questions in the surrounding reality. This is all connected with the process of looking for the patterns of behaviour and verifying the world of values which he or she could regard as significant for their life in both individual as well as social dimensions (Bis, 2009c, 256-258).

At the same time, typical for this developmental stage, immature and labile emotionalism encourages both criticizing the often inconvenient behaviour of specific people or values as well as uncritically accepting and identifying oneself with other people or values. Strong emotions and fascinations refer especially to people from public life who carry the hallmarks of “stars” or “idols” and above all they include successful sportsmen worldwide, singers of the younger generation and actors. In relation to numerous changes accompanying the period of adolescence in various personality spheres, learning about the relation of school age children to mass media is an important issue. Consequently, showing in what way and through which mechanisms the media can develop accepted lifestyles by school age children is closely associated with social communication, which aspires to popularizing the system of an interpretative world with a specific way of creating reality. Helpful in these deliberations, and at the same time necessary, is getting to know what contents of media transmissions are favoured by the examined children.

### 3. COMMUNICATION COMPETENCES AND THE STYLES OF MEDIA RECEPTION

School age children, seeking both patterns of behaviour as well as verifying and building up their hierarchy of values, too often passively use the image of the world presented from the angle of media reality. As noticed earlier, the range of interdisciplinary research interests in the area of media and multimedia confirms that through the regularity and repetitiveness of broadcasted contents, they promote all the more firmly certain patterns of behaviour, which as a result conditions a dependency between the attitudes of children and the structure of the media, within whose range specific types of behaviour assume additional meanings and functions.

Taking into consideration the factors determining the styles of media reception, it is necessary to remember that for children, as recipients, it is not the very transmissions as much as the ideas evoked by them that have an influence. These ideas in relation to their real contents can be more or less vivid. In the end, all factors regulating the child’s behaviour and his reactions to media contents result in the notion of a communicative situation; subjective factors

also fall within the scope of the notion of communicative competence. It is also necessary to mention that among adults, the main social variables which influence the manner of using the media includes the choice of the dominating medium and the subject, which includes: sex, age, education, profession, level of affluence and place of residence. These variables determine the economic status of a person, which provides the basis for the material conditions of a „lifestyle.” These conditions analysed together designate the framework of the communicative situation in which the reception takes place. The factors diversifying a „lifestyle” cause standardization, both as regards the choice of the medium as well as the range of the species-thematic preferences (Mrozowski, 1991, 248-249).

Usually, people with a lower social status comprise the majority of mass audiences and prefer entertaining television transmissions more than people with a higher status devoting more time to reading newspapers, watching the news, current affairs and cultural programmes. This happens irrespective of the specific programs of various media. Factors determining the financial situation and a person’s „lifestyle” condition both his objective capabilities for using the media and multimedia as well as forming the needs, preferences and habits of the reception. One should remember, however, that they can always be, of course only to some extent, independent of them.

The most important, however, issue of communicative competence which considerably determines the perception and assimilation of the media results from personal differences in the ability to communicate. It is necessary to reassert that for a limited or extended sort of communicative competence, it is possible to assign two fundamentally different ways of understanding transmissions, i.e. styles of reception (Głowiński, 1977). For a recipient using a limited code, the transmission usually constitutes a one-level construction showing the image of a specific reality, in which individuals and groups function, or specific events linked by distinct cause-and-effect relationships take place. The attention of the reception focuses on keeping up with this action and events and capturing the relations occurring between them. In the end, only a narrative structure of the form, which is usually characterised by interpretation in the context of the truth and probability of the described events, is brought about and evaluations are made in the moral category of right and wrong. This interpretation is confined only to knowledge about the world, based on the recipient’s experience and the behaviour assessment accompanying it, which reflects a recognised system of values. Such a style of

reception excludes the distance necessary for intellectual reflection as well as encourages the mechanism of identification and projection and establishing the bond of empathy between the recipient and observed figures (Głowiński, 1977). Referring the attributes of the limited style of communicative competence to the examined school age children, it is possible to assume that they will most often appear among „media” children who present a *passive* lifestyle and among “average-media” children who are singled out by an *imitative* lifestyle.

What is more, the extended style of reception in communicative competence is singled out by a two-level construction, in which the described objects and events are a measure to show both more universal situations as well as expressing general contents determining the meaning of the transmission. The recipient is then more interested in the specific logic of attitudes, used argumentation, ideas passed on and mechanisms steering human action. These abilities require abstract thinking and knowledge enabling one to understand the transmission in the categories of the recognised and formed view going beyond one’s own experience. The abilities mentioned above are connected with the necessity to maintain distance towards the form, to look at its content and the formal side from a broader point of view, which excludes overly strong emotional commitment. Based on the results of research analyses, it is possible to assume that the attributes of the extended style of the reception are most typical for “non-media” children who lead an *active* lifestyle (Bis, 2009c, 258-260).

To sum up, it is possible to state that limited communicative competence of the recipient favours a more derivative and imitative style, which treats the transmission as an actual description of reality. On the other hand, communicative competence is distinguished by the symbolic style apprehending the transmission as an exchange of ideas about reality (Mrozowski, 252). A lot of research confirms the legitimacy of the thesis that between communicative competence with the style of the reception and use of the media and species-thematic preferences, mutual relations, which strengthen the influence of the media and multimedia on the recipients, occur. M. Sysło, in terms of media competence, also indicates the need of taking into account many factors and emphasises “that for achieving media competences, a significant range of information competences is necessary” (Sysło, 2004, 73-74). Both the kind of parents’ media communicative competence and the manner of using the media in the family form the majority of patterns for the style of media and multimedia reception for children.

#### 4. LIFESTYLES OF SCHOOL AGE CHILDREN

The typology used for this work is based on the results of analyses on a specified local community. Most interesting are classifications and typologies of lifestyles taking their contents as a criterion, that is those referring directly to diversifying human behaviour and its motives. They are the typologies which use the notions of “dominating values” or “dominating orientations.” The most frequent basis for the classification and typology of a lifestyle conditioning, resulting from all sorts of external factors referring to people and communities, are economic and environmental issues as well as the issues correlated with the level of technical development. A “lifestyle” can also be considered as correlates of certain social categories. In this dissertation, the typology basis refers the lifestyles of school age children to their means of social communicating.

Analysing the relation between the media and the lifestyles of the examined children, one should take into account: the functions the media perform in the children’s lives, portraying the role of the media in the three distinguished types of “lifestyles,” the essence of individual lifestyles, and finally, the differences appearing in contents and behaviour accompanying these styles. The typology and characteristics of the singled out categories of “lifestyles” have been made among the examined children. At the same time, the description of individual typologies of lifestyles is on a general level and takes into account its most essential elements such as: main goals, core values, interpersonal relationships, everyday types of behaviour in basic for the child spheres of activity and the child’s approach towards the media. The singled out elements of a lifestyle comprise its characteristics, since taking them into account best shows present lifestyles in the examined community. Further, for all sorts of communicative competences, with reference to the examined school age children, it is possible to distinguish three basic lifestyles, which can be symbolically named as “active,” “imitative” and “passive” lifestyles (Bis, 2009c, 261-264).

#### 5. AN ACTIVE LIFESTYLE

An “active lifestyle,” more than just the time devoted to the media, includes the time period of 0.5 to 1.5 hours set aside daily for using audio-visual media. The presented style, which refers to the extended model of communi-

cative competences is representative for the smallest group of children, determined as “non-media” and constitutes 12.89% of the examined population.

Children presenting the discussed style are singled out by a creative attitude towards reality connected with an active attitude towards life, openness to various sources of cognition and seeking many capabilities of developing one’s interests. To illustrate, among the listed factors motivating children, ambition and achieving success in life were pointed to by most (70.7%) of non-media children, (58.4%) of average-media and (37%) of media children. Children whose behaviour can be described in terms of an “active lifestyle” usually use media for the acquisition of knowledge and information about the world and sometimes for relaxation. It is worth emphasizing that more non-media (53.7%) and average-media children (52.8%) compared with the media children (32.6%) think that TV programmes teach them how to live. This probably results from the selection of contents among the children, since reception awareness is encouraged in their upbringing and the style of media reception at home. All this is reflected in the opinions indicating that wisdom in singling out the film hero outweighs among the non-media (31.7%) and average-media children (29.9%) and is definitely not that important for the media children (6.5%).

In the context of creating patterns of behaviour by the media and their increasing influence on the functioning models of a contemporary family, it is particularly valuable that a significant percentage of the non-media children (58.5%) in comparison with (42.4%) of average-media and (34.8%) of media children search for behaviour patterns in their parents. School, considered the place for finding patterns of behaviour, has also been more often indicated by non-media children (48.8%) but definitely to a lesser extent by average-media (26.8%) and media children (17.4%). Undoubtedly, this is the effect of growing up in a family where being interested in the child’s matters, spending leisure time together and building appropriate interpersonal relations are important. Moreover, an appropriate and reasonable approach to the media is the result of moderation in the time set aside for receiving media transmissions and parents’ interest in the forms of organising leisure time for their children. To illustrate, the largest number of non-media children (53.7%), compared with average-media (32%) and media children (34.8%), admit that parents “very often” talk to them about spending their free time.

An essential feature singling out both an “active lifestyle” and at the same time sensible media reception is being critical about the communicated messages, which improves the ability to carry on a conversation - not to mention

discussing important issues with parents and other significant people for the child. These subjects are taken both from life experiences as well as from media transmissions. Referring to the research findings, it is possible to state that the largest number of non-media children (75.6%) search for information on important subjects at school or from intelligent people, while considerably fewer average-media (41.6%) and media children (21.7%) do so as well. Undoubtedly, this type of activity is encouraged by receiving media contents in the presence of adults - usually parents, elder siblings or grandparents. Non-media (36.6%) and average-media children (29%) more often than media children (17.4%) pointed to shared family viewing of adventure and family-audience films. The ratio of the answers concerning educational programmes and wild-life documentaries was similar, listed respectively by (29.3% and 19.5%) of non-media children, (30.3% and 13%) of average-media and (23.9% and 10.9%) of media children.

The conducted analyses lead to the conclusion that the creative and rational style of media reception presented by the parents and hence by the non-media children is closely connected with an "active lifestyle," which supports the harmonious and integral personality development of the school age children. Being involved in various forms of extracurricular classes includes the largest percentage of non-media children (80.5%) attending, as compared with a smaller but comparative percentage of the average-media (58.4%) and media children (56.5%), is a confirmation. Among additional classes, learning foreign languages and travelling are the most often listed by non-media children (48.8%); in comparison, similar answers were given by the average-media (22.1%) and media children (13%). To sum up, it is worth emphasizing that the awareness of the reception of media contents which is reflected by the "active lifestyle" is inseparably correlated with the style of media reception in the family and a specific lifestyle directed at harmonious development and education.

## 6. AN IMITATIVE LIFESTYLE

An "imitative lifestyle" in addition to the time devoted to the media denotes a time period from 1.5 to 3.0 hours, which the examined children set aside every day for using the media and multimedia. This is a style which, in

addition to limited communicative competence, is characterized by simplified and schematic media reception and is representative of the largest (72.64%) group of “average-media” children.

Children who are singled out by an “imitative lifestyle” accompanied by randomness and mass reception are characterised by lower commitment in extramedia reality cognition and concentrate their interests on visual media. As research shows, television is the main source of information for the average-media (45%) and media child (43.5%) and definitely to a lesser degree for the non-media child (14.6%).

An “imitative lifestyle” is also influenced by mass culture, very often not very ambitious, not requiring thinking and not encouraging conversations during the shared reception. The most frequent subjects of the received media forms are: sensationalized events; coarse humour in sitcoms and entertaining shows with a dubious quality of entertainment; peeping into the lives of “reality show” participants and watching the lives of other people presented in sitcoms, TV series and soap operas. This is confirmed by my research results (Bis, 2007a, 212-213), which demonstrate that more (63.2%) average-media children as compared with media (37%) children watch TV series and soap operas with their parents. In the situation when a conversation starts while watching TV together, they usually concern the exterior features of the transmission, especially: the characters’ appearance, the follow-up of the “intrigues,” sensational motives, inappropriate and often vulgar words as well as funny behaviour.

The appearance of media figures was indicated as an important attribute by the largest number of average-media children (50.2%), followed by non-media (46.3%) and media children (34.8%). At the same time, it is worth emphasizing that the examined average-media child (42%) more often than non-media (36.6%) and the media child (23.9%) watches news programmes together with their parents. However, an open question remains whether this is the result of waiting for favourite programs or whether it is caused by the continuity of the reception and in addition performing other activities, among others doing homework or eating meals. The presented style connected with random reception also results from not always competent attitudes in the range of media and multimedia reception in the family where the centre of life concentrates on the TV or computer screen.

In the analyses, it is impossible not to refer to the relationship of the examined children with their peers. Dominating subjects both with reference to the conversations with peers as well as to the forms of spending time in front

of the TV or computer screen are those concerning thrillers and computer games. Next, considering the meeting place with peers, the answers show that school is most often a meeting place with friends in the opinion (84.4%) of the average-media, (80.4%) of media and (63.4%) of non-media children. At the same time, it is necessary to explain that usually, apart from school, activity clubs and going to town, children spend time at home, most often in front of the TV and computer. The situation of limited contacts with peers due to the time devoted to the media is particularly visible at weekends.

Finally, it is possible to reach the conclusion that for children, the media, especially interactive computer games and watching films, provide an escape after a failure, fast relaxation, satisfying their curiosity and stress release. To confirm this, (26%) of average-media children, (23.9%) of media and (9.8%) of non-media children search for films and music on the Internet. In such a homogeneous media world, it is more often difficult to distinguish the virtual world from reality, since omnipresent information very often accompanied by the illusoriness of the presented reality shapes culture, customs, social attitudes, behaviour, all material man-made products as well as influences forming the views, values and needs of children and adults (Sorlin, 2002, 105-115). It is also worth emphasizing that realism of computer games was indicated by 47.2% of the average-media and 58.7% of media children. The favoured superficial style of the reception, too often inappropriate in its contents for the school age child, does not encourage developing socially accepted attitudes and norms. The effect of such behaviour is faint criticism and inability to choose appropriate contents for their cognitive, emotional, and to the least bit moral development.

The media and multimedia take advantage of the negligence of adults in forming attitudes as to using the media rationally. Therefore, they play a more and more dominating role both in presenting the world of values and patterns of behaviour typical for an "imitative lifestyle," predisposed to relativism towards attitudes and behaviour as well as in making choices and setting practical goals for oneself. It is therefore possible to assume that an "imitative lifestyle" in combination with the excess of time devoted for the reception of audio-visual media as well as lack of specified extramedia interests is the result of negligence in developing creativity and alternative forms of spending leisure time. The above mentioned difficulties in developing interpersonal relationships encourage media awareness in a child who prefers to watch and play rather than read and think or be with another person. Undoubtedly, the responsibility correlated with upbringing and forming interests and directions

in the school age child's activity results from negligence by educational circles, particularly in the family and at school.

## 7. PASSIVE LIFESTYLE

The last distinguished among the examined children "passive lifestyle," which is predisposed to spending the greatest possible amount of time in making use of the media, is determined by the time from 3.0 to 6.0 hours set aside every day for using the media. The presented style, which is connected with limited communicative competences, corresponds to the group of "media" children constituting 14.47% of pupils.

In the context of media and multimedia reception, the obtained answers of the examined children who represent a „passive lifestyle” distinguishes them by concentrating their attention mainly on watching television, DVD films, playing games on a computer and using the Internet.

The answers given indicate that (100%) of the media children, compared with (48.1%) of average-media and (14.6%) of non-media children, if they do not watch TV, play on a computer. The Internet is the very place where (67.4%) of media children, equally as many (61%) of average-media and (48.8%) of non-media children search for information on the most important subjects.

A conclusion arises that media and multimedia, especially the Internet and interactive computer games, most often remain for these children the source of both cognition and experiencing reality (which usually "shuts" them into a generated world) full of illusion, fantasy, magic and violence. The computer itself is the most time-absorbing thing for (93.5%) of media children, however, considerably less for the average-media (44.2%) child, and least of all for the non-media child (14.6 %). In the end, via computer games and the Internet, (65.2%) of media, (29%) of average-media and (9.8%) of non-media children develop their interests.

It should be mentioned that the diversity and multitude of the media offered give the child an alternative option of stress release, expressing their experiences and emotions and taking up all sorts of roles, especially in virtual computer games. What causes anxiety, however, is the fact that as much as (100%) of media, (75.3%) of average-media as well as (19.5%) of non-media children

acknowledged that computer games of the RPG and FPP type, with their dominating violent feature, are their favourite. They get involve emotionally to such an extent that it is too often hard to stop or even finish playing them. As research shows, the very opportunity for creating reality in computer games is very important for (39.1%) of media, (23.4%) of average-media and (9.8%) of non-media children. As a result, the developed curiosity about a fictional world, lack of any restrictions in terms of accessible contents and the time spent in front of the computer screen, too early arouses a child's desires, which are inappropriate in regards to his or her integral developmental i.e. physical, mental and spiritual needs.

Moreover, children representing a „passive lifestyle” are singled out by vanishing criticism, difficulties in entering into interpersonal relationships, alienation from the social environment, strong concentration on their own needs and lack of motivation for developing creative attitudes. As many as (21.7%) of the parents of media, (10%) of the parents of the average-media and (9.8%) of the parents of non-media children talk “very rarely” with their child about their interests. The effect which the above mentioned parents' attitudes have is a chronic lack of time for accompanying the child in his perception of reality and for assisting in extramedia interests. Based on the examined children's answers, it is possible to conclude that the parents are not always able to orient children in the choice of direction and development potentialities of their own interests on many other levels, such as: enriching social contacts, independent cultural activity and in fact more rational time management (Bis, 2007a, 209-213). What proves this situation to be current, which brings about immense educational anxiety, is the fact that as many as (37%) of the media children, (15.2%) of average-media children and (17.1%) of non-media children admitted that they do not have a friend. It is worth emphasizing that children have often mentioned animals as their only friends, for example, as many as (19.8%) of the media children answered that they shared all their problems with the dog.

Bringing up the issue of the child's escalating loneliness, it is also necessary to say that (22%) of the non-media children, (12.1%) of average-media children and (10.9%) of media children answered that they shared their problems with “God” or described them in a diary. All this happens because children too often do not experience closeness and the so-called “linguistic reality” at home. It is possible to say that this situation is modelled following the example of the media because in media transmission, the picture dominates to the disadvantage of the culture of the word. It is even possible to say that the

“culture of silence” is promoted, where the word dies out and loses its meaning. This gives a picture of contemporary childhood, where the category of “loneliness” of the audio-visual child spending his entire free time in front of the TV or computer screen becomes more and more common. The most commonly adopted ways of establishing contact with “other” people are extensive interactive communications with the help of Internet connections. It is also the form of dealing with loneliness. Children observing the world from the media point of view have never before been left alone as much as nowadays, since adults too often do not help them to get to know and understand the surrounding reality.

The results of my research show that repeatedly, the patterns of behaviour and the world of values presented in the media are more significant than role models given by parents or teachers. A change in the hierarchy of values and needs is visible. The answers demonstrate that the comfort of living was acknowledged as “very important” by the largest number of media children (69.6%), as compared to less than a half (49.4%) of the average-media and (26.8%) of non-media children. Similarly, wealth was indicated as “very important” more often by the media children (60.9%) than the average-media (39.4%) and non-media (26.8%) children. A noticeable, dominating attitude among the “media” children, presenting a passive lifestyle, is materialism, egoism and satisfying personal needs, which is displayed, among other things, by neglecting family and school responsibilities.

It is particularly worth emphasizing that a critical attitude towards religion and Christian values is representative of this lifestyle. A commonly expressed attitude among the examined is a negative or even annoyed attitude towards the transmission of television programs on the subject of religion. As a confirmation, (26.1%) of the media children, (28.6%) of the average-media and (14.6%) of the non-media children do not like watching religious programs. Undoubtedly, one-sidedness and specific “dullness” and emptiness of living, which the sounds of computer games seemingly try to drown out, are the result of the lack of reference to higher values. As a result of the media isolation of the child from true reality that is alive, the media and multimedia form lifestyle patterns with increasing power and influence, where hedonism, conformism, a sarcastic and ironic attitude towards weak people, relativism of attitudes and values and finally alienation from reality form the basis. In consequence, the young person condemns himself to existential loneliness, isolation and the sense of exclusion, which media images

intensify – repeatedly silent, without words creating the space of sounds and images (Leszczyński, 2002, 22).

In the end, lack of acquired skills, both in the range of contents moderation and selection as well as lack of developed criticism while using audio-visual media, leads to media awareness being predisposed to a fragmentary, pictographic and mosaic reality perception. Such an attitude does not constitute a sensible and integral whole and clearly heads towards personality disorders.

## CONCLUSION

The progress of technological civilization has resulted in a rapid pace of living, with changeability, tension and nervousness accompanying it, with people giving in to changeable trends. Transformations taking place in one's private and social life as well as in culture are connected with the transformations in lifestyles and the hierarchy of values. In the contemporary information society, the media, as the new environment accompanying the life of a person, are regarded in terms of inseparable categories of the attributes of a new lifestyle. The interactive media have gained special poignancy, leading to taking up new patterns of behaviour and evoking aspirations towards a new quality of life.

On the basis of my research analysis, it is possible to state that the media convey significant capabilities for influencing school age children since they not only trigger emotions, but also cause the transmitted contents and accompanying them feelings to be received through the senses and deeply experienced, becoming an inspiration for specific reflection, developing thinking, aesthetic and moral sensitivity. The pace and the diversity of the changes taking place, at least to some extent, condition the system and the hierarchy of values professed by school age children.

Therefore, acquiring the ability of critical reception is necessary for them in view of transmission contents and the values, patterns of behaviour and mentality as well as lifestyles promoted by the media. Solid foundations in upbringing, enabling the child to function based on the acceptable social code, are necessary. The family performs an important part in the information environment of the child. Various actions taken by the parents provide sources of information for the child and can contribute to the process of upbringing in supporting his needs and aspirations, especially those correlated with self-

development and self-realization by updating and arousing his potential. Such interest also concerns the child's presence in the world of media, meaning the contents she or he can assimilate and what their criterion of choice is as well as what benefits they can draw from such contact with the media. The accepted models of a lifestyle for school age children develop to a considerable degree under the influence of adults, since they are taught both when the lifestyle of adults is treated as the model and also when it becomes an anti-model. Therefore, concern for the environment regarding this educational contact is so important, as well as responsibility when growing up with media in the family.

## REFERENCES

- Adler, A. (1928). *Psychologie de l'enfant diff.* Paris.
- Bis, D. (2007a). *Iluzoryczność wzorców proponowanych młodzieży w mass mediach*. In: F.W. Wawro (red.), *Problemy współczesnej młodzieży w ujęciu nauk społecznych*. (195-217). Lublin: Wydawnictwo KUL.
- Bis, D. (2002b). Komunikacyjne aspekty "medialnego stylu życia" dzieci w wieku szkolnym. "Roczniki Nauk Społecznych KUL", T. XXXVI. z. 2, 99-115.
- Bis, D. (2009c). *Styl życia dzieci w wieku szkolnym w kontekście medialnym*. In: H. Marzec. Cz. Wiśniewski (red.). *Rodzina na początku III tysiąclecia- obraz przeszłości i terażniejszości*. (255-265). Piotrków Trybunalski: Naukowe Wydawnictwo Piotrkowskie.
- Birch, A., Malim, T. (1988). *Psychologia rozwojowa w zarysie. Od niemowlęstwa do dorosłości*. Warszawa: PWN.
- Chłopkiewicz, M. (1989). *Osobowość dzieci i młodzieży*. Warszawa: PWN.
- Dyczewski, L. (1992). Kontynuacja i zmiana w stylach życia polskiego społeczeństwa. "Roczniki Nauk Społecznych". T. X. 231-247.
- Erikson, E. H. (1963a). *Childhood and society*. New York: W. W. Norton & Company.
- Erikson, E. H. (1968b). *Identity: Youth and Crisis*. New York: W. W. Norton & Company.
- Foulquié, P. (1961). *Dictionnaire de la lanquépédagogique*. Paris: Quadrige/PUF.
- Hejnicka-Bezwińska, T. (1991). *Orientacje życiowe młodzieży*. Bydgoszcz: WSP.
- Hurlock, E. (1985). *Rozwój dziecka*. Warszawa: PWN.
- Głowiński, M. (1977). *Styl odbioru*. Kraków: Wydawnictwo Literackie.
- Izdebska, J. (2000). *Dziecko w rodzinie u progu XXI wieku. Niepokoje i nadzieje*. Białystok: Trans Humana.
- Jawłowska, A. (1976). *Styl życia a wartości*. In: A. Siciński (red.). *Styl życia. Koncepcje i propozycje*. (205-240). Warszawa: PWN.

- Kawula, S. (2004). *Człowiek w relacjach socjopedagogicznych Szkice o współczesnym wychowaniu*. Toruń: Wydawnictwo Edukacyjne "Akapit".
- Kobylnicki, J. (1994). *Wpływ telewizji na psychikę dziecka*. In: F. Adamski (red.). *Kościół a kultura masowa*. (188-195). Kraków: WAM.
- Kohlberg, L. (1976). *Moral stages and moralisation*. In: T. Linkons (red.). *Moral development and behavior*. New York: Holt. Rinehart Winston. CBS College Publishing.
- Kroeber, A. L. (1963). *Style and Civilizations*. Berkeley: University of California Press.
- Leszczyński, G. (2002). Język dziecka a obszar kultury. "Wychowawca", 1, 22.
- Mariański, J. (1997). *Mass media jako nośniki wartości i antywartości*. In: W. Zdaniewicz (red.). *Religia a mass media*. (108-127). Ząbki: Apostolicum.
- Mrozowski, M. (1991). *Między manipulacją a poznaniem. Człowiek w świecie mass mediów*. Warszawa: COMUK.
- Nowak, M., Nanni, C. (1990). La "Jugendbewegung" tedescad'iniziosecolo: ascesa, declino e limiti di un'intenzioneautoformativa. "Orientamenti Pedagogici". T. XXXVII, 1, 15-33.
- Pawelczyńska, A. (1976). *Styl życia w epoce przemian – determinanty i układy odniesienia*. In: A. Siciński (red.). *Styl życia. Koncepcje i propozycje*. (137-180). Warszawa: PWN.
- Plisiecki, J. (1990). *Przemiany współczesnej kultury a edukacja kulturalna*. In: B. Suchodolski (red.). *Alternatywna pedagogika humanistyczna*. (237-255). Wrocław: Ossolineum.
- Popper, K. R. (1995). Przeciwno nadużywaniu telewizji. "Odra", 7-8. 85-86.
- Rutter, M. (1980). *Changing youth in a changing society: patterns of adolescent disorder*. Cambridge: Harvard University Press.
- Siciński, A. (1976a). *Styl życia - problemy pojęciowe i teoretyczne*. In: A. Siciński (red.). *Styl życia. Koncepcje i propozycje*. (15-32). Warszawa: PWN.
- Siciński, A. (1977b). *Problemy przemian stylu życia w Polsce*. In: J. Szczepański (red.). *Badania nad wzorami konsumpcji*. (281-364). Wrocław-Warszawa-Kraków-Gdańsk: Zakład Narodowy im. Ossolińskich PAN.
- Siciński, A. (1988c). *Typy stylu życia ludności miejskiej*. In: A. Siciński (red.). *Styl życia w miastach polskich (u progu kryzysu)* (37-126). Wrocław-Warszawa-Kraków: Zakład Narodowy im. Ossolińskich PAN.
- Siciński, A. (1993c). *Styl życia miejskiego w Polsce doby przemysłowej. (Stan badań i perspektywy badawcze)*. In: H. Imbs (red.). *Miasto i kultura polska doby przemysłowej. Człowiek*. (15-30). Wrocław-Warszawa-Kraków: Zakład Narodowy im. Ossolińskich PAN.
- Smolińska-Theiss, B. (1993a). *Dzieciństwo w małym mieście*. Warszawa: UW WP.
- Smolińska-Theiss, B. (1997b). Kategorie dzieciństwa od Ellen Key do współczesności. "Edukacja i Dialog", 7.
- Sorlin, P. (2002). *Mass media – kluczowe pojęcia*. Wrocław: Astrum.
- Syśło, M. (2004). *Model rozwoju kompetencji informatycznych*. In: W. Strykowski. W. Skrzydlewski (red.). *Kompetencje medialne społeczeństwa wiedzy*. (73-80). Poznań: eMPI<sup>2</sup>.
- Theiss, W. (1996). *Zniewolone dzieciństwo. Socjalizacja w skrajnych warunkach społeczno-politycznych*. Warszawa: "Żak".



# CHANGES IN THE RELATIONSHIP BETWEEN FAMILY AND SCHOOL – ABILITIES AND BOUNDARY CONDITIONS IN PEOPLE’S DEVELOPMENT

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## ABSTRACT

The article deals with select assumptions on theoretical development, basic sources and directions of changes for important interactions between the family and school, as well as abilities and restraints of an individual’s development in the light of changes in the relationship between the family and school. Contextual and neoconstructive theories, which describe and explain the development of a human being, may be the reasons why changes in the aspect of functioning and the relationship between key aspects of a person’s environment are simultaneously the basis for changes in their physical development. Changes in the relationship between school and the family are described by three principles: participation, tri-subjectiveness and educational partnership. They set the character of interference between parents and teachers, and I assume that they might be helpful in settling the abilities and border-line conditions for development.

## KEYWORDS

*Family, school, development, participation, tri-subjectiveness, educational partnership*

## I. PRELIMINARY REMARKS

Social change strongly lobby institutions, processes and educational facilities (Zacharuk, 2007). The description, explanation, understanding and inter-

pretation of new and changing pedagogical phenomena is a huge challenge, and there is “a great effort in pedagogy to test social and cultural transformations” (Kwieciński, Witkowski, 1990, 9). Nowadays, the re-organizing of the school system, the family and interaction between them is clearly evident. The dynamics of changes which take place in family and school environments are major challenges for the theorists and practitioners of pedagogy. Their key background are transformations in the present-day world, which end up in general social changes connected with economic, government and socio-cultural changes. These changes take place with great intensity, are multi-directional and characterized by a fast pace and vast range as to the transformations in the nature of modern institutions (Giddens, 2008, 4). This also includes changes in the family and school. As a result, the social changes embrace educational processes in the widely understood range of actions and functions, the involvement of people and the relationship between the institutions and the people who present them.

These changes particularly involve the modern model of the family and school. Their results modify the relationship between these basic models for the development of the human environment. Perceiving the changes which take place in an authoritarian environment, the adequate reaction to them and creating these personal spheres are some of the goals of educational success, which should help the individual to reach personal maturity. A prior question should be raised on how these changes influence a person's upbringing. The issue of afterthought is marked by a more detailed question, namely: which abilities and boundary conditions for education are created in the relationship of basic environments of school and family?

This not only includes changes which take place in the family and school, but includes a vast issue concerning many branches of science. It is more than transformation in the relationship between these environments, resulting from inner transformations of the family and school, but also transformations in the global environment. Thus, the phenomena which overlap between the family and school are considered the basis of the micro-social sphere, which is more objective and personal than the macro-social sphere.

Based on this issue, there is an important but also obvious assumption. First, the development of a human being is determined by an environmental factor and appointed by the adaptive abilities of an individual to interact with the changing environment. Second, the character of the intercourse between the family and school might be developing for the participants of the interaction. Mainly, different values between the family and school are recognized

here. The thesis claiming that a properly run family and school serve the development of children is a truism, since these two institutions are appointed and obliged to do so.

It is obvious that an adult develops parental roles (Harwas-Napierała, 2003; Matuszewska, 1990). It is also common that such development is achieved in vocational roles - as in the role of a teacher, but here, professional knowledge is exposed in the development of personal and professional competences (Bogaj, Dróżka, 2010; Kwiatkowska, 2005, 2008). Less attention is devoted to personal development; more attention is paid to cooperation between the family and school in the process of a child's development. Meanwhile, it is also important to look closely at the changes which occur in the interaction between the family and school (the level of cooperation): how it may correspond and help the development of an adult and also what defiance and dangers there might be. It can be accepted that the quality of the relationship and integration between these educative surroundings in a certain area create opportunities. It is also a test for a person: the further they respond to social changes in a more or less controlled way, the better the educative theory serves educative practice.

These issues were elaborated upon in my article, which dealt with the cooperation between the family and school as a subject of pedagogy and pedagogical research (Opozda, 2011). Hence, I consecutively present aspects which deal with chosen assumptions of theoretical development, basic sources and directions of changes for important interactions between the family and school and the abilities and restraints in the development of an individual as the countenance of changes in the relations between the family and school.

## 2. CONTEXTUAL AND NEOCONSTRUCTIVE ASPECTS OF DEVELOPMENT IN THE ASPECT OF CHANGES IN THE RELATIONSHIP BETWEEN THE FAMILY AND SCHOOL

Contextual and neoconstructive theories which describe and explain the development of a human being may be the reason why changes in the aspect of functioning and the relationships between key aspects of a person's environment are simultaneously the basis of changes in their psychic development.

A person's life path on every level of ontogenesis is characterized by specific qualities of development, which are shaped by many different influences. During different periods of a person's life, the developing potential occurs, and different circumstances and factors appear that block and activate it. On the basis of psychology, the development of a human being might be pursued to embedded and holistic concepts, which organize available, worked out knowledge, describe mechanisms and regularities of the development of a human being and are the foundation for building further hypothesis. Questions about the nature and mechanism of development are still valid and the varied range of theories is not finally covered. Classical concepts derived from child psychology abound. According to this concept, development was understood as a process which accumulated directional changes, generally geared towards the sequence of further changes represented by the higher level of functions and heading towards a certain final outcome.

The dispute between representatives of biological and sociological points of view in the share of psychological development based on hereditary and biological factors and the aspect of the environment should be assimilated. Accepting the interactions approach assumes cooperation of the biological and environmental factors in the scope of psychological processes that result in a human being's development. However, this dispute, which is presently finished, paved the way for new dilemmas and questions. Meanwhile, the meaning of maturation, learning and gaining experience raised the question of whether development is about accomplishing an inner coded program or just constructing a new quality of psyche and behavior, whether it is constant or not (Tyszkowa, 2000a, 39).

One dimensional and one directional models are rejected. Development is understood as a process composed of multi-variable and flexible aspects, where changes take place selectively and lead to many end points of ontogenesis (Tyszkowa, 2000b, 29-40; Tyszkowa, Przetacznik-Gierowska, 2000, 214; Trempała, 2003, 274; Brzezińska, 2003, 232). As a matter of fact, it is changing in the area of the ability to adapt and to construct relationships with the environment. The emphasis is put on an individual and their personal development throughout a lifetime, not only in childhood and adolescence. So-called mixed models are more pertinent in describing and explaining development (Trempała, 2003, 274). They highlight the meaning of the context and reconstruction of experience in the development of an individual.

Contextual models assume constant alternation of visible effects in the world and the co-dependency of changes which take place. Every single change should be reconsidered in the context of other continuously made changes, and development cannot be recognized without its social and cultural context. According to L. Wygotski, biological and cultural influences are combined into one socio-biological line of development, shaping a personality (Trempała, 2003, 276).

The basic change in the development of a human being is the interaction between the biological and socio-cultural factors and the changes which occur within these. These contexts are complex and organized into the structural system of the environment on different levels. It is an exemplary basic level, which distinguishes its direct “face to face” interactions and the general one, created by the system of assurances and cultural modules. According to K. Riegel, the dynamic role in the process of development is the inner and outer conflict created in different spheres of a person’s life, understood in the categories of contexts (Trempała, 2003, 276). The effect of progress is not only just a permanent attainment (e.g. balance, integration), but constant adaptation connected with undertaking new social roles and/or transformation in roles that have already been realized.

In this sense, the dynamics of family and school relationships as an outcome of socio-cultural transformations deals with many aspects of life and creates a context in which the adult develops into a parent and teacher. The context itself does not guarantee changes in the field of development. The changes in family-school relationships may stimulate upbringing, and what is more, at the same time they may be its barriers; they are one of the levels of structures of social life and the place for interactions of different development factors. The contextual meaning of modern changes in relations between the family and school forces adaptation to new conditions, abandonment of certain schemes of behavior, solving conflicts, transforming the roles of parents and teachers in the area of family and school life.

The neoconstructive theory assumes that the physical development of a human being results from gathering and transforming experiences. It consists of experiences both distributed by the species through set structures and activities which are inborn to every individual. The person is formed through their individual activity in the environment and also their social sphere – which is connected with assimilating given modules of behavior and believes (Tyszkowa, 2000c, 141). According to M. Tyszowska, one should respect three major assumptions, namely:

1. That development is done in the context of an individual vs. the environment; and changes in development are created in relationships experienced between the individual and the environment.
2. The changes in development are derived from the activities of an individual in their surroundings;
3. The variables which goes between an individual and the environment in a person's psychic system are their experiences stemming from their personal activities in the environment (Trempała, 2003, 274).

The active subject becomes an important source of experience. Such experience is derived not only from the period of childhood or adolescence. Also, from the activities and the experience derived during later stages of life, they serve as material for individual's development and transformations of physical structures. "The experience is linked to the previous actions that one struggled with and with their own actions and disorders in given situations (...) [it] is the trace left behind (events, actions) in the brain and in other parts of an organism and mental sphere (Tyszkowa, 2000, 140).

Individual experience is conditioned by individual qualities and different aspects of life. Experience is a representation (record) and deduction. Cognitively drafted, emotionally and evolutionally it is linked with a psychological system. The mental development of a human being is a process of building mental structures on the basis of individual experience, which are generated on the basis of activity based on interactions with the surrounding. A human being approaching different activities gains experience and through this process "creates one's own biography and in this aspects people are creators of themselves" (Trempała, 2003, 275).

Interaction and exchange between the family and school environments are important areas for adult activity, for them to obtain experience. Transformations in interactions in these environments triggers activities and provide new experiences as events that happened, behaviors and actions. These experiences in the area of social and individual experiences may stimulate changes in the aspect of communication, the models of interaction, values, or evaluation.

To sum up, in addition to contextual and neoconstructive theories of development, especially the paradigm of interactionism, it is important to reflect on the importance of changes in relations between school and the family. It captures "the environment and the human being as an open system combined with subsystems of hierarchy involved with dynamic unions and intercourses and influencing each other" (Tyszkowa, Przetacznik-Gierowska, 2000d, 89). In this case, the basic interaction of the individual vs. the environment is made

clear in the relationship of the parent with school and the teacher with the family. Contextual and neoconstructive approaches to the intellectual upbringing of a person are directed towards the meaning of this interaction and factors which are settled by them. It is asserted by:

1. Exposure of the role of interaction between different levels of organization in the sphere of education,
2. The changes entering in between the family and school,
3. The role of individual activity.

The character of the relations between the family and school creates a context and a source of experience for an individual and is important in forming changes in the development of an adult and a child. They may regard observed behavior, the organization of cognitive, emotional and motivational structure, the structure of the personality, or the interaction between the individual and the environment. The relationship between the family and school is very important; an understanding of the terms interaction, activity and adaptation is of great importance.

### 3. BASIC SOURCES AND THE DIRECTION OF CHANGES IN THE RELATIONSHIP BETWEEN THE FAMILY AND SCHOOL

The changes in the relationship between the family and school have different sources. Generally speaking, they are combined with the economy, government and socio-cultural changes. These transformations are seen as a natural fact linked with the general development of civilization. "Their dynamic becomes less tangible, but at the same time generates fascination and global fear. (...) The changes in every branch of human activity are more and more unpredictable and difficult to understand. A great area is created which is vague, temporary and non-personal, and anonymity and deconstruction of the educational surroundings are placed in the networked society in a global village" (Mastalski, 2007, 59). Commenting on the meaning of these educational processes, their dimensions should be evaluated.

The essential background of forming the appearance of family and school relations are the processes of globalization, technicalization, informatisation and laicization of life, consumerism, liberal ideology and axiology of plural-

ism. Among the many transformations in modern society, there are certain points which need consideration, namely:

1. Changes in the free market economy,
2. Cultural changes in cultural individualism,
3. Changes in values and tastes in the area of ethics in axiological pluralism.

The free market society makes requirements on educational institutions. "Along with the growth of the free market economy in our country, schools were forced to bow in front of marketing processes, following the pattern that companies develop. They have to play the role of a producer and provider of services between the teacher and the consumer, the student" (Śliwerski, 2004, 40). Educative institutions (kindergartens, schools) must meet the requirements which rule on the free market economy. School should be pictured as a fully professional institution and as a firm: it should have interesting and competitive packages. Parents mindfully seek and make choices to choose the proper offer for their child and, what is more, they accept the package and they trust qualified professionals. The headmaster of a school becomes a manager of the firm, the teachers become the producers and service people and the children and parents are the ultimate consumers. The relationship between the family and school are tightened in the *buy and sell* process, which means that the delivery of the process itself, thanks to which the product is accommodated to the special needs of the target market and the faculty, is divided from one participant to another.

What is more, the usefulness of the service in the understanding of the form, place, time and possession to please the client give them what they desire. According to the free market economy rule, free competition is made between the goods and services – being the education system and the student (the best product, the lowest prices, unique services) (Śliwerski, 2004, 40). According to B. Śliwerski, the transformations which are inevitable and natural are set on social development; they might trigger unfavorable changes such as the loss of pedagogical sensitivity and culture. They are also the basis for the changes which take place based on the family and school. These transformations lead to the question concerning the relationships within this environment and are directed towards attributes of their connections.

The next essential source in the changes in relationships between school and the family is the noticeable individualism which influences educative processes. Individualism, which surpasses the collective and community aspect of a culture, creates a certain context for the educative processes and

upbringing (Opozda, 2010, 137-154). Generally speaking, the cultural dimension of collectivism and individualism sets a basic function for mental development thanks to which a person can comply with, define and react with the environment (Skarżyńska, 1990, 139). Individualism means that the individual is superior and at the same time he or she is the subject of the action, and therefore has the right to make choices. Goals and programs of one's life are set independently of others; the person chooses the patterns of behavior he or she defines. The individual should not feel pressure from the environment, and individuals ought to be concentrated on themselves and not focused on the common good (Reykowski, Skarżyńska, Ziółkowski, 1990).

Such an individualistic mentality is highlighted by self reliability, independence and autonomy, and has a high sense of separateness, self establishment and self control, is depicted as commonweal and evil. At school, the mentality is set in the dimension of individualism, it is accepted by teachers and parents and it is also focused on self interest. In this perspective the students tend to see their share, and treat participation and activity in school life as a background for their subjective actions. The character of the relations between the family and school is adjusted to self requirements and realizing one's own plans and strivings. The individuality of every single person is of a higher interest, abiding by their immunity of believes, assumptions and ways to define the world.

The most important matter in social changes in present day society are changes in the social value system of norms and ethic preferences. According to A. Radziewicz-Winnicki (2005, 6), these changes exert direct and indirect influence on education and on the educative approach to different activities. They set another important source of transformations in the relationship between the family and school. Generally speaking, changes in general axiology are articulated in higher preferences for the laic and rational values, the post-materialistic and individualistic.

In Poland, a phenomenon of fragmentation and autonomy in the areas of values and the diversity of criteria evaluation can be observed (Jasińska-Kania, 2008, 15-35). It is noted that moral values may be seen as less valuable and important in the dimension of personal, social and civil morality. According to J. Marianski (2001), the moral crisis and value transformation resulting from changes in preferable moral values leads from postulated social values to practical individualism to family-centrism in different forms of family life. Axiological pluralism reaches deeply into educational theory and practice. It brings about changes in the area of forming general and detailed educative

aims, rules and ways of fulfilling them, setting the boundaries of influence and educative interactions. Under its influence, the educative environment changes and, what is more important, it entails changes in the character of relations which interact between them.

The diversity of the value system of parents and teachers sets high requirements not only for their abilities to cooperate but also in the kind of relations between these two surroundings. The basic question is how to find oneself in this axiological variable and set a common field of understanding and cooperation?

In the free market, individual expansion and axiological pluralism are the sources of changes in the functioning of educative institutions and are the straight forward context of transformations in the field of interactions between them. It is essential to highlight that this context is a challenge for the people who are engaged in education and may be a chance to establish positive transformations and changes in creating new, pedagogically desired educative dimensions. It may also in a straight forward manner create conditions for developing personal interaction in education or it may limit it.

#### 4. CHANGES IN THE RELATIONSHIP BETWEEN THE FAMILY AND SCHOOL VS. THE ABILITIES AND THE BARRIERS OF INDIVIDUAL DEVELOPMENT

The issue concerning which social changes can transform the relationship between the family and school leads us to broad and multi-dimensional topics. First, the types of causes and sources may settle the direction of transformations in the relationship between the family and school. Their character is also important. We are presently facing changes in the relationship between the family (parents) and school (teachers), with new qualities and accents placed on various places. Presently, a new context and categories are sought in the descriptive categories.

On the basis of the analysis of the literature on the subject, we may form a few remarks as to the type and direction of changes in the relationships between the family and school. These changes are the response to the general social change, in the detailed context of free market society, the culture of individualism and axiological pluralism. From my point of view, we should

look closely at types and directions of these changes. Broadly speaking, they are complementary one to another. Surely they create the context for the development of an individual (the child, the parent, the teacher). They are also the sources of new experiences, which may be significant in creating changes in educational qualities.

First, the transformations which occur in the contemporary relationship between school and the family are mostly related to the free market society. The changes in school organization which should look like a well run firm led to the question concerning the type of relationship between the parents and the teachers and also about their abilities to recognize the sense of cooperation between these two environments. The idea of cooperation between the family and school is well established in the pedagogical mentality, and in these new conditions, it ought to find new meaning. Meanwhile, according to A. Nalowski (2009, 83-86), it is the next element of a pedagogical mantra and has a sense of obliged formality and veneer of character. It is marked by using force, silent blackmail, teacher's weak competences and low efficiency, helplessness and mutual liability. This type of cooperation, according to the author, is not an efficient way to popularize the idea of home authority and, to be honest, it is inessential and probably impossible.

Cooperation in the teacher – parent relationships is still necessary, going from the state of being able to performing one's duty in the education of children. Unfortunately, it is derived from dependence on the personal subjective relationship of education and does not change its pattern despite the factors which change in the process of the institution's functioning. It is important to highlight that the changes in the educational market also change the role of a parent at school into the role of a supplier or client, and this should transform and state the relationship and the type of cooperation of the parent with the school, which results from authentic interest in the child's life and activate thinking and actions under the slogan "I take care of my child so that I take care of school" (Nalowski, 2009, 87).

A modern school which functions on the present day free market society sets adequate attributes, school needs and innovative forms of cooperation. As noted by B. Śliwerski, one should see participation (cooperation), which becomes a dynamic principle and a method through which a school's world is created on the basis of partnership and subjectivity. Participation assumes a varied level of cooperation between teachers and parents in the learning process. It is described as a continuum which is limited to activeness and passiveness (Śliwerski, 2004). Both the parents

and the teachers with a different level of motivation and competences are engaged in the process of educating their children, from active participation to passive activeness.

Educational changes resulted from the free market economy, which on the one hand, created conditions for participation, but on the other hand allowed for passivity to occur and they created, especially in a parent, the attitude of a consumer in the area of school life. Cooperation and active participation in the learning process for both the parents and teachers is a matter of great importance. Both can give one another guidance and help in solving the problems with the child's upbringing. They also need each other to increase the efficiency of educative processes. This means increasing actions in order to help the children and reinforce their development, giving the child the chance to enrich parents' development.

The changes in relations between school and the family regarding cooperation, which is adjusted by the principle of participation, may bring many benefits. Teachers accept parents as potential advisors, experts from whom they can learn. Together with children, they are "the most important actors in the process of education and development" (Śliwerski, 2008, 11). Their knowledge and abilities should be used in the process of school education. The parents, on the other hand, should perceive teachers as professionals for their child worth coping with. This reinforces the cooperation of both sides of an interaction, the courage in proclaiming their own need, opinions and emotions in the area of learning processes. In this sense, taking part in everyday school life would mean constant learning and development for children.

Developmental limits that may result from transformations in the relations between the family and school, as a result of adjusting to free market economy, and may also result in shaping the attitude of a consumer and a claimer. It may block active parental share in school life, but also leads a teacher in the role of a person who provides services oriented to make a profit connected with "selling educational service." These types of relationships look more like the *buy and sell* phenomenon, pragmatic and lacking the ability to cooperate in a creative and personal way. The participants in this relationship are reduced to the role of an object and the relations between them are strictly organized by bureaucratically stated rules. It is a certain barrier but also a threat for individual development in the personal dimension of people functioning and creating pro-social attitudes. It contains the development of competences necessary for effective cooperation, mainly openness and support.

Second, it is claimed that transformations in family – school relationships are a response to social transformations articulated by democracy and humanization, which appear in the macro-educative dimension. The processes of democratization and humanization in Polish society overcome the ideological role of a family and school. Presently, it should be defined by the main principle of tri-subjectivity in the relationship between these two environments. This principle corresponds to partnership of parents, children and teachers and supports individualism in each of the partners. It provokes relations like school-centrism, pedeutocentrism, andragocentrism (Janke, 2002, 63-70). It minimalizes former asymmetry in relation, where the teacher had the main and dominant position. According to this trend, relations at school should be characterized by balance, and a child should be fully involved in the partnership action. The change in the relationship between school and the family ends in a relationship which may be called tri-subjective partnership.

As presented by A. Janke (2002, 235), it is more a postulated state than a real one. To reach it, certain points should be fulfilled: mutual acceptance, mutual share of universal values, understanding of the commonweal and personal authenticity in relations, dialogue, secured needs of self-realization, willingness to sacrifice, and appeasement. A. W. Janke believes that the tri-subjective theory is the main criteria in establishing the relationship between these two environments. We may claim that it has the role of basic functions and is regulative in shaping the relation between home and school.

From the point of view of people's development, the participants of the relationship between school and the family should remember that these types of changes expose the subjectivity of people as equal participants in such interaction, providing space for their free development and supplying them with equal partnership, which creates proper conditions for being fully active and gaining experience. This change encourages respect for individual viewpoints, taking into consideration their decisions and planned actions, which should have a common goal: the development and the good of a child.

Fulfilling the principles of tri-subjectiveness as an equal partnership without afterthought is connected with restrictions in development, especially concerning the relationship between the adult and the child. Complete partnership between the adult and the child raises doubts. Partnership on the personal level may be just developing – it may have common attributes which come from human existence in the world. This means that parents, teachers and the children are subjects of realization on the basis of cognitive partnership, technically connected with possessing and exchanging certain knowledge, in-

formation and abilities. For the good of the development of people, social partnership should be excluded. This partnership is even impossible when realizing certain social roles by its participants but also through the differences coming from characteristics of children and adults. No clear way of settling the roles and assigning duties and privileges makes the educative transmission difficult. The boundaries between the teacher and the students start to be vague. The role of authority in education is weakened, and this lowers the rank of personal patterns. Meanwhile, it should be highlighted that authority and personal example is obligatory for adults who provide guidance for the child. In this way, it stimulates both participants of human interaction.

Third, in the aspect of transformations in the interactions between parents and teachers, various transformations in the macro-educational aspect should be mentioned. This is tied to eco-pedagogy and the social changes which are observed when creating a society of knowledge, introducing rules for self-organization, and respecting the values of multi-cultural societies (Morbitzer, 2010, Nikitorowicz, 2009). Educational institutions are a part of the social environment and work for the community. The community also has duties towards educational institutions. It is expected that school should be open to society and the community in the sense of the social and institutional area (Bayer, 2000, 9). The principle of educational partnership is highlighted here (Macbeth, 1994), which not only embraces the role of parents and school but is also connected with other spheres of society. This principle refers to micro- and macro- education and is used in integrated education.

The relationship between the family and school should be built on the basis of the principle of educational partnership and should take into account the physical, social and institutional spheres. This relationship is a dynamic agreement. M. Mendel points out that it is distinguished by approval of social roles, and teacher respect parents as the first teachers of their children and self-reliant educators reinforcing their work. Parents see teachers as competent advisors and guides who reinforce children's activeness. "The partnership sets a mixture of co-dependence and autonomy where the common value for the partners is cooperation and impact on common action, simultaneously honors their rights for independence and other rights" (Mendel, 2000, 24). Transforming relations between the family and school into partnership means a change in traditional forms of contact between the parents and the teachers, which may be described by asymmetry in relations (Mendel, 2004, 308-309). It also requires innovative solutions of the process of cooperation, which should be set within the context of the environment. It should be divided up

by the context of the local environment (social, cultural and inter cultural) and work out parental activities. Teachers and institutions should work it out (Mendel, 2000).

Transformations in the relations between parents and teachers on the basis of the principles of educative partnership and changes in education may have a distinguished transformative character. Parents as the first and main educators of their children feel pride when raising children and being responsible for their development and education. They also impose responsibility on the role of a teacher, who can give parents professional help and can make the environment helpful in the process of education. What is most important here is to strengthen the individual in his or her close social surrounding. This type of activity requires involvement in many types of contacts between parents and teachers.

It should be multi dimensional because it should be run in acceptable social areas. The changes in this educative partnership put pressure on the educational subjects. They create conditions and justify the multi dimensional need of activities and may reinforce it. They are directed by the need to create the sphere of life and coexistence. Radical understanding and acceptance in educational practice which is sought by school provides opportunities of cooperation and may state the conditions for development. The question is whether the actions which are optimal and focused on active partnership of a family, school or parish do not weaken the individual values in contacts and relations focused on the commonwealth of people and at the same time limit their ability to develop. The teacher might also be forced to shape the attitudes of social actions weakening their role in individual education.

A radical understanding of integrated education which is the background of the relationship between the family and school might be a threat by fragmenting development. It diminishes the role of the relationship, authenticity and closeness which shapes the sense of subjectiveness and develops the emotional bond as a very important dimension of personal maturity.

## SUMMARY

The undertaken reflections were directed at the meaning of the relationship of the family and school in personal development which result form a few prerequisites. First, the context of the environment and expe-

rience may reinforce or limit the development. Second, the relationship between the family and school state the environmental area for the development. Third, this relationship is dynamic and undergoes certain transformations which are multi-level. Fourth, among these conditions, important are those which originate in a broad context of macro-education. The question appeared concerning changes in the relationship, which may create possibilities and limits to the individual development. Contextual and neo-constructive theories of the development let us predict that changes in the educational relationship between the family and school may have a developing value.

It is a very broad issue connected with the existence of many complicated conditions and connections. The relationship between the family and school is very complicated and its shape constitutes a process. In the presented paper, the effort was made to probe in details this relationship from the point of view of some general transformations. It is accepted that present governmental, economical, social and cultural changes play important roles in contemporary educational processes and family interactions with school. The main points are: free market, individualistic culture and axiological pluralism. They create the background for solutions and confrontations of different problems of the theory and pedagogical practice, but they do not exclude other factors. They influence the creation of the changes in initiations and transform the character of intercourses between them. They lead to working out new principles in the process of education and the involvement of people who are interested in it.

To sum up, on the basis of preliminary analysis of the pedagogical literature, it is noticeable that changes in the relations between school and the family might be described through three principles: participation, tri-subjectiveness and educational partnership. They set a tone of interference between parents and teachers, and I assume that they might be helpful to settle the abilities and boundaries for development. The table below (table 1) presents these principles, which simplify the proposal which is the result of reflections upon the undertaken subject. It consists of chosen abilities and restraints in the development and the limits in this development in the relations between the family and school.

Table 1. The principles assigning the character of relations between the family and school and plausible restraints in the development of an individual.

The Principal	Abilities	Border conditions
Participation	<ul style="list-style-type: none"> <li>- the increase in the parent-teacher relationship,</li> <li>- mutual support,</li> <li>- mutual openness for individual needs, feelings, opinions and respect for them</li> </ul>	<ul style="list-style-type: none"> <li>- shaping consumptionist attitudes and claims,</li> <li>- reducing roles of serving and getting the service done,</li> <li>- instrumentalisation of actions, making people more like objects, bureaucracy of interactions</li> </ul>
Tri-subjectiveness	<ul style="list-style-type: none"> <li>- increase in the involvement of children and adults (mainly parents),</li> <li>- respecting the rules,</li> <li>- creating the space for individual activities,</li> <li>- cooperating</li> </ul>	<ul style="list-style-type: none"> <li>- no clear positions in social roles,</li> <li>- weakening of the authority and personal patterns,</li> <li>- chaos in the number of ranks and the force to obey them</li> </ul>
Educational partnership	<ul style="list-style-type: none"> <li>- shaping the attitude of responsibility and engagement in the development of an individual and the community,</li> <li>- creating collective life space,</li> <li>- using social resources,</li> <li>- participation in the nearest environment</li> </ul>	<ul style="list-style-type: none"> <li>- weakening of individual contacts,</li> <li>- the exposure of the role of a social activist as the most valuable,</li> <li>- the force to cooperate</li> </ul>

Source: *Personal research*

The above table is just an effort to synthesize the pedagogical view. We may assume that the principals state the relationship between the family and school in a sense that they open the space for the family. Each of them is desired and positively valued. Simultaneously, every point may constitute a threat for the development of an individual.

It may seem that when facing the changes in the socio-cultural field, we need to re-consider the pedagogical attitude about the relationship between the family and school and its important role both in the child's development but also in the parents' and teachers' development. Of course, the theories brought up in

this paper should be seen broadly because they bring many detailed problems in the field of family pedagogy, school pedagogy and the psychology of man's development, and what is more, sociology of education. I understand that my paper takes up the topic in general, and notice tangent areas in this type of problem and the need for a detailed analysis. The analysis might:

1. Deal with ordering and classifying the types of contexts in the relationship between the family and school,
2. Take into account the level of the school, where the most important factor is the age of a child and the type of a school,
3. Deal with certain changes in the development and creation which may be reinforced by the character in reaction to the family and school, for which the changes in the relationship would be reinforced by the general changes and barriers,
4. Take into account the developmental changes done in the ontogenesis of a child and an adult,
5. Constrain the potential state and potential and postulated form of the real, accidental and common one.

What is more, the perspective applied here is theoretical and may change the general overview but also the value of this problematic in the scope of the number of paradigms and the theory of pluralism in upbringing and education (Śliwerski, 2009, 13-16). It encourages and forces to take a cognitive effort which would be more meta-analytical and meta-synthetic as to the functioning and the correlations between these two key factors for the development of the environments for the human being. Integration of knowledge in this area may appear to be useful for educational practice.

## REFERENCES

- Bayer, M. (2000). *Rola szkoły, rodziny i organizacji społecznych w procesie zintegrowanej edukacji*. In: M. Mendel (red.). *W poszukiwaniu partnerstwa rodziny, szkoły i gminy*. (5-17). Toruń: Wydawnictwo Adam Marszałek.
- Bogaj, A., Dróżka, W. (red.). (2010). *Proces stawania się nauczycielem. Teoria i praktyka*. Kielce: Wszechnica Świętokrzyska.
- Brzezińska, A. (2003). *Modele i strategie badania zmiany rozwojowej*. In: J. Strelau (red.) *Psychologia. Podręcznik akademicki*. T. 1. *Podstawy psychologii*. (238-256). Gdańsk: GWP.

- Giddens, A. (2008). *Konsekwencje nowoczesności*. Kraków: Wydawnictwo UJ. Edison.
- Harwas-Napierała, B. (red.). (2003). *Rodzina a rozwój człowieka dorosłego*. Poznań: Wydawnictwo Naukowe UAM.
- Janke, A. W. (2002). *Transformacja w stosunkach rodziny i szkoły na przełomie XX i XXI wieku. Perspektywy zmiany społecznej w edukacji*. Bydgoszcz: Wydawnictwo Akademii Bydgoskiej im Kazimierza Wielkiego.
- Jasińska-Kania, A. (2008). *Wartości i normy moralne a procesy przemian w Polsce i w Europie*. In: J. Mariański, L. Smyczek (red.). *Wartości. postawy i więzi moralne w zmieniającym się społeczeństwie*. (15-35). Kraków: Wydawnictwo WAM Polskie Towarzystwo Socjologiczne.
- Kwiatkowska, H. (2005). *Tożsamość nauczycieli. Między anomią i autonomią*. Gdańsk: GWP.
- Kwiatkowska, H. (2008). *Pedeutologia*. Warszawa: Wydawnictwa Akademickie i Profesjonalne.
- Kwieciński, Z., Witkowski, L. (red.). (1990). *Ku pedagogii pogranicza*. Toruń: Wydawnictwo UAM.
- Macbeth, A. (1995). *Partnership between parents and teachers in education*. W: A. Macbeth, D. McCreath, J. Atchison (Eds). *Collaborate or Compete? Educational Partnerships in a Market Economy*. London-Washington: The Falmer Press.
- Mastalski, J. (2007). *Tożsamość wychowawcy a współczesne syndromy*. In: E. Kobyłecka (red.). *O humanizacji pracy zawodowej nauczyciela*. (59-75). Poznań: Wydawnictwo Naukowe PTP. Oddział w Poznaniu.
- Matuszewska, M. (1990). *Pełnienie społecznych ról rodzinnych przez młodych dorosłych i ich rozwój indywidualny*. In: M. Tyszkowa (red.). *Rodzina a rozwój jednostki*. (25-47). Poznań: Nakład CPBP.
- Mariański, J. (2001). *Kryzys moralny czy transformacja wartości? Studium socjologiczne*. Lublin: Towarzystwo Naukowe KUL.
- Mendel, M. (2000). *Rodzice w szkole. Program budowania partnerstwa rodzina – szkoła – gmina*. In: M. Mendel (red.). *W poszukiwaniu partnerstwa rodziny, szkoły i gminy*. (17-43). Toruń: Wydawnictwo Adam Marszałek.
- Mendel, M. (2004). *Aktywna szkoła – bierni rodzice: anomia. mit czy przemieszczenie znaczeń?*. In: A. W. Janke (red.). *Pedagogika rodziny na progu XXI wieku. Rozwój. przedmiot. obszary refleksji i badań*. (297-311). Toruń: Wydawnictwo Edukacyjne „Akapit”.
- Morbitzer, J. (2010). *Spółczesność wiedzy – mit czy realny cel?*. In: A. Kamińska, W. Kojs, P. Oleśniewicz (red.). *Edukacja jutra. Edukacja w społeczeństwie wiedzy*. (s. 210-221). Sosnowiec: Oficyna Wydawnicza „Humanista”.
- Nalaskowski, A. (2009). *Pedagogiczne złudzenia. zamyślenia. fikcje*. Kraków: Oficyna Wydawnicza „Impuls”.
- Nikitorowicz, J. (2009). *Edukacja regionalna i międzykulturowa*. Warszawa: Wydawnictwa Akademickie i Profesjonalne.
- Opozda, D. (2010). *Orientacja kolektywistyczna versus indywidualistyczna a dylematy edukacji szkolnej*. In: J. Łukasik, I. Nowosad, M. J. Szymański (red.). *Edukacja. Równość czy jakość?* (137-154). Toruń: Wydawnictwo Adam Marszałek.

- Opozda, D. (2011). *(Nie)codziennosc współpracy rodziny i szkoły wobec zmiany społecznej – w kierunku konceptualizacji przedmiotu badań*. W druku: Białystok Wydawnictwo NWSP w Białymstoku.
- Radziewicz-Winnicki, A. (2005). *Spoleczeństwo w trakcie zmiany. Rozważania z zakresu pedagogiki społecznej i socjologii transformacji*. Gdańsk: GWP.
- Reykowski, J., Skarżyńska, K., Ziółkowski, M. (red.). (1990). *Orientacje społeczne jako element mentalności*. Poznań: Wydawnictwo Nakom.
- Skarżyńska, K. (1990). *Orientacja egalitarna i nieegalitarna*. In: J. Reykowski, K. Skarżyńska, M. Ziółkowski (red.). *Orientacje społeczne jako element mentalności*. (139-159). Poznań: Wydawnictwo Nakom.
- Śliwerski, B. (2004). *Możliwości rozpoznawania sensu współdziałania szkoły rodziców i uczniów w społeczeństwie wolnorynkowym*. In: I. Nowosad, M. J. Szymański (red.). *Nauczyciele i rodzice. W poszukiwaniu nowych znaczeń i interpretacji współpracy*. (39-57). Zielona Góra: Oficyna Wyd. Kraków: Wydawnictwo AP.
- Śliwerski, B. (2008). *Wyspy oporu edukacyjnego*. Kraków: Oficyna Wydawnicza „Impuls”.
- Śliwerski, B. (2009). *Teoretycy wychowania wobec typologii nurtów współczesnej myśli pedagogicznej*. In: B. Śliwerski, M. Kowalski (red.). *Studia z teorii wychowania*. Półrocznik Zespołu Teorii Wychowania Komitetu Nauk Pedagogicznych PAN. (13-35). Sopot: GWP.
- Trempała, J. (2003). *Koncepcje rozwoju człowieka*. In: J. Strelau (red.). *Psychologia. Podręcznik akademicki*. T. 1. *Podstawy psychologii*. (256-282). Gdańsk: GWP.
- Tyszkowa, M. (2000a). *Przedmiot, problemy i zadania współczesnej psychologii rozwoju człowieka*. In: M. Przetacznik-Gierowska, M. Tyszkowa (red.). *Psychologia rozwoju człowieka. Zagadnienia ogólne*. (29-45). Warszawa: Wydawnictwo Naukowe PWN.
- Tyszkowa, M., Przetacznik-Gierowska, M. (2000b). *Wybrane koncepcje i teorie rozwoju psychicznego człowieka*. In: M. Przetacznik-Gierowska, M. Tyszkowa (red.). *Psychologia rozwoju człowieka. Zagadnienia ogólne*. (189-222). Warszawa: Wydawnictwo Naukowe PWN.
- Tyszkowa, M. (2000c). *Jednostka a rodzina: interakcje, stosunki, rozwój*. In: M. Przetacznik-Gierowska, M. Tyszkowa (red.). *Psychologia rozwoju człowieka. Zagadnienia ogólne*. (124-149). Warszawa: Wydawnictwo Naukowe PWN.
- Tyszkowa, M., Przetacznik-Gierowska, M. (2000d). *Ekologiczne uwarunkowania rozwoju psychicznego człowieka*. In: M. Przetacznik-Gierowska, M. Tyszkowa (red.). *Psychologia rozwoju człowieka. Zagadnienia ogólne*. (85-102). Warszawa: Wydawnictwo Naukowe PWN.
- Zacharuk, T. (2007). *Ciągłość i zmiana w pedagogice XXI wieku*. Siedlce: Wydawnictwo Akademii Podlaskiej.

# THE IMPORTANCE AND TEACHING OF INTERCULTURAL COMMUNICATION

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## ABSTRACT

Both worldwide and locally, major changes have transformed the world into a global village. In a contemporary globalized world – and as a subject to be taught – intercultural communication is more topical and important than ever before. In our everyday lives, we face more and more people with various cultural backgrounds. At the same time, we more often face strange and unknown languages, habits, etc. – with things that we are not yet familiar. As a result, in our everyday lives – and in our working environments – we need a new kind of sensitivity and competences in order to communicate and understand each other.

This article is based on the author's experiences in teaching intercultural communication. The article attempts to awaken an interest for intercultural communication and gives basic ideas for teaching the subject.

## KEYWORDS

*Culture, cultural differences, communication, communication style, verbal and nonverbal language*

## INTRODUCTION

*Immigration is Part of Europe's Future  
What Happens to Finland in the International Financial Crisis?*

*Afghan Police Get Training in Finland*  
*200 Ethnic Restaurants Have Sneaked into Helsinki*  
*Man Scared Immigrants by Shooting from a Balcony*  
*Immigrants Rejuvenated the Countryside Municipality of Haukivuori*

The above-mentioned Finnish newspaper headlines report diversely and widely about Finland's internationalization. Both worldwide and locally, major changes have transformed the world into a global village. From the perspective of intercultural communication, the following events and changes are crucial: improvements in transportation technology have made it easier, faster and cheaper to travel around the world; developments in communication technology allow us to have an online connection with almost all parts of the world; news spreads around the globe more rapidly than ever before.

Internationalization of the economy has increased our dependency on other parts of the world. Changes in the international economy – no matter whether good or bad – have an almost immediate effect on our everyday lives. Memberships in international associations, various international commitments and multinational companies further increase international cooperation. Internationalization has also been affected by ever-increasing migration. Phenomena like natural disasters, wars and poverty push people away from their original living environments. On the other hand, better and safer living conditions of the industrialized countries – and their labour force shortage – attract people.

In a contemporary globalized world – and as a subject to be taught – intercultural communication is more topical and important than ever before. In our everyday lives, we face more and more people with various cultural backgrounds. As a result, in our everyday lives – and in our working environments – we need a new kind of sensitivity and competences in order to communicate and understand each other.

The development of Finnish social policy and the work practices in the social field have always followed the changes of the Finnish society. This is also true today, when internationality is among the most significant factors shaping the functional environment of the social field. In the working world, more and more workers meet individuals and families – as customers or fellow workers – with unfamiliar cultural backgrounds. To be able to offer students the required knowledge and skills for such an internationalized and multicultural working life, educational institutes have been forced to consider this developing globalization. At Kymenlaakso University of Applied Sciences'

(KyUAS) Social Care Department, increased internationality can be seen in deepened cooperation between foreign universities and units of social care. It has also caused more intense student and teacher exchange. In addition, our degree program and most of the courses in it emphasize international and multicultural aspects.

This article is based on the author's experiences as a teacher of intercultural cooperation and as a department's international coordinator. Primarily, the article has been written for teachers. The main objective is to awaken readers' interest in intercultural communication and to give ideas for teaching it. This article concentrates on examining the basics of intercultural communication. First, reasons will be given to convince the reader of the necessity and topicality of the subject. Second, the basic concepts – culture and communication – will be briefly described. Third, communicational differences are examined in relation to cultural differences. Stumbling blocks of intercultural communication are also handled. Finally, the article tries to draw a picture of a culturally sensitive worker and tries to encourage teachers.

## I. WHY INTERCULTURAL COMMUNICATION?

As a subject, intercultural communication is more topical and important than ever before. In our everyday lives – including our work lives – we meet more and more people with unfamiliar cultural backgrounds. At the same time, we face strange and unknown habits and phenomena. This is already true in the service sector – not forgetting about social and health care services. In such a working life, we need cultural sensitivity, including theoretical knowledge and the capability to meet and communicate despite language problems, conflicting views or difficult life situations (Räty, 2002, 8).

At the same time, research results show that officials – who for example meet foreigners as customers – lack sensitivity and multicultural skills. More precisely, they lack language skills and knowledge about foreign customers' special needs. These officials also complain about the inadequacy of their former education in relation to various cultural practices, values and norm systems behind them. Furthermore, they wish to be more familiar with foreign religions (Pitkänen, 1999, 109-113).

The main goal of teaching and learning the basics of intercultural communication is to answer these multicultural challenges. It is essential that we learn to understand the meaning of intercultural communication in an international and globalized world. Knowledge and skills for international communication allow us to observe and analyze communicational situations. In addition – and most importantly – they enable us to see our own culture-based assumptions and to understand more widely and deeply how various cultural backgrounds can be seen – and how they influence communication situations.

Becoming more conscious of our own culture based assumptions enables us to recognize our own prejudices and understand aspects different from our own. Keeping our own culture at arms' length helps us to face behaviour and attitudes which are still strange and unfamiliar to us. Insufficient ability to reflect on our own cultural structures can lead to uncertainty, tension and misunderstandings in situations where we meet representatives of other cultures.

Communication skills need to be understood in their broadest sense when we think about them from the intercultural point of view. Knowledge of language structures, pronunciation and terminology provide us a tool for communication, but this is not enough. In addition, if we really want to understand 'others,' we need to know their communication styles (habits of social interaction, nonverbal language), their culture (general characteristics, history, religion) and we also need a right kind of attitude (genuineness, openness, friendliness). Mainly from this attitude comes the will to understand 'the other.'

The importance of intercultural communication comes clearly from the fact that it emphasizes the interactional and communicational nature of those situations where people with different cultural backgrounds meet. In fact, entire cultures do not meet each other, but only individual representatives.

Of course, we have to admit that knowing the basics of intercultural communication is not the answer to all questions we face in multicultural situations. Still, it helps us be more realistic and more prepared concerning the multiple challenges of these situations. This already reduces misunderstandings. From the social field's point of view, these skills are desperately needed, especially in those basic services which newcomers (for example immigrants) first use in their new home countries.

## 2. CULTURE AS A FRAME AND WAY OF LIFE

The definition of culture is problematic and challenging because of the concept's multiplicity. It is important to make a difference between narrow and broad definitions of the concept. From a narrow point of view, culture is usually defined as *high culture*. These definitions emphasize cultural products, famous achievements and characters in arts and sciences. This is an important part of culture, but only a small part of the whole.

From the intercultural communications point of view, it is more useful to see and define culture as a way of life of a group of people. This way of life includes behaviours, beliefs, values, and symbols which that group of people accept and pass along by communication and imitation from one generation to the next. Culture has also been defined as "a communities' personality" (Alitolppa-Niitamo, 1994, 18).

Räty defines culture as a frame through which we examine the world (Räty, 42). This definition emphasizes a culture's role in the processes where we give meaning to our observations. Culture influences the way we see the world and the kinds of meanings we give to our observations. These aspects are useful concerning intercultural communication, because they emphasize a culture's total presence in our everyday lives and they create the basis for us to understand our own culturally based assumptions.

Six characteristics of culture are of special importance to intercultural communication: culture is learned, transmissible, dynamic, selective and ethnocentric and the facets of culture are interrelated (Porter & Samovar, 1997, 13). A culture's dynamics enables us to separate its surface structure (language, food, clothing, manners etc.) from its deep structure (values, norms, beliefs, attitudes etc.). The surface structure is more open to changes and easier for outsiders to adopt. On the contrary, deep structure seems to resist change, and by nature, it is very hard for outsiders to adopt. This separation gives us an opportunity to examine the relation between these two parts of culture. In this relation, the surface seems to reflect the deep structure. This is an important finding concerning intercultural communication.

National cultures are an excellent example of the choices that are made in every culture. We choose quite carefully the achievements, historical events, celebrations etc. that we want to pass over to future generations. Usually, we pick up things we value and that we are proud of. These choices can be seen on the pages of history books as well as on the shelves of museums. From

the intercultural communications point of view, it is important to notice that when we make such choices, we also build up boundaries between “us” and “others.”

The relationship between the dominant culture and subcultures needs to be taken into account. National cultures are once again a workable aspect. National cultures seem to include certain characteristics that are common to all members of that nationality. On the other hand, it can be said that inside the frameworks of a certain national culture, there are a zillion ways of being, for instance, Finnish. Such subcultures can be divided according to ethnicity, social classes, professions, age, residence, etc. Therefore, the basic skills of intercultural communication are also needed within national borders. Additionally, we always have to keep in mind the importance of knowing one another’s backgrounds in order to understand each other better.

### 3. COMMUNICATION WITH AND WITHOUT WORDS

Communication can be defined in various ways depending on what kind of communication model we want to emphasize. We can emphasize either the transfer of messages or information or the production of meanings (Fiske 92). Often, communication is defined as the production of community (Kunelius, 1998, 11-12). Porter & Samovar define communication as dynamic transactional behaviour -affecting processes in which people behave intentionally to induce or elicit a particular response from another person (Porter & Samovar, 10).

From the perspective of intercultural communication, it is essential to emphasize the interactive nature of communication. It is also useful to take communication to pieces and examine its ingredients: behavioural source, encoding, message, channel, responder, decoding, response and feedback. By doing so, we get a clearer picture of the interactive nature of communication and we will be able to see the contact surface which the cultural backgrounds influence.

In addition to these ingredients, several characteristics help us to understand how communication actually works. Characteristics include the facts that communication is dynamic, interactive and irreversible and always takes place in a physical and social context (Porter & Samovar, 11). The dynamics

underline the constantly changing nature of communication and the fact that we are always under the influence of other peoples' behaviour and messages. Furthermore, communication always takes place in a context, which affects all parties of communication.

Separation and examination of verbal and nonverbal communication makes it possible to concretize the scale and particularly the multiplicity of the nonverbal part of communication. This is of great importance, for instance, from the European point of view, because most of our communication relies on the verbal side. Nonverbal communication includes nonverbal elements of voice (tone, volume, intonation, rhythm and speed), gestures, facial expressions, body movements, physical appearance and clothing, eye contact, touch, use of space, distance and moments of silence (Salo-Lee & Malmberg & Halinoja, 1998, 36-55).

#### 4. COMMUNICATION DIFFERENCES

There are cultural differences in both verbal and nonverbal communication. In verbal communication, language differences, various communication styles and for instance different conceptions of small talk bring out intercultural challenges. Terminology, pronunciation and language structures are the most common sources of language problems. On the other hand, misunderstandings are very often connected to social meanings and impressions, which may have several different meanings depending on the context. Fortunately, language problems are usually something that we expect and can quite easily prepare ourselves to face.

Communication styles differ enormously from one culture to the other. In addition, there are usually features from several different communication styles in one specific culture. Focal dimensions concerning the variety of communication styles are direct communication – indirect communication, verbose style – exact style and result oriented communication – process oriented communication (Salo-Lee et al., 1998, 30-41). How directly people express themselves, how many words are used, how colourful those words are, how a certain point is discussed – these are concrete examples of how communication styles differ from each other. Differences are so remarkable, that they unavoidably cause uncertainty and misunderstandings. Where “a tight-lipped

speaker” is considered impolite and rude, a “verbal virtuoso” is considered an unreliable chatterer.

Small talk is often present in communication situations. Functions of small talk – opening and ending the conversation, taking care of social relations, reducing uncertainty – are emphasized differently in various cultures. In addition, what the suitable topics are or with whom we can actually start chatting are not the same in various cultures (Salo-Lee et al., 44-45). Misunderstandings may occur, even if we try to stay within non-political and neutral topics.

The nonverbal part of communication is learned – and most of it unconsciously – in one’s own cultural surroundings. From an intercultural perspective, this is the fact that causes difficulties in people understanding one another. Because we are not so very conscious about our own nonverbal messages, it is even more challenging to recognize, analyze and interpret messages sent by others. To sum up, communication misunderstandings are usually connected with nonverbal messages.

Basic feelings are usually expressed by the same facial expressions from one culture to the other. Therefore, we can count on the fact that a sad, angry or surprised person looks the same wherever we go. On the other hand, there are remarkable cultural differences in what feelings you can show and when. Extremes can be found between the western style, where we are encouraged to show our feelings and Asian cultures, where it is common that feelings and thoughts should be hidden (Salo-Lee et al., 58-68).

Gestures are also a problematic issue. Familiar and safe gestures can turn out to mean the complete opposite – even something rude and insulting – in another culture. Dress codes vary remarkably in different cultures. What part of the human body can be revealed and what should be kept out of sight – is the crucial question. Eye contact can cause problems, too. In the western world, it is usually a sign of honesty and reliability and it is important in itself. In other parts of the world, it can be insulting and impolite to have direct eye contact (Salo-Lee et al., 58-68).

How, when and who can we touch are the essential questions connected to cultural differences of touching. Cultural differences can also be found if we examine how people position themselves – in a certain space – in relation to other people or how close you can get to other people. Meanings of different tones are basically the same worldwide, but there are remarkable cultural differences in rhythm and speed of speech and in the use of intonation and pauses (Salo-Lee et al., 58-68).

## 5. CULTURAL DIFFERENCES

Behind the differences in a culture's surface structure, more fundamental differences of a culture's value basis – the so-called culture's deep structure – can be found. In the 1980's, Geert Hofstede examined cultural and value differences in over 50 countries. He studied survey data about the values of people who worked in the local subsidiaries of one large multinational corporation, IBM. He discovered four dimensions according to which cultural similarities and differences can be explained and understood. These dimensions are collectivism versus individualism, power distance (from small to large), femininity versus masculinity and uncertainty avoidance (from weak to strong) (Hofstede & Hofstede, 2005, 22-23).

The collectivism – individualism dimension focuses on the degree to which a society reinforces individual or collective achievements and interpersonal relationships. In individual cultures, individual rights are dominant. Individuals tend to form relationships with large numbers of people but the relationships remain weak. In collective cultures, ties between individuals are very strong and the family is given more significance. In such cultures, members lean towards collective responsibility (Hofstede & Hofstede, 74-106).

The power distance dimension relates to the degree of equality and inequality between people. A culture with high power distance both accepts and perpetuates inequalities between people. On the contrary, in cultures with low power distance, equality is seen as a collective goal of the society and upward mobility is common (Hofstede & Hofstede, 41-66).

The femininity – masculinity dimension pertains to the degree cultures reinforce the traditional masculine work role model of male achievement, control and power. Masculine cultures experience a higher degree of gender differentiation, whereas in feminine cultures, females are treated equally to males in all aspects of the society (Hofstede & Hofstede, 118-156).

The uncertainty avoidance dimension concerns the level of acceptance for uncertainty and ambiguity in a certain culture. In cultures of strong uncertainty avoidance, societies are rule-orientated and follow well-defined and established laws, regulations and controls. On the contrary, cultures of weak uncertainty avoidance have more tolerance towards variety and experimentation. They are also less rule -orientated and willing to accept change and take risks (Hofstede & Hofstede, 164-197).

Fons Trompenaars and Charles Hampden-Turner developed a model of culture with seven dimensions. Most of this model is similar to Hofstede's, but two of the dimensions bring out completely new aspects. These dimensions highlight two questions: how we manage time and how we relate to nature. The concept of time dimension poses the following question: do we think of time from the future perspective or do we see it as a mixture of the past, present and future. Differences in the concept of time can also cause problems concerning punctuality. Attitudes towards nature also vary from one extreme to the other. Do we try to control nature or do we let it control us – these are the central questions (Trompenaars & Hampden-Turner, 2009, 120-155).

The above-mentioned models are useful from the viewpoint of intercultural communication. As important as precise and detailed information about a certain culture is the understanding of how different cultures can be examined, evaluated and compared. The above-mentioned dimensions are of great help in this process.

## 6. STUMBLING BLOCKS OF INTERCULTURAL COMMUNICATION

What are the most common problems in intercultural communication? According to Barna, the majority of the problems are caused by the fact that we presuppose too much similarity and neglect cultural differences. Of course, cultural differences must not be overemphasized, but they have to be taken into consideration. Lack of a common language and the inability to recognize and understand nonverbal messages cause difficulties. Prejudices and stereotypic thinking create problems of their own kind. Over generalization can lead us so far that we lose the individual with his or her personal characteristics. An ethnocentric attitude makes us evaluate others and this can be problematic, because the result of such an evaluation is always the same – our way is the right way. It is also common that meeting people with different cultural backgrounds is so new and frightening to us that chances for normal interaction disappear because of too much anxiety and stress (Barna, 1997, 370-378).

## 7. TOWARDS A CULTURALLY SENSITIVE HELPER

From the viewpoint of the social field, assimilation of basic knowledge and skills for intercultural communication can be seen as steps towards a culturally sensitive and culturally more conscious helper. According to Alitolppa-Niitamo, a culturally sensitive helper is aware of how cultural factors influence their thinking, behaviour and ideas of right and wrong. A culturally sensitive helper is also aware that other people's thinking, behaviour and ideas may be based on completely different views of the world and different cultural attitudes and norms (Alitolppa-Niitamo, 1994, 168-169).

The culturally sensitive helper is aware that his or her education and professional field are also based on culture-based assumptions – starting from values and norms. In addition, the culturally sensitive helper is flexible and open and understands the meaning of equal treatment in customer work (Alitolppa-Niitamo, 168-169).

The culturally sensitive helper is a professional in communication. They are sensitive to cultural differences in communication and try to send and receive verbal and nonverbal messages precisely and in a culturally correct way. Furthermore, he or she is aware of culturally suitable topics (Alitolppa-Niitamo, 168-169).

The culturally sensitive helper possesses information concerning foreign cultures. He or she knows the history of a certain ethnic group, their cultural values, norms and their way of life. Moreover, they are interested in foreign cultures and are eager to learn more (Alitolppa-Niitamo, 168-169).

The culturally sensitive helper is not colour blind. He or she will not become distressed when faced with difference and does not consider them deviations. The culturally sensitive helper accepts differences and values and respects them. He or she sees other cultures just as valuable as their own. Additionally, the culturally sensitive helper understands the socio-political situation of minorities and is aware of discrimination and racism (Alitolppa-Niitamo, 168-169).

## 8. HOW TO TEACH INTERCULTURAL COMMUNICATION?

A teacher should see this subject as an expedition towards the unknown. Stable lectures and teacher-centred teaching styles are out of the question.

A teacher needs openness and flexibility and has to tolerate uncertainty. A teacher should have their own international and multicultural experiences and needs to be enthusiastic – as always – about intercultural questions.

Equipped with these characteristics, a teacher is ready to start an expedition with the students. During the journey, a teacher has to ask questions, encourage discussion – and most importantly – stop and reflect on everything that they come across together *with* the students. The comparison of theoretical knowledge and personal experiences intensifies the learning process. The teacher should not be afraid of all the questions that may arise. In this case, they are more valuable than the answers. The teacher's role as a guide and a mentor is strongly emphasized. To sum up – and as a motto for teachers: ask questions, encourage consideration and discussion, utilize experiences.

As a subject, intercultural communication makes it possible to utilize the whole multiplicity of assignments and demonstrations. Written assignments, handling cultural differences, and diaries of learning experiences fit in perfectly. For its part, communication encourages the teacher to use interactive demonstrations.

The most important thing for students' enthusiasm and motivation is to justify and explain the topicality and importance of the subject. The most important contents are the concepts of culture and communication. They create the basis for examining cultural differences. Examination of these differences and their reflection on those pertaining to communication enables us to piece together the relationship between the culture's surface and deeper structures.

Discussion and analysis of the above-mentioned topics makes it possible – for everyone of us – to recognize our own culture-based assumptions, and this is the most important step towards understanding others. This creates the basis for cultural sensitivity.

## REFERENCES

- Alitolppa-Niitamo, A. (1994). *Kun kulttuurit kohtaavat*. Otava: Keuruu.
- Barna, L.M. (1997). *Stumbling Blocks in Intercultural Communication*. In: Teoksessa Samovar, L.A. & Porter, R.E. (ed.) *Intercultural Communication: A Reader*. Wadsworth: Belmont CA.
- Fiske, J. (1992). *Merkkien kieli*. Gummerus: Jyväskylä.
- Forsander, A., Ekholm, E., Hautaniemi, P., (et al. 2001). *Monietnisyyt, Yhteiskunta ja työ*. Palmenia: Helsinki.

- Hofstede, G. & Hofstede, G.J. (2005). *Cultures and Organizations. Software of the Mind*. London: McGraw-Hill Book Company
- Kunelius, R. (1998). *Viestinnän vallassa*. WSOY: Porvoo-Helsinki-Juva.
- Pitkänen, P. & Kouki, S. (1999). *Vieraiden kulttuurien kohtaaminen viranomaistyössä*. Edita: Helsinki.
- Porter, R. & Samovar, B. (1997). *Intercultural Communication: A Reader*. Wadsworth: Belmont CA.
- Räty, M. (2002). *Maahanmuuttaja asiakkaana*. Tammi: Helsinki
- Salo-Lee, L., Malmberg, R. & Halinoja, R. (1998). *Me ja muut. Kulttuurienvälinen viestintä*. Gummerus: Jyväskylä.
- Trompenaars, F. & Hampden-Turner, C. (2009). *Riding the Waves of Culture: Understanding Cultural Diversity in Global Business*. London: Nicholas Brealey Publishing.



# ERASMUS LLP PROGRAMS AS A CHANCE FOR THE STUDENTS' DEVELOPMENT

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## ABSTRACT

The Erasmus program, built in 1981-1986 as a pilot Exchange program, is the EU's flagship education and training program enabling students to study and work abroad each year. It funds co-operation between higher education institutions across Europe. The program not only supports students but also professors and business staff who want to teach abroad, as well as helping university staff to receive training. It is a meaningful tool promoting intercultural cooperation.

## KEYWORDS

*Erasmus program, tertiary level of education, alienation, loneliness*

## INTRODUCTION

The Erasmus program, named after the Dutch philosopher Erasmus of Rotterdam who lived and worked in many places in Europe to expand his knowledge, is a European Union student exchange program. Later Erasmus name was given the acronym European Region Action Scheme for Mobility

of University Students. The program built on the 1981-1986 as a pilot student exchanges and although it was adopted only shortly before the beginning of the academic year 1987/8, it was still possible for thousands of students to participate in Erasmus in its first year.

An overriding aim of the program is help to create a "European Higher Area" and foster innovation throughout Europe. The success of the scheme in promoting a sense of a multicultural European is also increasing.

## I. FORMAL CHARACTERISTICS OF THE PROGRAM

The Erasmus scheme gives university students the opportunity to study abroad for a period of 3-12 months at a partner university or other form of higher education establishment in another participating country. For all participants is the opportunity to spend a period abroad offering priceless experiences that can help them in their personal and professional lives.

The scheme aims to develop human resources across Europe and help to promote a dialogue and understanding between people of different cultures. The program foster not only learning and understanding of the host country, but also a sense of community among students from different countries and it can be hard to know what one might expect. The Erasmus experience is considered both a time of learning as well as a chance to socialize.

The linguistic and cultural diversity promoted by such ideas is actually helping to give young European a more common cultural identity. They are not asked to give up their national or regional identity, they are asked to go beyond it and that is what pulls them closer together. We are creating a community in which diversity is not a problem but a characteristic. It is an integral part of feeling European.

The students return from stint abroad with better linguistic skills and with something different to include in their Curriculum Vitae that distinguishes them from other graduates. Simply having Erasmus on one's Curriculum Vitae is seen as being a very positive thing because that one word explains the whole experience of studying abroad.

Overall, the scheme has been hailed as a resounding. Most of the students said they had developed a more open attitude an approach towards society and a better and a clear perspective for their subsequent studies or professional life.

Most, also said that they achieved a greater linguistic competence during their Erasmus experience and the percentage of students able to work in a second language increased.

Many students show that a period spent abroad enriches students' lives into the academic and professional fields, but can also improve language learning intercultural skill, self-reliance and self-awareness. Their experiences give students a better sense of what it means to be a European citizen. Many employers highly value such a period abroad, which increase the students' employability and job prospect.

Erasmus helps higher education institutions to work together through intensive programs, networks and multilateral projects. Thanks to all these actions, Erasmus has become a driver in the modernization of higher educational institutions and system in Europe and has inspired the establishment of the Bologna process.

Erasmus program is not only valid for the students also for the staff whose visits can be included on a Curriculum Vitae and perspective on their work. Staff exchange has similar beneficial effects both for the people participating and for the home and host institutions. You can stay at your home institution and maintain the status quo, or you could go on Erasmus Staff Mobility and gain new perspective, new ideas, new partners, new friends, new methods of working and perhaps improve abilities as a teacher and as a performer, exchange ideas, learn about each other's culture and compare working environments.

Erasmus represents a chance not only for students interested in European mobility but also for some professionals such as university lectures. One may think that its familiar with the culture he is going to, but when you are immersed it turns out there is always something new to learn.

Few, if any, programs launched by the European Union have had a similar Europe-wide reach as the Erasmus programs. The vast majority of European universities take part in Erasmus.

The program has the following parts:

- A. For students: studying abroad, doing a traineeship abroad, Linguistic preparation
- B. For universities/higher education institution staff: teaching abroad, receiving training abroad
- C. For universities/higher education institutions: intensive programs, academic and structural networks, multilateral and structural networks, multicultural projects

D. For business: hosting student placements, teaching abroad, participating in university cooperation projects.

For many European students, the Erasmus Program is their first time living and studying abroad. Hence, it has become a cultural phenomenon and is very popular among European students.

## 2. SOCIAL AND PERSONAL PROBLEMS OF ERASMUS STUDENTS

On the other hand, Erasmus helps higher education institutions to work together through intensive programs, networks and multilateral projects. Thanks to all these actions, Erasmus has become a driver in the modernization of higher education institutions and system in Europe and has inspired the establishment of the Bologna Process.

It gives a push and new ideas to implement at work. Appreciate both the academic and cultural benefits, this exchange program offers and highly recommends it to staff who wants to test skills in a different environment and improve their career options.

Students from Cardenal Spinola-CEU were studying when they, like many other young people across Europe every year, chose to take part in the Erasmus program and spend months studying. When they finally take the decision of studying abroad. It is important to test the level of knowledge of the language from the country that they are going to visit. Having a previous knowledge of that language is going to simplify the trip a lot of choosing the different subjects that you are going to study is going to be an easier duty.

They will notice that living for some time in a foreign country helps a lot in learning that specific language. Even if one knows the vocabulary and grammar of a foreign language, the best way to be able to freely communicate in that language is to live for sometime there.

Anyway, you do not have to forget that although this is going to be a productive experience you are going to need a period to adapt the customs of that country. You can know something about each country's customs, about people's characters and their culture then, as an Erasmus student one has the possibility to take part in many organizations which imply travelling in different cities and know better the country you are visiting. It is much cheaper as an Erasmus student to visit sights and one should not hesitate in going on trips.

At the beginning many students who take part in the exchange program find themselves lonely and isolated when faced with the daily challenges that accompany moving to a foreign country. The shock of leaving behind family and friends and being thrown into a new and unfamiliar culture where even communicating with people can be a challenge, can leave students feeling disorientated and alone.

The Erasmus year abroad is filled with meeting new people from all over the world and learning how to live in a different environment. Being an Erasmus student means you can venture outside of your normal daylife and experience life in a way not many people ever will.

To live abroad requires courage, enthusiasm and a sense of adventure; the people you meet during the study year and the connections you make help to soften the blow of living on the other side of the pond.

Not to forget that this is the best opportunity to be away from home and from parents. You can do whatever you want to, go out when you wish to and stay as long as the others stay. But at the same time, you have not to forget about studying and having good marks. Because all this experience is not just having fun but also studying and returning home with new knowledge.

We can refer to the fact that students are able to improve their abilities in communication in a foreign language.

The former Erasmus student knows that when they return, their homes feel less glamorous, their towns colder, their universities seem like dumps, the television still shabby and their friends lousy. Once the good-times come to an end, the majority of students return back to their parental home and to their boring daily lives either depressed or disappointed.

The year abroad is filled with constant discoveries, so many emotions, new friendships, and the feeling of being a little "special". At home, life becomes very simple again and a little empty because all the new things are one of the components of the Erasmus experience and you realize that everything is exactly the same as it was when you left. But inside everything has changed. The return back to reality of the students which is frequently chaotic, suddenly unfamiliar with their new environment, finding it difficult to share their experiences with others, idealizing the foreign lifestyle. This turbulent phase of coming back down to earth could even lead to depression in the most serious cases.

It is easier to leave than it is to go back. This feeling of loneliness is often exacerbated on arriving home when many returning students complain of feeling you out of place and unable to share their experiences with their less

travelled friends. Studying abroad may promote a great multicultural awareness but it can also lead to alienation from your own background.

### 3. ADVANTAGES AND DISADVANTAGES OF ERASMUS

If we were to analyze the advantages of being an Erasmus student, we could say that it is represented the fact that a student has the opportunity to study in another country. They have the opportunity to experience something new, different ways of teaching, which can be better than the ones in their country.

Being an Erasmus student involve advantages and disadvantages. Gaining a mobility like this mean that the student has a lot of opportunities but also a lot of obligation and responsibilities. I will try to mention some of the advantages and disadvantages.

Possible reasons for studying abroad might be the following: find new things, to get in contact with new cultures, learn things that you cannot learn in your own country, learn how to life and administrate themselves in a different country with different rules, be able to compare knowledge with other students, go abroad, to have new subjects that you can study, find and learn new things, earn new skills, meet new friends, study subjects that your home University does not offer, improve language skills and or learn a new language, become independent from your parents, learn to be open-minded, improve your knowledge, take on new challenges and experience different ways and methods to teaching.

When a student is considering to study abroad, he or she is taking in consideration: What the new institution can offer? What is the economical situation in that country? What social problems may occur?

Although at the same time when going abroad you will see and explore a different way of learning when there are different teaching methods in different countries. It is a big step to go away from home and very educative, you will improve your education. It is fun to go and explore new things in new countries and learn a language, there could be the need to of going away to a better University to learn things that you could not learn at your own University.

Talking about disadvantages we can find diverse and different of them according to the countries and the students, so some of them are:

- Financial problems, the grant should be based on the price level of the country where the student is going to, not where the student is coming from. The main disadvantage is that the grant is nearly not enough.
- Lack of information about the University and Erasmus program.
- All the necessary information about the University must be available as a web page that is easily available, the student's travel reports should also be available on line.
- There should be a survivor kit given to everyone with all the basic information about the University and the city, maps, contact information.
- Encourage mixing with local students and local people to increase cross-cultural understanding.
- We need more transparency, more communication between Universities.
- Less bureaucracy, less paperwork.
- You have to adjust to the courses given at the university going to with the one from our own University.
- Different semester in different countries.
- Different curricula.

#### 4. POSSIBLE SOLUTION TO THE DISADVANTAGES.

Talking about disadvantages is not like saying that this kind of program has a negative part but just remind that every student that choose to go as an Erasmus student has some obligation that are mentioned in the contract and in the case of not respecting them he must be paid back the money of the grant used.

If we want that the experience was going on without any difficulty we can add some possible solutions to these disadvantages. Just as something informative the possible solutions for these problems could be:

- The idea of having a travel report of the most important things that the student encountered during his stay. These reports can help other students when going abroad It should not be too general, should contain concrete information about the country, the culture, the University, how to get to the university the types of accommodation. The reports

must be made available, public on online for all the students to read easily.

- Reduce stress sharing information from local students translated to English and distributed to a mailing list to all foreign students, like what is happening at the campus, where to buy tickets, have a group to organize trips and excursion during the weekends.
- Meet new people, friends for life, this happens with other Erasmus students not with the local students.
- Unify the paperwork, you have to do the work twice in home country and in the country you are going to. Each University has its own papers to be filed in; it would be better if there were the same papers of all Erasmus Universities.

## CONCLUSION

We can highlight that the main advantages for being an Erasmus students are:

- Flexibility, experience which encourage and develops a flexible to learning and working, is an excellent preparation for employment.
- Adaptability, the Erasmus experience allows you to become immersed in another culture, make new friend, obtain knowledge of another language and develop skills that will contribute to your employability.
- Maturity, you will have acquired life skills which cannot be taught and which may take others significantly longer to acquire.
- Employability, the overall educational advantages of studying your subject in another country will contribute to the enhancement of your employability.

In conclusion Erasmus program become larger and used by more and more students and also involve more and more countries. Using this program, every student can live an experience that help him in life because this kind of exchange is not just a simple acquisition of knowledge, is more like a process that change mentalities, lives and provides a different view of the world. A new community is emerging from this European program, named " Erasmus generation."

## REFERENCES

*History of the Erasmus programme* on line at: [http://ec.europa.eu/education/erasmus/doc1709\\_en.htm](http://ec.europa.eu/education/erasmus/doc1709_en.htm), Accessed: 18 March 2012.

*One million Erasmus celebration*. IBS report on line at: [www.en.org/download/edu/IBS-2002-Lyon-1-million-erasmues-student](http://www.en.org/download/edu/IBS-2002-Lyon-1-million-erasmues-student). Accessed: 29 April 2012.

*Post Erasmus syndrome: SOS Distress*. ON line at: [www.cafebabel.co.uk/article/22806/post-erasmus-syndrome-sos-distress](http://www.cafebabel.co.uk/article/22806/post-erasmus-syndrome-sos-distress). Accessed: 28 December 2011.



PART TWO

**SOCIAL AND EDUCATIONAL SUPPORT IN CASE  
OF DISABILITY**



# IMPLICATIONS OF THE QUESTION CONCERNING THE MEANING OF CHILDREN'S SUFFERING

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## ABSTRACT

The purpose of this research paper is to describe the prevalent nature of suffering and to highlight the importance of the question of the meaning of suffering in general and in reference to children in particular. This issue is faced by mothers and fathers whose children are ill, and who, depending on their response, adopt different attitudes towards suffering. The variety of the implications this question raises is so astounding that the parents' response to the illness of their child is often impossible to anticipate. This analysis, especially in its pedagogical aspect, is based on the literature on the subject. In particular, it refers to the teachings of John Paul II delivered in the Apostolic Letter *Salvifici Doloris* of 1984 and to the proceeding papers of the 2009 symposium devoted to the issue of suffering published as *Miłość i cierpienie. Misterium Boga i nadzieja człowieka*. [Love and Suffering. The Mystery of God and Hope of Man], edited by Fr. Janusz Malski and Izabela Rutkowska.

Finally, this paper should be considered as a mere introduction to the issue, deserving a more thorough investigation and empirical verification of the message in question.

## KEYWORDS

*Suffering, child, John Paul II*

## INTRODUCTION

The aim of this research paper is to present the prevalent character of suffering and to highlight the importance of the question concerning the meaning of suffering in general and suffering of children in particular. The question is most frequently asked by the worried parents whose children are ill, and, who, depending on the answer, adopt different attitudes towards suffering. The variety of the implications this question raises is so astounding that the parents' response to the illness of their child is not always possible to anticipate. Without empirical data, my analysis and reflections, especially in their pedagogical aspect, are based on the literature of the subject. In particular, with due reverence, I am going to refer to the teaching of John Paul II delivered in the Apostolic Letter *Salvifici Doloris* of 1984 and to the proceeding papers of the 2009 symposium devoted to the issue of suffering.

It was an honour for me to actively participate in that symposium investigating suffering as an educational factor (Rynio, 2010, 249-260). The proceeding papers published as *Miłość i cierpienie. Misterium Boga i nadzieja człowieka [Love and Suffering. Mystery of God and Hope of Man]*, edited by Fr. Janusz Malski and Izabela Rutkowska contain numerous reflections on the meaning of suffering. My attention was especially drawn to Fr. S. Palumbieri's *Cierpienie i sens: między rozumem a wiarą [Suffering and Its Meaning: Between Reason and Hope]* (Palumbieri, 2010, 65-95), by Małgorzata Zawadzka's *Cierpienia rodziców dziecka nieuleczalnie chorego [Suffering of Parents with an Untreatable Child] ...*" (Zawadzka, 2010, 237-384), and also to Izabela Rutkowska's *List apostolski Salvifici Doloris jako chrześcijańska definicja cierpienia [The Apostolic Letter Salvifici Doloris as the Christian Definition of Suffering]* (Rutkowska 2010, 187-203). The content of these articles provided inspiration for this paper, that should be primarily considered as an introduction to the problem deserving a more thorough investigation and empirical verification of the message in question.

### 1. PREVALENCE OF SUFFERING AND INDIVIDUAL RESPONSE TO THE ILLNESS OF THE CHILD

Suffering is an inseparable part of human reality. It concerns every one, it encompasses all existence, it is an individual experience, it has its

own dynamics, depth and intensity, it has a multiple origin, it is conceivable and inconceivable, it can give meaning to life or it can be perceived as meaningless. However, above all, suffering is human, which makes it a fact – obvious and universal. Suffering can be a developmental factor of personality and spirituality. On the other hand, it can also be destructive and disintegrative. Suffering is an appeal for understanding and help, it is interpreted subjectively and simultaneously, it is a test for hope and a milestone, a turning point in human life. Suffering is an inseparable part of human existence, and if treated as experience, it is multifaceted and multidimensional (Rynio, 2010, 249). The world of suffering discovers its subject in every man and for this reason forces us to reflect upon and ask basic questions about existence.

John Paul II describing the world of human suffering spreads its scope over the whole lifespan and mentions “the pains of birth” (the whole of creation has been groaning in travail until now) and the pain connected with death. Finally, he mentions ultimate suffering that can become part of man after his death.

Another important feature of suffering is its prevalence. As Izabela Rutkowska, who analyses John Paul II’s message in view of the Christian definition of suffering, claims, suffering is present in such expressions as: *the world of human suffering, suffering of the world, each human’s suffering, extreme suffering, huge range of human suffering, full range of human suffering, complete structure of the suffering subject, list of suffering, accumulation of human suffering, intensity, depth of suffering, multiple suffering, range and multiplicity of moral suffering, various forms of suffering, different suffering, all human suffering, varieties of human suffering, various suffering, the whole creation has been groaning in travail until now, full range of human suffering is by far larger, much more diversified and multidimensional, man suffers in various forms often beyond the scope of medicine even in its furthest branches, complete register of situations painful to man in a number of ways, afflicted by multiple suffering, quantitative meaning of suffering, natural disasters, epidemics, catastrophes and cataclysms, widely spread pain, of everyday drama so much undeserved suffering* (Rutkowska 2010, 194).

The next feature of suffering is its inexpressibility and mysteriousness found in such phrases of the Pope as: *man in his suffering remains an extraordinary mystery, suffering of the innocent must be accepted as mystery that man is unable to fully perceive with his reason, suffering is always a mystery, all our explanations will always be insufficient and inadequate, Christ lets us*

*into the mystery and lets us discover the “why” of suffering, as long as we are able to comprehend the sublime nature of God’s love, suffering seems almost inexpressible and not transferable, in his suffering man remains an intangible mystery, suffering belongs to the mystery of man, the riddle of sorrow, the mystery of Redemption of the world is in an amazing way rooted in suffering* (Rutkowska 2010, 193-194). According to the author quoted above, “this set multiplies the frequency of using various lexical forms which reflects the effort of the author of *Salvifici Doloris* to unambiguously define suffering. There are phrases such as: *it seems, as if, as though, it appears, in a way, to some extent* and phrases written in italics, in inverted commas, which demands a different than usual reading of so highlighted expressions” (Rutkowska 2010, 195).

When suffering concerns a child, more doubts and questions appear and the answers seem unreal or simply impossible. Suffering as it exists, its meaning and presence in the life of a child – as M. Zawadzka reflects on the matter – is a deep mystery that man must accept. The individual cannot penetrate it with his own intelligence or otherwise explain it. It probes the limitations and insufficiency of man.

The time of illness of a child is the time of encounter for the parents, to encounter one’s own internal tragedy of powerlessness and inability to cope. There is an element of indefinite future accompanied by fear, anxiety and insecurity (Zawadzka, 2010, 277). Following V. E. Frankl, Zawadzka points out that “man does not possess the innate mechanisms to withstand suffering, therefore he needs to master this ability.”

The experiences connected with the suffering of a child can stimulate the parents to act, can develop and destruct. They can lead to anxiety, withdrawal, despair and recalcitrance. On the other hand, they can also be a way to maturity, to understand what is important and essential in life. Suffering reveals the true spiritual façade of man and rejects all illusions, pretences and masks. Man in his suffering expresses his own personality and its maturity or immaturity, but also he learns self-control, patience, and openness to the problems of others (Zawadzka, 2010, 277).

Suffering as such, and especially the suffering of a child becomes a factor of internal growth and development on condition that man accepts it and takes an active attitude towards it. Considering the parents’ response, it is often the case that for some parents it takes years to accept the suffering of their children. It also happens that they never accept the situation. The lack of acceptance leads to a panic avoidance of any suffering or to desper-

ate attempts to treat suffering as a challenge. This results in fear response to suffering, withdrawal from reality and destructive behaviour (Zawadzka, 2010, 278).

Another author of the quoted collection, Fr. S. Palumbieri, admits that a “suffering consciousness asks questions that stimulate us to discover the global meaning of existence. They, in turn, taking part in the transfer from superficial life to authentic life, become factors that define the march of our life – the attitude responding (*responsoriale*) to challenges and responsible (*responsabile*) for specific acts corresponding to specific talents. These stimuli, focusing on the essence of life (*essenzializzazione della vita*), are in perpetual motion – in their own way, they determine the values of our existence, especially when we painfully experience their absence” (Palumbieri, 2010, 74).

Suffering, as parents perceive it, is a sacrifice. Suffering, and especially the suffering of a child, is objectively deprived of meaning. However, experiencing this situation “existentially meaningful” in terms of sacrifice is only possible when man experiences it in “striving for something” or “for someone or something.” Sacrifice is a renunciation that combines “the joy of love with the pain of sacrificing one’s own life for the sake of what one loves” (Zawadzka, 2010, 278). Zawadzka, who has been helping children and their parents for years, observes that “the experience of suffering of one’s own children shapes different attitudes towards God. Some move away from God, some come closer, and for others, suffering is an argument against His existence” (Zawadzka, 2010, 279). Furthermore, focusing on the social dimension of suffering of parents, Zawadzka distinguishes three aspects of suffering: a parent as a person accompanying the suffering of his or her child and supporting the child, a parent as a person afflicted with suffering and requiring external support, and a parent with an untreatable child – a situation that forces the environment to reflect upon the meaning of life and the meaning of suffering.

Zawadzka, investigating the multidimensionality of suffering of parents with an untreatable child, provides a tabular analysis of types of suffering, sources of suffering, as well as responses and reactions of parents (Zawadzka, 2010, 275). The analysis of the data provided helps to understand the multidimensionality of suffering and can be used to determine the situation of parents and to find help appropriate for them.

## 2. NECESSITY OF MEANING: A SPECIFIC CODE OF TRANSCENDENCE

The problem of meaning and a lack of meaning become extremely difficult when we consider the suffering of a child, especially an untreatable child. It is even more difficult for the parents of the child. The parents help their child who suffers and, at the same time, they must come to terms with their own inner suffering and the situation inflicted upon them by the illness of their child. Parents with a child who suffers from some illnesses rarely remain indifferent to the fact that their child is suffering. The illness triggers tons of emotions – fear, anxiety, protest, and insecurity. Struggling with their own powerlessness and helplessness, parents must forget for a while their own suffering in order to give their child a sense of security in such a stressful time of illness. A child's suffering and the problems it causes is undoubtedly one of the most difficult experiences for parents. It involves coping with emotions, adjustment to the new situation, and rearrangement of family and professional life. As experience teaches us, it is much easier to cope with suffering when support is offered.

Unfortunately, it often happens, as the author pointed out, that parents are unable to go through this traumatic ordeal. What is more, “if a married couple have not managed to create a strong marital bond before, then, usually, such a difficult situation as the illness of their child will not help to create this bond. Weakening or lack of a marital bond may lead not only to a further separation of the parents, but also to a complete disintegration of their relation. Suffering that the parents experience should also become for those who are close to the child a stimulus leading to reflection, to recognize the problem, and an encouragement to really help. Although there are many people for whom suffering becomes an educational factor, yet the neighbours of the parents with a sick child are often unready or not properly prepared to offer the help the parents need” (Zawadzka, 2010, 281).

According to Jaspers, a mutual struggle between physical pain and suffering, between the meaning of passing away and fear, between inability to full achieve in life and one's own moral fragility and guilt creates specific codes of transcendence. Man, though, is the only being who seeks meaning in everything. Man does not investigate the meaning of data that result from facts, but asks about those which result from his own existence. Hence, he makes an effort to perceive facts and to get involved in a search for the meaning of himself and of earthly life from the beginning, through development, until the

end. Man cannot live without understanding “why.” Similarly, he cannot act without understanding “for whom.” He needs to be aware of the meaning of something, that which provides sense, otherwise he feels suppressed. Man is a being in constant search for meaning – the fact that this search is hindered and prevented seems to account for the existence of so many forms of evil in today’s world. Paradoxically, the more he feels it, the more he struggles to attribute the meaning. Thus, the deepest meaning of suffering lies in Redemption. When one is able to answer “why,” they can face any “how” of suffering.

### 3. THE COPERNICAN REVOLUTION’S PERCEPTION OF SUFFERING

Asking about the meaning of suffering as such, and the suffering of a child in particular, is none other than to ask about the meaning of life. Provided that this question can be answered, it requires the Copernican revolution in order to get a response, not to ask and that life is a question itself, a question that we can answer by being responsible for our life (Frankl, 1971, 127). In fact, being confronted with suffering as such, and concerning the suffering of a child in particular, demands wisdom that is able to combine what is essential in order to provide an adequate answer and to recognise the positive aspect of every situation. “The values developed through coping with fate and suffering suggest that the retreat from accomplishing the values developed through action, the ‘creative’ values and resulting from experience, the ‘experience’ of values – brings about, with the appropriate attitude towards such a limitation – the possibility of realisation of new values,” the values linked to attitude! Such a retreat is at the same time a step in the direction of the highest values and the meaning of suffering. Frankl argues that one has to learn how to “sanctify suffering and sanctify dying through sacrifice.” He adds: “it is about (...) using all the spiritual power to fight for the meaning of death and to face death – with the attitude of dignity.” What does it mean to sanctify suffering and dying through sacrifice? It means to live in a manner different from the very experience of suffering. This experience enclosed in itself denotes discomfort, disturbance of inner feelings and confusion in relations with others. It evokes negative expressions – *ad intra* and *ad extra*. However, it can become intentional and decisive in the form of a sacrifice due to such a deep rearrangement of the soul boosting all other resources.

It happens not through creating illusion, but through integration of each instance of suffering. Such integration is possible thanks to going from death to life, thanks to the Resurrection and the one resurrected. He is the first one who went from death to life and that is why in Him, every sacrifice is a fruitful sacrifice, and every instance of suffering is important in the realisation of the new world.

In order to fill sacrifice with intention, one needs to transcend it. In other words, suffering can be intentional and I can suffer only when I suffer “for the sake of something” or “for the sake of somebody.” Thus, if suffering is to be meaningful, it cannot be for its own sake since eagerness to suffer and eagerness to sacrifice will immediately turn into masochism. Suffering only makes sense if it is “for the sake of something.” When we accept suffering, the intention fills not only suffering, but also something else that is not identical with it – suffering is transcended. Meaningful suffering always goes “beyond itself;” it goes to something that suffering is about. To put it in a nutshell – sacrifice is the meaning of suffering. The person who loves nobody and who is attracted only by his hypertrophic ego, who absorbs the whole range of a relationship, is not able to integrate himself and will face extreme trouble building relationships inspired by the sacrifice of himself so that he might become a better person. Love is in its nature a sacrifice and an act of surpassing for one’s own self. Only through love can the internal experience of existential meaning be achieved. Before man is completely integrated in the process of sacrifice, he becomes richer through understanding the meaning of a sacrificing experience itself (Palumbieri, 2010,73).

#### 4. EDUCATIONAL VALUE OF ASKING ABOUT THE PURPOSE AND MEANING OF SUFFERING

Both suffering and the person who is suffering always remain an insoluble mystery, which leads us to the question about the purpose of suffering and its meaning (SD 9). John Paul II draws the attention of those who seek an answer to the inevitable question *why* – in the revelation of divine love. He emphasises that love is the fullest source of the answer to the question of the meaning of human suffering which always remains a mystery (SD 13). Dealing with this mystery, the Pope underlines its essential sources and dimensions.

When man faces the mystery of suffering, he does not ask about its meaning but wants to know its source. The existence of suffering provokes the question of the nature of evil. The Christian answer to the question “what is evil?” – according to John Paul II’s teachings – is different from the answer provided by some cultural and religious traditions that claim that existence is an evil from which we should set ourselves free (SD 7). The Pope points out that “Christianity proclaims the essential *good of existence* and the good of that which exists, acknowledges the goodness of the Creator and proclaims the good of creatures. Man suffers on account of evil, which is a certain lack, limitation or distortion of good.” Evil as the source of suffering is always somehow related to good. The Holy Father writes: “We could say that man suffers *because of a good* in which he does not share, from which in a certain sense he is cut off, or of which he has deprived himself (SD 7).

Analysing the human quest for the answer to the question of the meaning of suffering, John Paul II quotes biblical examples of human suffering being the result of evil identified as sin or with the lack of good. At the same time, he stresses the fact that the problem in question does not refer to the Bible only, but has a wider reference in the contemporary world.

According to John Paul II, suffering refers to the dramas of nations, families, or individuals. Emphasising the subjective nature of suffering, the Pope argues that “the world of suffering becomes particularly concentrated, [...] *in proportion to the mistakes and transgressions* of our contemporary civilization — such as the horrible threat of nuclear war, that we cannot think of this period except in terms of *an incomparable accumulation of sufferings*, even to the possible self-destruction of humanity. In this way, that world of suffering which in brief has its subject in each human being, seems in our age to be transformed—perhaps more than at any other period in history — into a special “world”: the world which as never before has been transformed by progress through man’s work and, at the same time is as never before in danger because of man’s mistakes and offences” (SD 8).

Suffering as such, and particularly the suffering of a child, is a specific test for human and parental existence and is educational in nature as long as the parent opens up to its interactive character and everything it carries with it. However, “man who is deprived of his potency of suffering – according to Palumbieri – is like an eagle without wings, like a field without crops, like the sky without stars, like fire without flames, like a day without light, like the sea without pearls, like a song without notes, like a tree without fruit, like a face

without a smile, like death without life. Without faith, suffering is meaningless – a starless night in the middle of winter, potency without birth, a safe without a key.

Thus, when man asks about the meaning of suffering, he discovers that suffering is rooted in the evil of sin and also in the progress of civilisation, in the accumulation of man's mistakes and offences taking various form of existence in the world.

## 5. THE CREATIVE CHARACTER OF SUFFERING

When man accepts the teaching hidden in suffering, it reveals its creative meaning. Judeo-Christian teaching places the pedagogy of suffering on the level of participation in divine wisdom that leads from death to life (Rynio, 2010, 216-218).

For a man of faith – as Palumbieri puts it – any kind of suffering is a mystery. And even if it is a traumatic event, there is a way out – just as there was a way out of the most shocking and devastating event, the killing of “the just one” – Jesus Christ, our Lord. A man of faith knows that the Father blesses him in his solitude. God as we know Him from the Bible is the God who is present in human life, in his fears, hopes and concerns. He is the God who is anxious about His Son. It is an extraordinary kind of God's communion of suffering – when the Son is suffering and we, the sons, are suffering in the Son.

A man of faith believes that God is not impassive, but He feels and cries and when we reach His Kingdom, He will say to us: “Come, my son, did you feel my tears, my ordeal, my concern and fear?” – “Father, when did You suffer?” – “My son, I suffered with you, on your cross. I am always Emmanuel, and especially when you are on the cross.” God does not look from afar, from above – God is the very crux of suffering (Palumbieri, 2010, 92). Nevertheless, “being a son of God, being a Christian – to take the quoted author's words – will not prevent us from suffering, but it will give us the strength that gives meaning to our suffering. This new world is of our making. We are the makers of this new world. The Apostle Paul in his Letter to the Romans speaks exactly of this new creation that takes its strength from the Holy Spirit who is developing us, and with Whom we collaborate each day. This Letter of St. Paul is a hymn of hope – the new world has already begun and we are only waiting

for it to complete what Christ began through His Resurrection and ensured through his death” (Palumbieri, 2010, 92).

## 6. DEVELOPMENT OF THE RIGHT ATTITUDES TOWARDS SUFFERING

The necessity of a truly mature approach to the test of suffering is all the more important as we live in times dominated by activity and rationalism and providing the meaning to the pleasant (that which we like) and not to that which is real. According to Palumbieri, “there are different paths that open the horizons of solidarity to our creative invention and imagination. There are paths of assistance (*ad-sistentia*) – “standing by” in attention and sacrifice. However, it is necessary to initiate the dimension of empathy as a kind of feeling that perceives the deepest vibrations of human suffering. Empathy is the basis on which sympathy (*sim-patia*) dwells – the participation in someone else’s suffering (*communion of suffering*) in order to understand and provide the most appropriate service, and also in order to replace the old ideals with the higher values typical of syntony (*sin-tonia*). Empathy is, then, the foundation stone for both sympathy and syntony” (Palumbieri, 2010, 92).

We have already understood it all – as Palumbieri writes – not because we are more intelligent than others, but because God has given us a gift of inner spiritual knowledge, the gift of the Holy Spirit – spiritual intelligence. Simply speaking, this is the gift of reason to gain insight into our lives, and we should, above all, share with others the Paschal voice of life itself, addressing those who have not heard about it or have forgotten about it.

This address tells the deepest secret of God discovered in man humiliated on the Cross, who is seated at the right hand of the Father, to share life in Him throughout all eternity. Here, the author of the quoted article delivers a beautiful in its expression poetic version of this address (most probably by Paul Claudel, although it is not obvious) (Palumbieri, 2010, 93-95):

“You, who have been inspired by Grace,  
run, run to all the squares  
to reveal this great secret of God.  
Go to announce that death is gone,  
Go to announce that there is a meaning to every-  
thing,  
Go to announce that earth is abundance,  
Go to announce that blood is purification,  
Go to announce that weeping is relief,  
Go to announce that every tear is a star,  
Go to announce that wounds heal,  
Go to announce: per aspera ad astra,  
Go to announce: per Crucem ad Lucem.

You, who have been inspired by Grace,  
run from gate to gate  
to reveal this great secret of God.  
Go to announce that fear is defeated,  
Go to announce that death is dead,  
Go to announce that all this has already happen,  
Go to announce that the Crucified one has risen,  
Go to announce that there is a purpose for every-  
one,  
Go to announce that every man can follow it,  
Go to announce that the gate has been opened,  
Go to announce that the entry has been already  
paid for,  
Go to announce that this entry is the door to Eter-  
nity.

You, who have been inspired by Grace,  
run, run to the edges of the world  
to reveal this great secret of God.  
Go to announce that every cross is a throne,

Go to announce that every coffin is a cradle,  
Go to announce that suffering is redemption,  
Go to announce that there is vocation for every  
man,  
Go to announce that the poor one is in front,  
Go to announce that there is future to the world,  
Go to announce that the Cosmos is a temple,  
Go to announce that every child is smiling,  
Go to announce that everything is possible for  
man,  
Go to announce to those who are in despair,  
Go to announce to those who are tortured,  
Go to announce to those who are humiliated,  
Go to announce to those who suffer in whatever  
way,  
Go to announce to those who sacrifice themselves  
with a smile,  
Go to announce in every square,  
Go to announce from gate to gate,  
Go to announce in the backstreets of the town,  
Go to announce on the edges of the world,  
Go to announce towards the stars,  
Go to announce that joy has her face,  
precisely the one distorted by death,  
precisely the one transformed by Passover.  
Here and now, Go to announce  
Go to announce,  
Go to announce,  
Go to announce,  
Peace has come,  
as Passover has come!

The poem unambiguously expresses the positive aspect of existence and the positive aspect of suffering regardless of its form. There is, however, one reservation – it refers to a man of faith. For a non-believer who sentences himself to the definitive absence of meaning, suffering is “nonsense”. Yet, when this nonsense profoundly permeates history, it makes all history utter nonsense. Jesus did not come to bring suffering, but to give it meaning. Similarly, we, in order to suffer as humans, need to give it meaning. A mother is suffering to give life to her child. She knows why she is suffering and for whose sake. She is ready for everything. She is strong, since she knows the meaning of her suffering. Such a suffering is not life-taking, it is life-giving. Such suffering is experienced with sense in life.

Hence, it is of utmost importance especially today, when the culture of death is so predominant, to be able to raise the question of wisdom as the capability to experience suffering with meaning and to stop pretending in front of oneself and in front of others that *actio* and *ratio* will save the world from suffering and dying, poverty and death. One must realise that in the above *actio* there is still *passio*. One must never forget that human existence consists in suffering and that reason itself and knowledge itself will not help it, especially as far as suffering of children is concerned.

## REFERENCES

- Frankl, V. E. (1971), *Homo patiens*, trans. R. Czarnecki, J. Morawski, Warszawa: Instytut Wydawniczy PAX.
- Jan Paweł II (1984), *List apostolski Salvifici Dolores-o chrześcijańskim sensie ludzkiego cierpienia*, Rzym.
- Palumbieri, S. (2010), *Cierpienie i sens: między rozumem a wiarą*. In: J. Malski, I. Rutkowska (red.). *Miłość i cierpienie. Misterium Boga i nadzieja człowieka*. (65-95). Głogów: Wyd. Cisi Pracownicy Krzyża.
- Rynio, A. (2004), *Integralne wychowanie w myśli Jana Pawła II*, Lublin: RW KUL.
- Rynio, A. (2010), *Cierpienie jako czynnik wychowujący*. In: J. Malski, I. Rutkowska (red.). *Miłość i cierpienie. Misterium Boga i nadzieja człowieka*. (249-260). Głogów: Wyd. Cisi Pracownicy Krzyża.
- Rutkowska, I (2010), *List apostolski Salvifici Dolores jako chrześcijańska definicja cierpienia*, In: J. Malski, I. Rutkowska (red.). *Miłość i cierpienie. Misterium Boga i nadzieja człowieka*. (187-203). Głogów: Wyd. Cisi Pracownicy Krzyża.
- Zawadzka, M. (2010), *Cierpienia rodziców dziecka nieuleczalnie chorego*. In: J. Malski, I. Rutkowska (red.). *Miłość i cierpienie. Misterium Boga i nadzieja człowieka*. (273-284). Głogów: Wyd. Cisi Pracownicy Krzyża.



# EARLY INTERVENTION AS THE PROCESS OF SUPPORTING THE DEVELOPMENT OF A CHILD WITH DISABILITY AND PARENTS

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## ABSTRACT

One of the forms of assistance given to young children who are already disabled or are endangered with disability is providing them with classes on early support of development. These classes can be organised with the child and his parents at home or at institutions of special education or at any other place the child stays. The various possibilities of providing support to children's development in the home environment are more often emphasized, and this process is often carried out in the child's everyday place of development. In Poland, the beginnings of early intervention are connected with H. Olechnowicz and with her work in 1970s on preventing the effects of separating hospitalized babies from the mother, including the training camps she organized or other forms of psychological assistance for children with development disorders. Since the early 1980s, Early Support was provided through Child Development Centres set up in our country, mainly from the initiative of the parents and specialists concentrated in non-governmental organizations.

## KEYWORDS

*Child with a disability, child endangered with a disability, early assistance for development, raising a child with disability, early support of development*

## INTRODUCTION

One of the forms of assistance given to young children who are already disabled or are endangered with disability is providing them with classes of early support for development. These classes can be organised with the child and his parents at home or at institutions of special education or in any other place the child stays (Piszczek 2002). Various possibilities of providing support to children's development in the home environment are being more and more often emphasized, and this process is more often now carried out in the child's everyday place of development. Involving the parents and other family members into the process of the child's rehabilitation is necessary, since they are the child's natural partners in everyday life situations and after proper preparation, they can effectively support the development of their child (Twardowski 2004).

While assisting the family of the child with a disability, supporting the child's development is crucial for their using his or her abilities to the maximum. Providing simultaneous support to the parents and siblings cannot be ignored, however, as the family is a system of mutual interactions which determine the quality of its functioning (Sidor 2009). Providing the parents with help, one should also remember the role of social reinforcement. The broad network of social connections, the most personal being in the family to the parent-friendly institutions particularly in the local environment as well as various non-governmental organizations constitute the essential source of assisting the parent. This support concerns raising a child with developmental problems, but also includes organising the complex process of rehabilitation.

Currently in Poland, the family is the only coordinator for assisting the child's education, treatment and social rehabilitation. Without relevant support, the family will not be able to achieve its tasks and responsibilities (Plura 2011).

### I. POSSIBILITIES OF ASSISTING THE CHILD IN DEVELOPMENT AND HIS FAMILY IN THE PROCESS OF EARLY INTERVENTION

The term "early intervention" in the narrow meaning is defined as the organised system of multi-specialised care of young children showing serious disorders of development, carried out by the team of specialists. The main goal

of such care is increasing the development potential of a child, eliminating disorders and preventing the secondary results of developmental dysfunctions. D. A. Philips and J. P. Shonkoff propose an extended understanding of this concept. Early intervention is understood here as help connected with the diagnosis and therapy of disorders appearing among the youngest children, rather than disorders or developmental dysfunctions exclusively. In this perspective, the scope of early intervention includes action taken towards the baby with sleeping problems, children with eating disorders, or dyadic mother – child cases of post-natal depression appearing in the mother (Kaczmarek 1994, p.117).

In the report from the year 2005 concerning the early intervention drawn up by The European Agency for Development in Special Needs Education, experts included the agreed upon proposal of the European definition of early intervention which reads as follows: *“early intervention constitutes the set of benefits/services offered to very young children and their families at their request, in the determined period of the child’s life. It includes all action taken in response to the child’s special needs being aimed, however, at supporting his development, increasing his family’s competence as well as supporting the proper social functioning of the child and his family. This action should be held in the child’s natural environment, especially on the local level, as part of an interdisciplinary and family-orientated scheme carried out by the team of specialists”.*

In Poland, the beginnings of early intervention are connected with H. Olechnowicz and her work on preventing the effects of separating hospitalized babies from the mother as well as the camps she organized or other forms of psychological assistance for children with developmental disorders (Kaczmarek, Kmita 2004, 11). Over 27 years ago, the parents of the children with mental disability gathered by the Committee on Children with Special Needs at Friends Association for Children as well as other experts started to organise nationwide camps initially called “the school of mothers.” Based on the experience gained there, they created expectations referring to the needs of the child with development problems. These expectations became principles which are still in force and are still regarded as a model. The rules are as follows:

- the diagnosis must be made as early as possible,
- the diagnosis must be closely associated with therapy and supporting the family,

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<sup>1</sup> *Early Childhood Intervention. Analysis of the Situation in Europe. Summary Raport 2005.* European Agency for Development in Special Needs Education.

- if defining the diagnosis requires longer time, the rehabilitation and therapy must be based on manifestations,
- medical care, including motor rehabilitation, must be accompanied by psychological and pedagogical care as well as speech-therapy,
- diagnosis and planning the therapy require the cooperation of a team of specialists,
- both the child and the family should be the subject of rehabilitation (Kastory-Bronowska 2004).

From the early 1980s, centres of early assistance to the child's development started appearing in our country, mainly from the initiative of parents and specialists gathered at non-governmental organizations. Today, many centres function on the highest level. However, they are the initiatives of the people involved, often activists of non-governmental organizations, who take innovative actions and try to obtain specific subsidies and EU funds.

In Poland early intervention classes are organised for children from birth to the age of 6, 7 or 8 years, till they start school education<sup>2</sup>. Nowadays the basis for organising the classes of early assistance is an opinion on the need of such assistance, given by a public or non-public psychological and pedagogical counselling centre. In case of a disabled child attending the kindergarten (between the ages of 3 and 7 or 8) the basis for organising the special education classes is the statement about the need of special education and the opinion on the need of early assistance to the development (Serafin 2007).

The law regulation<sup>3</sup> on the educational system from 2001 enables forming teams of early assistance in child development. It results from the law regulation that the classes can be organised in the home environment (particularly before the child reaches the age of 3) and/or in the educational institutions the child attends, including kindergartens, schools or other special education centres. These classes should be conducted directly with the child and his family, the purpose of the classes being to stimulate the psychomotor and social development of the child (from birth to the age of 7). Depending on the child and the family's needs, the psychologist, speech therapist and other specialists should organize work individually with the child, in the group of 2-4 children or the child and children and the parents. However, the Directive of the Minis-

<sup>2</sup> The obligation to go to school can be postponed until the end of the school year, in the year of the child's 8th birthday. Cf. *Increasing the Effectiveness of Educating the School Children with Special Education Needs*. Materials for Teachers. Warsaw: MEN, 2010.

<sup>3</sup> Act of 7th September 1991 concerning the educational system (Journal of Laws from 2004 No. 256, item 2572 as amended) Art. 71 b act 2a.

ter of Education and Sport from 4th April 2004 set the number of guaranteed classes from 4 up to 8 hours per month<sup>4</sup>. This is still an insufficient number of hours, therefore parents, apart from these granted hours, additionally often benefit from the activity of other institutions such as those financed by the healthcare department (National Health Fund). They also benefit from the work of non-governmental organisations, which gain the funds for conducting an activity by obtaining EU funds or donations from private individuals.

It is hard to currently find one aid plan in Poland in the case of a family with a young child suffering from developmental problems. Aid activity is dispersed and conducted mainly thanks to the activity of people involved in the tasks connected with early intervention (Dońska-Olszko 2007). Building the aid scheme is hampered due to raising funds for the activity of institutions. Financial means are not guaranteed by these organizations and can be granted unsystematically. For example, contracts with the National Health Fund are granted only for annual activity, but further contracts are not guaranteed, however, and they should be once again applied for. There is a similar problem with subsidies from the local authorities and EU funds which are most often individual ones.

The problems of universality, early implementation, comprehensiveness and continuity of rehabilitation arise with reference to the entire group of the disabled. In Poland, rehabilitation is still conducted “occasionally” rather than comprehensively in case of many people (Urbańska 2010).

## 2. THE CHARACTERISTICS OF THE PROCESS OF EARLY ASSISTANCE IN THE CHILD'S DEVELOPMENT

Supporting the child's development according to I. Obuchowska (2003, s. 7) is an interdisciplinary and overall notion. It is the process of professional influence on children (to those being in the so-called developmental age) with the purpose of strengthening or arousing specific functions of the child's psychological and social development. Through the term “overall,” I. Obuchowska understands the multitude and diversity of influences taken as part of early assistance. It cannot be a single activity but a complex process, which leads to

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<sup>4</sup> Regulation of the Minister of Sports Education from 4th April 2004 Art. 4.1.

enhancing the significance of the interaction between the assisted and assisting persons. The terms “supporting” and “assisting” are used interchangeably and mean “being” with the other person and helping him to overcome the problems with solving all sorts of everyday life tasks. Supporting is understood as helping this kind of interpersonal interaction in which people take action in favour of others (Karwowska 2003).

The help to a young child requires knowledge about the mechanisms of the development and ways of supporting him as well as adapting the methods, forms and measures to the needs of the child and his dominating activity. One should not identify early assistance with the development of young children endangered by disability with any kind of special education (Piszczek, 2007, p. 154). The diagnosis should always indicate the direction and scope of an undertaken activity. If supporting the development of a young child with developmental problems is to be the main objective, then the diagnosis should aim at development. While making the diagnosis, it is important to determine the child’s inborn abilities and the potential of the child’s environment (cf. Obuchowska 2002, Piszczek 2007, p. 147).

B. Kaja (2002, p. 260) characterises developmental support in the following way:

- supporting development can be determined as a special kind of interaction between individuals;
- the influence exerted is a purely professional influence;
- it is a rational influence;
- offering values is an essential condition for assistance;
- the assistance has a subjective character;
- “in supporting the development, both the quality of life as well as the quality of the environment are essential”

The process of assistance in the child’s development is not exercising various functions. Every influence of the psychotherapist affects the functioning of the child including his personality. The classes should be closely connected with activities typical for children and their interests, and each activity should be connected with another (Piszczek 2007, p. 150). The therapy is not a set of exercises separated from the whole of educational action, which should be aimed at forming the appropriate relationships between the child and the world. They should help to form the child’s sense of self (Kościelska 1998).

It is essential while making consecutive attempts at therapy not to forget that other people play a vital role in the child’s development. Initially, the parents are the most important people, and over time are included extended

family members and peers, as well as other particularly important adults such as teachers, coaches, priests, etc. The biggest threat to the child's development derives from the poor relationships with the social environment, and the biggest hope for improvement is connected with improving these relationships (Kościelska 2007, p. 630). Only when the emotional contact needs are satisfied, the child can display a diverse activity, master new skills and abilities (Twardowski 1999, p. 596).

Taking action in favour of the child, the following factors should be the focus of attention for people assisting in the child's development (Obuchowska 2003, p.13):

- the child – parents bond (strengthening the bonds and basing them on sound principles are a task);
- the identity of the child (teaching the child self-acceptance is a task);
- the child's self-esteem (strengthening is a task);
- the child's empathy (developing is a task).

In the care and raising of a child with a developmental risk, the rules of conduct result from constant reflection, long-term searching, attempts of the medical staff, parents and psychotherapists (Dykcik 2001). The permanent and systematic work of the child and his family provide best results from the work of parents with a therapeutic team (Ślenzak 1979).

The methods of working with the child are an important area in ways to help. Not knowing how to work with the child, the parents feel lost among the various methods of therapy. They search for the person who is most appropriate for them. This very often happens by means of experiments as well as sacrifices. Wishing to do everything that is possible, the parents neglect other family members, for example, non-disabled siblings.

In the process of the child's rehabilitation, specialists themselves sometimes forget that their methods have secondary meaning as opposed to contact with the child. And it is the quality of the child-parents child-therapists contacts that is the basis for achieving success by the child. Putting the therapy methods as the focus of the rehabilitation process, we treat the child as the object of rehabilitation and not as its subject. One should also make the parents aware of the fact that their own child is the subject of the rehabilitation. It is important, therefore, to pay attention to the child's mood, how much effort he can put into the work and how active he is while applying various work methods. Consequently, when the child is exceptionally tired, it is essential to reduce the number of classes.

There is no one and only method of supporting children with disorders in psychomotor development. Each of them develops at his own pace, therefore, all methods should be individually selected to the child's needs as well as psychophysical abilities (Sidor 2006). From the point of view of psychology, the question about the effects of the applied method is important for developing the mother-child relationship. Good therapy is one which does not disturb this relationship, but on the contrary, helps to establish it (Kościelska 1998, p.132).

### 3. THE NEED FOR SOCIAL REINFORCEMENT IN THE CASE OF ASSISTING THE DEVELOPMENT OF THE CHILD WITH DEVELOPMENTAL PROBLEMS

In the situation of a child's developmental problems, parents need various kinds of support. The support which is provided for the parents of children with developmental problems by other people or groups of people can take the form of social reinforcement.

Social reinforcement includes all sorts of aid types, e.g. information, emotional, financial, educational, tutelary, therapeutic, service or legal. The main task of supporting is facilitating the supported in overcoming problems, removing suffering and making him stronger as well as increasing his self-reliance and improving his abilities to perform all sorts functions (Maciarz 2005, p. 109).

H. Sęk (1993), M. Błaszcyk, Ł. Przybylski (2010), L. Bakiera, Stelter Ż. (2010) present social reinforcement as social interaction which can be characterised by means of the following factors:

- it has the purpose of helping one or both participants to solve the problem, overcome difficulties, reorganize the disrupted relationship with surroundings in providing emotional support;
- in the course of such interaction, the exchange of emotions, information, instruments of action and material goods takes place;
- the agreement between the expected and acquired support is essential for the effectiveness of this public exchange;
- in its arrangement, it is possible to distinguish the supporting person and the one receiving support.

- the interaction and exchange are made when problems and difficulties arise.

Traditionally, four basic types of support are distinguished (Sęk 2001):

1. Emotional support – this is the most universal and expected type of support; it focuses, for example, on creating the feeling of membership, making oneself free of emotional stress; it consists of a positive attitude towards the supported person; it reveals concern about them and expresses empathy towards the disabled person.
2. Information support – this provides essential information for solving a problem or giving feedback about the effectivenesses of the applied forms of support; it consists in passing on objective knowledge of one's own experience, which can contribute to understanding the circumstances in which the disabled person finds themselves. It is also passing on knowledge about the legislations which govern the offices' work, including also aid institutions;
3. Instrument support – this includes giving help via indicating specific preventive measures. It includes forming effective behaviour as well as providing information hints; it is the ability to stimulate the development of the disabled by using art therapy or activation in the labour market.
4. Material support (financial) – this concerns passing on and organising the financial means and/or material goods which enable or facilitate overcoming difficulties.

A different kind of support is spiritual support consisting in applying in an emergency situation the category of the meaning of life or religious values (cf. Bakiera, Stelter 2010).

Based on the model of public support, M. Tomaszewska and A. Wolska (cf. Sęk 1993, Kirenko 2002) created a simplified structure of social support. They singled out the following four elements within:

- the family;
- the local community, including neighbours, friends, parish groups (prayer, charity);
- non-governmental organizations including associations and foundations, volunteers, self-help groups;
- state institutions
- National Disabled Persons Rehabilitation Fund (PFRON), National Health Fund (NFZ), Poviast Family Assistance Centre (PCPR), Social

Insurance Institution (ZUS) as well as educational centres, rehabilitation clinics, social welfare centres.

The most valuable social connections for the family are the ones which bond it with other people and informal groups. The properties of these connections are:

- mutual emotional commitment of the subjects;
- spontaneity and sincerity;
- mutual exchange of experiences;
- formally unrestricted scope and kind of contacts, interaction and types of support (Maciarz 2006).

Considering the issue of supporting the families of children with disability, the fundamental issue is the parents' needs, which differ in character, change with the child's age and are specific to every family. Some parents will particularly need emotional support, others – financial, still others, not being able to deal with raising a child with special needs, will need to be provided with information and advice about raising a child, making him more physically and emotionally independent, which includes his education (Sidor 2009, p. 141).

The classification of various kinds and forms socially supporting the families with disabled children, applying the type of support these families expect and which is essential for them as the criterion of the division, is provided by A. Maciarz (1993, 23; 2006). This classification comprehensively characterises the phenomenon of supporting the family with the disabled child. The variety of actions and forms of assistance are included here in the following four scopes: emotional assistance, care and education assistance, social-service assistance, and finally rehabilitation assistance.

While providing help, one should keep in mind the social role of the person who requests support. The person in a difficult situation wants to be treated as a regular member of society in spite of searching for other people's help (Kirenko 2002, p. 14, Kirenko 2004, Kotkowska- Szulzyk 2004, p.155). One should counteract the false image of the person supporting somebody as being better and in a more favourable position (Kirenko 2004, p. 16). The network of the family's social connections provides a sense of security and the possibility of receiving the appropriate kind of support for its members. It can, however, excessively take control of the supported person, and the feeling of dependence on the ones who provide the support can appear. As a consequence, the supporting person can impair the self-reliance and the initiative of the supported one, making him fully dependent and treating him not as a free individual (Maciarz 2006).

- If the social support is to bring positive results, one should (Kirenko 2002):
- understand the character of the social role one plays (e.g. mother, father, wife, husband, class tutor or employer);
  - accept the person requiring the support unconditionally;
  - know the characteristics of the person who needs help;
  - know the techniques to be able to identify the needs of others;
  - possess features which help to establish and sustain their relationship with the other person (being extrovert, empathic and expressing thoughts clearly);
  - organize the appropriate action and conditions for oneself as well as for other people and manage other people's work;
  - be a good mediator and negotiator while mediating between people with different points of view;
  - be able to use one's personal experience appropriately.

At welfare institutions as well as psychological and pedagogical clinics or other child therapy institutions, a subjective and fully-professional attitude should be applied. Sometimes professionals treat parents like customers, who should apply their recommendations without any questions, which puts an extra burden on the parents. They often have scarce knowledge about the specificity of the disabled child's development and additionally, they have to face their own emotional problems. While helping the child, one should always take into consideration how his family functions. Professionals should not criticize or assess the parents but support them in this exceptional and difficult role (Sidor 2009).

## 5. THE FORMS OF ASSISTANCE TO THE PARENTS RAISING THE CHILD WITH DEVELOPMENTAL PROBLEMS

If the child is endangered with a disability or already disabled, being the parent can turn out to be a particularly difficult task. The disappointed hopes of the parents, experiencing the child's suffering, the necessity to overcome many difficulties in providing him with treatment and proper rehabilitation constitute the source of stress for the parents, which in many situations lead to running out of strength and suffering from constant tiredness. Sometimes all of these factors lead to the "burnout" syndrome with the characteristic feature

of feeling an overall sense of failure in overcoming difficulties and a firm conviction that dealing with it is impossible (Maciarz 2009, p. 157-165).

Social support as an interpersonal interaction has two aspects: psychological and social. The former is particularly important for the parents who are exposed to all sorts of difficulties because of the problems in their children's development. Parents need emotional and motivating support while feeling exhausted or discouraged when they manage the process of the child's rehabilitation. They also need behavioral support in order to develop their therapeutic and educational abilities. The social aspect of the support is accomplished due to the social bonds created when one person stays with another (Maciarz 2009, p. 158).

The diverse actions and forms of assistance to the parents are included in the classification made by A. Maciarz (2006 p. 105-121) in the four scopes of:

- emotional assistance;
- care and educational assistance;
- social-service assistance;
- rehabilitation assistance;

In this classification, the author employs the type of support the parents expect and need as the criterion of division.

The first kind of assistance is emotional, which is particularly necessary for the parents of a very young child. There is no one and only system of supporting these families. Every problem requires a personal approach. For many parents, information and advice will be sufficient. Others may need further support, which includes dealing with their experiences (Kastory-Bronowska, Pakuła 2004). One should consider the emotional situation of every family with the disabled child individually. However, the moment the disabled child appears in the family, a major emotional crisis in his parents usually occurs (Suchcicka 2006, p. 29).

Having been informed that their child is disabled, parents often concentrate on their own experiences. They are not ready yet to plan the process of improving the child's condition. At this moment, when having difficulties in establishing a relationship with their child, they feel incompetent as parents. Therefore, all the support directed at them should focus on their emotional state, their attitude towards themselves as parents and their relationship to the very child (Sidor 2009). Emotional assistance given to the family can be realised by all the people the family stays in touch with, the social relationships as well as by people professionally taking care of the person with a disability in the family, for example psychologists, teachers, therapists, doctors and nurses.

It is important that these specialists and people from the closest environment be sensitive to the experiences and difficulties of their family members as well as be interested in helping them (Karwowska 2003, p. 21).

Meetings of parents bringing up children with a disability perform a therapeutic function. The parents can also invite professional therapists for the meetings. Such meetings can be held in the places of children's rehabilitation or at rehabilitation camps. Apart from therapeutic influences, parents can take part in individual and group psychotherapy. The main purpose is adapting parents to the new situation caused by the child's disability. The psychotherapy makes the parents aware of the significance of the positive emotional character of their contacts with their child (Twardowski 1999, Kastory-Bronowska, Pakuła 2004, p. 120-122). In some cases, simply taking part in psychotherapy can be the way to discover the abilities to make changes while raising the child (Kastory-Bronowska, Pakuła 2004).

Another form of supporting the parents is care and education assistance, which includes two kinds of social actions carried out by various subjects, being the following:

1. Educating parents aimed at giving them knowledge about the child, about caring for him, bringing him up and forming the proper educational attitudes towards them;
2. Helping the parents in taking care of the child.

Educating can be carried out either with groups of parents or individually. It is done by the teachers and psychologists employed at kindergartens, schools and rehabilitation centres (Maciarz 2006, 117).

A proven form of educating the parents, or more precisely forming the abilities which are essential for bringing up the disabled children, are rehabilitation camps.

- A. Maciarz (1993) mentions the following tasks of educating the parents:
- helping parents to get to know their child;
  - teaching parents how to deal with the child properly and how to give him the necessary help;
  - developing, and with some parents, raising an interest in bringing up the child appropriately;
  - backing up such views, attitudes and ways of the parents' conduct towards the child, which are valuable and right in terms of the child's proper development and professionally transforming conduct which can halt or disturb this development;

- providing parents with educational advice in case of difficulties or failures in raising the child, particularly by class tutors and teachers in kindergartens, play groups, or centres where the children spend their time.

In the area of assisting the parents in taking care of the child, it is crucial to motivate local groups to help these families. It is difficult for the family raising a disabled child to fulfil all duties associated with care and therapy in spite of specialist support (Kastory- Bronowska, Pakuła 2004, p.122).

Local institutions are required to have proper knowledge concerning the needs of the disabled and their families, as well as due governing of funds. Therefore, these institutions should have the following clear and defined task (Kościelska 2004, 11-21):

- gathering statistical data about the number of disabled people in their area;
- gathering data about these people's current needs in terms of tutelary, health, educational, financial and any other situation;
- keeping a register of medical, rehabilitation and social services received;
- being able to provide financial assistance and transport;
- offering help in forming self-help groups and voluntary services;
- mediating between the disabled person, his family and various aid institutions.

The parents of children can get social benefits in terms of social-service assistance. This is in many cases an essential support for the family. It can take all sorts of forms, depending on the needs of the family, their ability to accept the funds and spend them in a sensible way.

Social-service assistance includes various forms of financial and service help, is realised by national entities (relevant departments and their institutions), social institutions (foundations, associations, self-help groups) and private individuals (Maciarz 2006, p. 117). In spite of expanding the network of social support providers, the demands of families for this form of support is not sufficient.

The last form of supporting parents characterised by A. Maciarz is rehabilitation assistance, which includes counselling and educational support. Counselling support is helping the family in organising appropriate treatment and improving the child's abilities as well as providing him with the necessary rehabilitation assistance, typically organised for rehabilitation purposes (Maciarz 2006, p. 118). Parents are not usually familiar with the educational system for children with disability as well as with the system of medical care. They do not know what institutions and in what way they can help them or

how to find them. They do not often know what rights they and the child are entitled to and what formalities to go through in order to provide appropriate rehabilitation for the child (Trwardowski 1999, p. 578).

Help in the range of counselling support should be provided by doctors, teachers, pedagogues and psychologists employed at various institutions connected with the child's rehabilitation (Maciarz 2006, p. 118). Parents can get information among other things in such institutions as<sup>5</sup>:

- psychological and educational clinics - here examinations of the children are conducted, specialists recommend appropriate forms of therapy, and certificates of completing various forms of education are given.
- PCPR (Poviat Centre of Family Assistance) – in every poviat (administrative unit) there is at least one such centre, with people whose task is to support families bringing up children with disabilities.

Another source of information for parents are non-governmental organizations centres. Parents interested in the current possibilities of getting grants for rehabilitation equipment and the amount of grants for rehabilitation camps or educational assistance can get information on how to apply and try to get financial help. In their tax declaration, they use information about tax relief, which currently applies to the disabled and their families.

The ideal solution to organising the child's rehabilitation would be all sorts of local rehabilitation centres, close to the family and the child's place of residence, bringing help personally to the child's home. Children, especially the very young and those with a serious developmental deficiency, should not be exposed to the stress of travelling to distant institutions. These trips are also very hard on parents. In addition, the care of one doctor who coordinates recommendations of various specialists, or helps with the choice of the appropriate method of rehabilitation for the child is the ideal. In this regard, parents need a kind of guide, somebody who would give them specific information about the advantages and restrictions of individual methods of working with children (Kościelska 1998, p. 7).

As part of rehabilitation assistance, A. Maciarz (2006, p. 118) distinguishes educational support, which includes parents in the task of improving the child's abilities. It often takes the form of parents' participation in the child's classes conducted by a given specialist, e.g. physiotherapist or speech therapist.

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<sup>5</sup> *Poradnik dla rodziców dzieci niepełnosprawnych*, red. J. Lach, J. Bogucka, Fliorek A., A. Gałęski., A. Górka, I. Grodzicka, A. Iwanek, R. Kłoda, Warszawa 2001, Ministerstwo Pracy i Polityki Społecznej,

Summing up, early intervention is a chance for the children to overcome developmental difficulties and achieve the greatest possible autonomy. On the other hand, for their parents it is a form of support in a difficult situation.

For the children with development problems, lack of early development assistance limits and sometimes blocks their development potential. Not exploiting the potential of the person with a disability early on results in limiting the person's access to education and living in a normal society. Early intervention also creates an opportunity for developing many of the child's abilities, including within the sphere of social functioning, which gives him or her the ability to create satisfying relationships with others. Negative consequences of the lack of early development assistance refer above all to the very person with development difficulties, but also to the family and the whole of society, where not knowing the disabled or recognising them as people with less autonomy, keeps a distance and gives them a negative image.

The action undertaken in the sphere of early assistance to the child's development should be treated as investment in the future of the child but should also involve social investment by meeting the demands of the ideas of integration, inclusion and standardization. This activity in early assistance for the child's development also includes counteracting the phenomenon of social exclusion and diminishing certain groups of people.

Establishing the system of action in the range of early assistance to the child's development which would be friendly for the parent is still a challenge. It is extremely hard for parents to manage the process of early assistance for the child's development. They must cope with a difficult psychosocial situation, raise the child and at the same time effectively manage the process of rehabilitation.

## REFERENCES

- Bakiera, L., Stelter, Ż. (2010). *Wspomaganie rozwoju osób niepełnosprawnych intelektualnie*. In: M. Brzezińska, R. Kaczan, K. Smoczyńska (red.). *Diagnoza potrzeb i modele pomocy dla osób z ograniczeniami sprawności*. (143- 162). Warszawa: Wydawnictwo Naukowe Scholar.
- Błaszczk, M., Przybylski, Ł. (2010). *Rozszerzony model wsparcia społecznego*. In: M. Brzezińska, R. Kaczan, K. Smoczyńska (red.). *Diagnoza potrzeb i modele pomocy dla osób z ograniczeniami sprawności*. (96-112). Warszawa: Wydawnictwo Naukowe Scholar.

- Dońska-Olszko, M. (2007). *Tendencje dotyczące wczesnej interwencji wobec dzieci z zaburzeniami rozwojowymi oraz jego rodziny w krajach UE*. In: G. Kwaśniewska. (red.). *Interdyscyplinarność procesu wczesnej interwencji wobec dziecka i jego rodziny*. (120- 136). Lublin: Wydawnictwo UMCS.
- Dykcik, W. (2001), *Formy postępowania terapeutyczno- wychowawczego*. In: W. Dykcik (red.). *Pedagogika Specjalna*. (81-88). Poznań: Wydawnictwo Naukowe UAM.
- Early Childhood Intervention* (2005). Analysis of situation in Europe. Summary Raport. European Agency for Development in Special Needs Education.
- Kaczmarek, T. (1994). *Wczesna interwencja*. In: K. Bożkowska (red.). *Encyklopedia zdrowia dziecka*. Warszawa: PZWL.
- Kaczmarek, T. Kmita, G. (2004). *Wprowadzenie – od redakcji*. In: G. Kmita, T. Kaczmarek (red.). *Wczesna interwencja – miejsce psychologa w opiece nad małym dzieckiem i jego rodziną* (11- 13). Warszawa: Wydawnictwo Emu.
- Kaja, B. (2002). *Wspomaganie rozwoju – nauka czy tylko próba interdyscyplinarnego uporządkowania problemów?* In: B. Kaja (red.). *Wspomaganie rozwoju. Psychostymulacja i psychokorekcja* (Tom IV. 260). Bydgoszcz: Wydawnictwo Akademii Bydgoskiej.
- Karwowska, M. (2003). *Wspieranie rodziny dziecka niepełnosprawnego umysłowo*. Kraków: Impuls.
- Kastory-Bronowska, M., Pakula, Z. (2004). *Model opieki nad dziećmi w wieku od 0 do 7 lat z zaburzeniami rozwoju psychoruchowego w Ośrodku Wczesnej Interwencji*. In: G. Kmita, T. Kaczmarek (red.). *Wczesna interwencja miejsce psychologa w opiece nad małym dzieckiem i jego rodziną*. (111-124). Warszawa: Wydawnictwo Emu.
- Kirenko, J. (2002). *Wsparcie społeczne*. Ryki: Wyższa Szkoła Umiejętności pedagogicznych i Zarządzania.
- Kirenko, J. (2004). *Dylematy wsparcia społecznego osób z niepełnosprawnością*. In: Z. Pałak, Z. Bartkowicz (red.). *Wsparcie społeczne w rehabilitacji i resocjalizacji*. (11-17). Lublin: Wydawnictwo Uniwersytetu Marii Curie-Skłodowskiej.
- Kotkowska-Szulzyk, A. (2004). *Wspieranie osób niepełnosprawnych w procesie rehabilitacji*. In: Z. Pałak, Z. Bartkowicz (red.). *Wsparcie społeczne w rehabilitacji i resocjalizacji*. (153-161). Lublin: Wydawnictwo Uniwersytetu Marii Curie-Skłodowskiej.
- Kościelska, M. (1998). *Trudne macierzyństwo*, Warszawa Wydawnictwa Szkolne i Pedagogiczne.
- Kościelska, M. (1998). *Rodziny dzieci niepełnosprawnych*. Warszawa: Centrum Metodyczne Pomocy Psychologicznej - Pedagogicznej Ministerstwa Edukacji Narodowej.
- Kościelska, M. (2004). *Jak poprawić sytuację osób niepełnosprawnych i ich rodzin – w różnych okresach życia? głos psychologa*. In: M. Kościelska, B. Aouila (red.). *Człowiek niepełnosprawny rodzina i praca*. (11-21). Bydgoszcz: Wydawnictwo Akademii Bydgoskiej im. K. Wielkiego.
- Kościelska, M. (2007). *Psychologia kliniczna dziecka*. In: J. Strelau, (red.). *Psychologia*. (Tom 3, 623-648). Gdańsk: Gdańskie Wydawnictwo Psychologiczne.
- Maciarz, A. (1993). *Wspomaganie rodziny w wypełnianiu podmiotowej roli w wychowaniu i rehabilitacji dzieci*. In: R. Kostecki, A. Maciarz (red.). *Podmiotowa rola rodziców w rehabilitacji dzieci niepełnosprawnych* (23), Zielona Góra.

- Maciarz, A. (2005). *Mały leksykon pedagoga specjalnego*. Kraków: Oficyna Wydawnicza Impuls.
- Maciarz, A. (2006). *Prozdrowotne i rehabilitacyjne znaczenie więzi emocjonalnych i wsparcia społecznego rodziny z dzieckiem niepełnosprawnym*. In: Z. Janiszewska-Nieścioruk, A. Maciarz (red.). *Współczesne problemy osób z niepełnosprawnością intelektualną*. (105-112). Kraków: Oficyna Wydawnicza Impuls.
- Maciarz, A. (2009). *Trudne dzieciństwo i rodzicielstwo*, Warszawa: Wydawnictwo Akademickie ŻAK
- Materiały dla nauczycieli: *Podniesienie efektywności kształcenia uczniów ze specjalnymi potrzebami edukacyjnymi*. (2010). Warszawa: MEN.
- Obuchowska, I. (2003), Wokół „wspomagania rozwoju” – poszukiwanie terminologicznej jasności. *Rewalidacja*, 2 (14), 4-13.
- Obuchowska, I. (2002). *Osoby niepełnosprawne: diagnoza dla rozwoju*. In: D. Lotz, K. Went, W. Zeidler (red.). *Diagnoza dla osób niepełnosprawnych* (40-45). Szczecin: Wydawnictwo Uniwersytetu Szczecińskiego.
- Piszczyk, M. (2002). Wczesne wspomaganie rozwoju, *Rewalidacja*, 1(11), 5-11.
- Piszczyk, M. (2007). *Diagnoza i wspomaganie rozwoju dziecka. Wybrane zagadnienia*. Warszawa: Centrum Metodyczne Pomocy Psychologiczno-Pedagogicznej.
- Plura, M. (2011). *Wyzwania systemu wsparcia rodziny dziecka niepełnosprawnego, Dziecko z niepełnosprawnością*. Ocena stanu aktualnego i perspektywy stworzenia zintegrowanego systemu pomocy, medycznej, edukacyjnej i socjalnej. Materiały konferencyjne. Sala Kolumnowa Sejmu RP. Warszawa 29 marca 2011.
- Poradnik dla rodziców dzieci niepełnosprawnych* (2001), (red.). J. Lach, J. Bogucka, A. Fliorek, A. Gałęski., A. Górka, I. Grodzicka, A. Iwanek, R. Kłoda, Warszawa: Ministerstwo Pracy i Polityki Społecznej.
- Serafin, T. (2007), *Wczesne wspomaganie rozwoju dziecka w systemie współpracy resortowej i samorządowej*. In: G. Kwaśniewska (red.). *Interdyscyplinarność procesu wczesnej interwencji wobec dziecka i jego rodziny*. (94-106). Lublin: Wydawnictwo UMCS.
- Sęk, H. (1993). *Wybrane zagadnienia psychoprofilaktyki*. In: H. Sęk, (red.). *Społeczna psychologia kliniczna*. (472-501). Warszawa: Wydawnictwo Naukowe PWN.
- Sęk, H. (2001). *O wieloznacznych funkcjach wsparcia społecznego*. In: H. Sęk, L. Cierpiałowska (red.). *Psychologia kliniczna i psychologia zdrowia – wybrane zagadnienia*. (13-32). Poznań: Wydawnictwo Fundacji Humaniora.
- Sidor, B. (2006). *Dzieciństwo w sytuacji niepełnosprawności*. In: J. Stala, E. Osewska (red.). *Rodzina – bezcenny dar i zadanie*. (684-701). Radom: Polwen: Polskie Wydawnictwo Encyklopedyczne.
- Sidor, B. (2009). *Wsparcie i systemowa pomoc rodzicom dzieci z niepełnosprawnością umysłową*. In: H. Marzec, Cz. Wiśniewski (red.). *Rodzina na początku III Tysiąclecia – obraz przeszłości i teraźniejszości*. Tom II (139-152). Piotrków Trybunalski: Naukowe Wydawnictwo Piotrkowskie.
- Suchcicka, E. (2006). *Edukacja według rodziców*, „Bardziej kochani” (38), 2, s. 29.
- Ślenzak, J. (1979). *Znaczenie postaw rodziców w procesie usprawniania dzieci z zaburzeniami rozwoju psychoruchowego*. Warszawa–Wrocław: Ossolineum.

- Tomaszewska, M., Wolska, A. (2010). *Pomoc profesjonalna dla osób z rzadko występującymi i sprzężonymi ograniczeniami sprawności*. In: A. Brzezińska, R. Kaczan, K. Smoczyńska (red.). *Sytuacja i możliwości pomocy dla osób z rzadkimi i sprzężonymi ograniczeniami sprawności* (143-161). Warszawa: Wydawnictwo Naukowe Scholar.
- Twardowski, A. (1999). *Pomoc rodzinom dzieci niepełnosprawnych*. In: I. Obuchowska (red.). *Dziecko niepełnosprawne w rodzinie*. (565-599). Warszawa: Wydawnictwa Szkolne i Pedagogiczne.
- Twardowski, A. (2004). *Wspomaganie rozwoju dzieci niepełnosprawnych w środowisku rodzinnym*. In: M. Kościelska, B. Aouila (red.). *Człowiek niepełnosprawny rodzina i praca*. (36-44). Bydgoszcz: Wydawnictwo Akademii Bydgoskiej im. K. Wielkiego.
- Urbańska, J. (2010). *Zasady rehabilitacji wobec potrzeb osób z rzadkimi i sprzężonymi ograniczeniami sprawności*. In: A. Brzezińska, R. Kaczan, K. Smoczyńska (red.). *Sytuacja i możliwości pomocy dla osób z rzadkimi i sprzężonymi ograniczeniami sprawności*. (120-133). Warszawa: Wydawnictwo Naukowe Scholar.



# CUED SPEECH – A TOOL TO ENHANCE DEVELOPMENT, EDUCATION AND FULL FAMILY LIFE

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## ABSTRACT

Cued Speech is a visual communication system which employs handshapes and hand locations to supplement the visual manifestation of normal speech, making spoken language visually clear for deaf or hard of hearing persons. It should be perceived as a tool of both enhancing the hearing impaired persons' cognitive skills and language development and a powerful source of support in everyday family life. The use of Cued Speech in foreign language instruction for deaf and hard of hearing students at John Paul II Catholic University of Lublin continues to grow with innovative work by the authors of this article and University staff. To support the English access within this integrated skills teaching approach more and more deaf and hard of hearing students are using Cued Speech with adapted teaching materials as part of their foreign language learning. Thus, the aim of this paper is to present the potential of Cued Speech complemented instruction for facilitating foreign language acquisition in deaf and hard of hearing students.

## KEYWORDS

*Hard of hearing, deaf, education, family, Cued Speech, foreign language instruction, language skills*

Deaf people still do not receive education facilitating their personal development to the utmost possible level and securing their future working career. The intellectual potential of deaf people is wasted by the low number of integrative schools fully prepared to educate deaf children,

teachers' stereotypical conviction about deaf students' low cognitive potential and parents' low expectations for their deaf children's educational progress.

Why is it the case that young deaf students do not have chances to fulfil their intellectual potential and get education matching their interests and skills? This paper aims at presenting a real chance for a radical change in deaf students' education. This chance is to use Cued Speech as a tool of the deaf children's language development. We do not need a lot of money to use it – expensive technical tools are not necessary. Good preparation and engagement of speech therapists, teachers and parents is the only precondition of success. You can learn the basics of Cued Speech in a 10-day course and become a fluent user of the system after about a year of using it in everyday communication.

Cued Speech is a visual communication system which employs hand-shapes and hand locations to supplement the visual manifestation of normal speech making spoken language visually clear on the levels of phonemes – the smallest meaningful units in the sound system of a language, morphemes – the combination of phonemes into meaningful elements, syntax – the arrangement of words in sentences, semantics – conveying the relationships between linguistic forms and meaning, duration, stress and, if needed, intonation. The system can also help to facilitate the development of the pragmatic uses of language as well as the use of different registers for a variety of communicative circumstances and interlocutors.

The aim of this paper is to show the results of a study examining the status of Cued Speech among Polish users and the ways in which this method is used as a tool enhancing language development and family relationships. The method of data gathering used here was to get written reports from the parents who have a deaf child and from deaf individuals using Cued Speech. The reports were submitted by five parents and two adult deaf individuals. The deaf children were of a school age (6 – 13 years old) and the deaf adults were 24 and 26 years old. All of them have severe language impairment (90 – 120 dB). All the parents were hearing persons. Deaf children use Cued Speech both at home and at school. Deaf adults were exposed to Cued Speech at primary school in the nineties, one of them used Cued Speech for family communication too. They both used transliteration service during their university education. The results show that all the Cued Speech users perceive this method as a milestone in their language and social development.

## I. THE SITUATION OF YOUNG DEAF CHILDREN

The idea of early intervention has consolidated its position among Polish professionals, also as far as deaf children are concerned. Nowadays a screening hearing test is administered to all Polish newborns, straight at the hospital wards. If a child is considered to be at risk of some hearing problems, early therapy is offered to the family.

Unfortunately, not every family makes a conscious effort of using it (far distances to the therapy centres located only in bigger towns, low understanding of the necessity of early intervention in the case of hearing problems). The quality of the support offered, especially lack of co-operation between professionals and parents still poses a serious problem.

It is common practice to minimise the parents' worries about hearing impairment of their children. As a result a full diagnosis is done relatively late. One of the mothers (I.B.) writes: *When our son Paweł was born in 1997 it early appeared he would have some health problems and we were advised to go for regular checkups. And we did. We did first audiology test at the age of 6 weeks and next after 4 months – and hearing problems were excluded. At the age of 2 Paweł was a very well-socialised and happy child, but did not speak a word. I twice sought for speech diagnosis' advice, but I was calmed down by the specialists' remarks – 'he still has time to begin talking, boys usually do it later than girls'. When he was 3 I was really much worried at the total lack of his speech development and urged my paediatrician to send Paweł to some specialised examination. BERA test was administered to Paweł and the results were interpreted as characteristic for normal hearing. On the basis of this we started speech therapy that lasted for one and a half year. Two speech therapists, a psychologist and all our family was engaged in supporting Paweł's speech development and the results were not encouraging – 120 words used. At this time I was more and more worried, communication barrier was becoming bigger, Paweł started being nervous and aggressive. I even considered using sign language, but the idea was rejected by specialists – 'Paweł is a hearing child, it may hinder his speech development' – they told me. I was not encouraged to undertake new tests – they are administered in anaesthetic and it might cause a health problem for a small sensitive child. I was advised to adapt constructively to the whole situation. Later on, when the child was 5 years old, his mother decided to do the objective hearing tests once again. The results are unequivocal: a severe hearing impairment was diagnosed. A second mother (K.K.) writes: I remember this time as a period of humiliating fight for a proper diagnosis. I no-*

*ticed that my 6-month-old son had stopped to react to any kind of sounds. However, paediatricians and audiologists, without any proper examination, told me 'not to be a hysteric mother' and 'wait, till the child is mature enough for examination'. Paweł was 2 years old when I succeeded in getting a proper examination.* It is not uncommon that stories like these happen and still some of the children are diagnosed as deaf or hard of hearing only after entering school at the age of 6.

Another problem is that parents are refused full, objective and professional information about different ways of therapeutic treatment of their child deafness. Professionals are usually strong believers in one way of therapeutic conduct and reluctant to propose some other methods, even if they might be more suitable for a particular child. It results in a situation that depending on a centre where parents are seeking help, they are offered either sign language programmes (mainly at the centres belonging to Polish Deaf Association) or oral therapy (mainly at the centres governed by Ministry of Education). Still too few specialists who know Cued Speech work in these centres and are ready to be advocates for choosing this method of therapy.

## 2. THEORETICAL BASICS FOR CUED SPEECH

Not until yesterday many specialists thought that the deaf children's educational abilities are widely restricted and the reason for it is their lack of direct access to material environment. That is why they concentrated mainly on early diagnosis of hearing impairment and advised medical ways of improving the work of a hearing apparatus by using hearing aids and medical rehabilitation. As it appeared, the effectiveness of these methods was limited – problems of severe or profound pre-lingual hearing loss cannot be solved solely by the use of hearing aids or cochlear implants.

Today it is a well-known fact that it is not a lack of direct access to sounds, but restricted access to cultural environment, which is the child's natural life and developmental environment, that is responsible for hindering the deaf child's intellectual development. We seem to understand more and more clearly that a man gets to know reality in a specifically human way not thanks to his senses, but mainly thanks to his abilities of logical and symbolical capturing of his own experience and interpersonal exchange of psychical content of his mind – shortly speaking – man gets to know reality thanks to his ability of

language-based communication with other people. This ability enables a man to exist and develop and in a typically human way, rooted in his culture, able to create and understand abstract ideas and transcendental thoughts.

The condition of a comprehensive development of a deaf person is for them to reach the ability of using the language. This thesis is commonly recognised as an essential one, but it is not so with understanding its implications. Those speech therapists who identify language signs with speech sounds and try to teach deaf children to speak with the use of methods based on hearing education, using child's remaining hearing abilities, make a serious mistake. Sounds are only like 'outfit' which we recognise from a certain distance. In order to know language, it is not enough to hear the voice – you have to have an unrestricted access to all the elements that participate in coding the meaning of words. As R.O. Cornett said: *It is not a word, it is language which is a real problem of deaf people.*

Inner structure of words (language signs) and their groups is complicated, but on the other hand a very precise and coherent one on several levels: phonological, morphological, syntactical and lexico-syntactical and phraseological. It is based on the structure of language activities, which engage all man's sensory and cognitive functions. Physical form of the signs is accessible for us in a poli-sensory way (motor, kinaesthetic, tactile, audio and visual). The main feature of physical form of language signs is their stability and unequivocality of their prime features and richness of secondary features. The understanding of a word stems from a net of precisely defined relationships of the words with a man's individual experience, the history of his nation and humanity in general as the cultural heritage is preserved in language of a given community. The basics of language acquisition is a narrow integration of sensory and cognitive activities which guarantees both the quickness of perception processes and precise self-control of speaking.

The mystery of easy recognition of language signs and possibility of self-control is rooted in a small, precisely defined number of elements of speech – phonemes. They do not convey any kind of meaning themselves. The number of them is so small that each person is able to learn all of them easily, but on the other hand they enable us to create an infinite number of morphemes and words, elements that convey meaning. Several simple dozens of perceptive and executive patterns enable us to code all our knowledge about the world and ourselves in it. The whole trick is to perceive and produce them in a possibly most automatic way. The amazing speed of our language activities is possible thanks to the economy and unequivocality of phonological system of language.

Not a less important mystery of language economy is rooted in the speech's rhythmic and melodic organisation, based on a syllable as the smallest element having all the features that enable us to differentiate the subject's speech flow and recognise the features of the receptive speech. Syllables contain the key to language code. The differences among them (distinctive and delimitative features) enable us to specify and recognise these meaningful elements. Syllabic organisation of a language is possible thanks to the existence of two types of phonemics patterns: vowels and consonants. Prosody of language is based on vowels, while consonants are responsible for the syllables' recognition. Unhindered perception and production of both these types of phonemes enables the child to work out an inner language and to have a full access to native language used by the community around him. Inner language forms the basis for all language activities: understanding, speaking, reading and writing. Sound languages, so called vowel-consonant languages may be fully acquired only after reaching a fluent ability of fast recognition of syllables in a stream of speech.

Hearing impairment does not diminish the child's language abilities. However, severe receptive neural-sensoric hearing disability forms a blockage to the key according to which meanings of words are created. A deaf child using a hearing aid or cochlear implant hears the voice, but is not able to quickly differentiate the syllables. That is why he is not able to learn the words' pattern. Words appear to him as very similar and difficult to differentiate. A deaf child is not able to self-control his speech and it is difficult for him to create a rich inner language. This deficit should be recognised as a real reason of educational difficulties of deaf children, who have problems in understanding, speaking, reading and writing.

What is really necessary for deaf children is to propose to them an alternative way of accessing syllables. This way is to use Cued Speech. This mode of communication makes it possible for deaf children to get to know the syllabic nature of a language in such a precise way as to enable them both to understand the received speech and to self-control their own speech.

### 3. CUED SPEECH – METHOD AND ITS RESULTS

Cued Speech, the method created in 1964 at Gallaudet University by R.O. Cornett is based on its creator's presumption that if the pictures of the pho-

nemes will look differently on the lips, as it is with the sounds, which are perceived as different by our ears, a deaf child will be able to learn language easily with the help of his visual perception. In order to make the phonemes visible he proposed a set of several hand movements which were to visualise what cannot be perceived as different aurally.

Thousands of deaf children all over the world have benefited from the use of Cued Speech (Cornett 1967, 1977, 1990; Nicholls . 1979; Nicholls, Ling 1982; Kipila B.1985, Kipila E. L., Williams-Scott B. 1988, Berendt, Krupnik-Goldman, Rupp 1990; Peterson 1991, Nicholls, Ling 1982, Hage C., Alegria J., Prier O. 1990, Hage C. 1994). In 1984 the method, named as *fonogesty* by a creator of Polish version of it, Kazimiera Krakowaik, started to be used in Poland with a first deaf child, Lukasz. In the years 1987-1995 about sixty pupils took part in an experimental program of using Polish Cued Speech in school didactics in two centres in Lublin and in Radom (Krakowiak 1995). The choice of this method appeared to be particularly accurate and the children benefited from it in many ways. The detailed results are described in many publications, here only the most important ones are presented:

- The level of children's visual concentration on the speaker's lips was significantly higher
- The children mastered the ability of 'verbal hearing' and used their hearing aids or cochlear implants to the utmost
- A higher level of communicative activity and language creativity was observed
- The children got to know a whole language phonemic system (phonemes and rules of using them)
- Their language development was similar to hearing children: typical 'three-year-olds' 'lexical explosion' appeared after three years of using Cued Speech
- After two years of using Cued Speech children were able to built first sentences – ability typical for two-year-olds.
- Development of word formation abilities and morphological consciousness was relevant to norms for hearing children
- Children were well prepared for learning to read and writing with analytic and syntactic methods used in Polish schools
- Lip-reading abilities were better than normal
- Speech development was based on phonemic structure of words – less abnormalities occurred

- Better understanding of synonyms, homonyms, phrasal expressions, language jokes, metaphors, comparisons and poetic language
- Children were able to perceive word and sentence accent, intonation and rhythm.

#### 4. CONTEMPORARY STATUS OF CUED SPEECH IN POLAND

Polish version of Cued Speech has been known in Poland for about quarter of a century – a Polish version of Cued Speech was worked out and scientifically described by Kazimiera Krakowiak in 1984 (Krakowiak 1995, Krakowiak, Sękowska 1996). Thanks to her extensive linguistic knowledge and personal motivation – she has done it for her two deaf sons – she successfully managed to elaborate a system of gestures that efficiently support the visual perception of the sound speech of Polish. The method has been known in Poland by the name *fonogesty* and its effectiveness was checked in two centres for deaf education, where in the period of 1987 – 1994 sixty deaf students took part in a pedagogical experiment, being educated with the use of Cued Speech. The results were encouraging: Cued Speech was considered to improve lip-reading and listening abilities of deaf pupils, to promote their communication activities, deepen knowledge of difficult Polish grammar system and enhance reading and writing skills (Krakowiak 1995). Polish Cued Speech is nowadays regularly taught as a university subject for pedagogues of the deaf and speech therapists at several Polish universities and more and more practitioners start using it in their daily practice.

In 1990' Polish Cued Speech was widely used in a School for Deaf and Hard of Hearing in Kalisz. Some research was also done there and the results are even more encouraging (Krakowiak, Leszka 2000). When compared with signing children and orally-educated children, the cuers who had been using Cued Speech for three years or more, presented much better ability of sentence lip-reading (Figure 1) and ability to perceive and understand new words (Figure 2). Especially the latter results prove directly that only cuers mastered the ability to get to know new words, which is a basis for learning in general. Cued Speech does not enslave its users: deaf children after some years of using it became able to lip-read without them (figure 3).

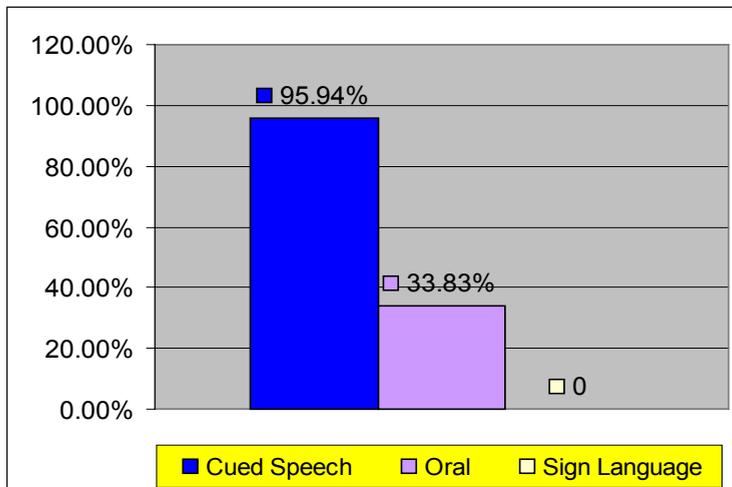


Figure 1. Lipreading of sentences by 3 groups of children educated with the use of specific communicative methods: Cued Speech, oral methods, sign language. (Source: Krakowiak, J. Leszka (2000))

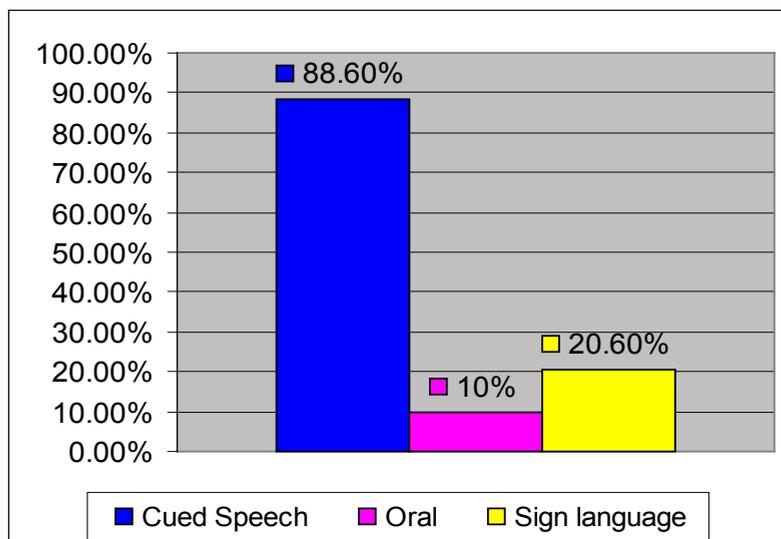


Figure 2. Lipreading of artificial words by 3 groups of children educated with the use of specific communicative methods: Cued Speech, oral methods, sign language. (Source: K. Krakowiak, J. Leszka (2000))

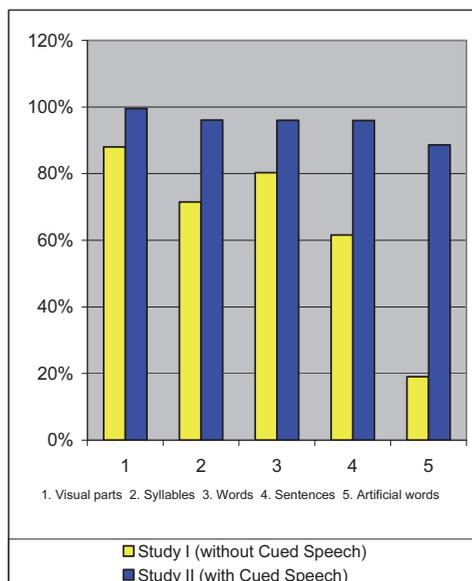


Figure 3. Test of visual perception of speech signals – Cued Speech students vs non-Cued Speech students

These results cannot be regarded as any kind of evidence against sign languages which must be treated with reverence as a result of intellectual creation of many generations of deaf people and a useful communication tool. In deaf children's education it plays the role of a first language for these of the deaf children who were born in deaf families and a second language for these hearing parents who chose it as a tool of communication with their deaf child. It does not however change the fact that mastery in sign language does not help a deaf child to master using the native language of his local community, nation and state.

## 5. HOW DOES CS CHANGE CHILDREN'S FAMILY RELATIONSHIP

Cued Speech is not recognised as a fully-privileged method of speech therapy and it is only after the families meet a specialist who knows this method and uses it, that they may enjoy the benefits of it. Each of the participants of our study perceived their contacts with the Cued Speech and professionals using it as a very positive experience.

First of all it gave the parents a feeling they are at last on the right way and can do something very practical for the child. One of the mothers, M.N. writes: *The diagnosis has been done when Alicja was 3. I think I was very lucky, because straightaway after the hearing impairment was diagnosed, a friend of mine, who studied speech therapy at this time, told me about Cued Speech and put me in touch with these people. They looked after me and my child with great care and dedication. Our weekly meetings taught me what deafness means and how I can support language development of my child. I felt secure and motivated to choose Cued Speech as the best means of communication with my child. I started learning it being sure it is the best thing for my child and I was happy I could do something to help my child make up for the lost time.*

Next advantage of Cued Speech is that the results are coming relatively quickly and the improvement at parent-child communication is visible. I.B. says: *I learnt Cued Speech quicker than I could learn the basis of sign language (I tried it earlier). I knew that Paweł's siblings and his father will be able to communicate with him in Polish. I was happy that being a mother of two small kids I did not have to spend hours a day on doing different exercises, as our oral method therapist told us to do earlier. Paweł only during the first month of using Cued Speech was able to recognise everyday cued language, like 'we will go to the lake', 'let's go shopping now', 'I do not want it'. During the second month our 6-year-old boy discovered that the nouns differ in flexion! After six months Paweł started using Cued Speech systematically, was playing with words, using both left and right hand as doing it, correcting his brother and aunts, even using Cued Speech while being asleep – and learning, learning the language all the time.*

What is probably most important, parents feel they are able to establish with their deaf child a pattern of communication they were not able to have earlier, while using oral methods or sign language. Parent – child communication starts to be natural and the children feel free not only to answer the parents' questions, but also to ask, refuse, express verbally their anger, sadness or frustration (I.B.). One of the mothers summarises it as follows: *I felt like my daughter was coming back to me emotionally* (M.N.). Thanks to the whole family engagement in participation in the courses and learning the Cued Speech system, deaf children are able to communicate also with some other members of the family: siblings (J.K., I.B.), cousins and aunts (I.B.).

Adult cuers' social abilities and personal strengths are for families with small deaf child an encouraging experience: *'Meeting Grażyna [a deaf cueing adult] I got to know a smart, educated and independent young person who has and*

*fulfils her dreams and is able to have a distance towards her disability. It was not a pessimistic picture and it gave as hope as to the future prospects of our son* (I.B.).

## 6. HOW DOES CS ENHANCE EDUCATION

All of the deaf individuals questioned have the opportunity to use Cued Speech at school and parents and students perceive this as a powerful means of improving their language abilities. Paweł's parents chose Cued Speech to teach him reading and they got satisfactory results after 4 months (I.B.), which means that despite his late diagnosis he was able to begin his school career together with his peers. Natalia has been using Cued Speech for 7 years now and does it mainly when learning and differentiating new concepts, like e.g. differences among the meaning of words like *valley, hillside, mountain, hill*. Her parents think that it is mainly thanks to using Cued Speech that Natalia has no problems in reading comprehension or writing her own texts in Polish (J.K.). Also Kamil, the next *cue kid* is considered by his parents as good at Polish mainly thanks to Cued Speech, which has been used with him since kindergarten and is being used now at primary school. Thanks to his generally undisturbed language development, despite his severe hearing impairment (90dB – 100dB) he is a *'very communicative, talkative and easy-going child'* (A.Z.W.).

The questioned adult users of Cued Speech are the 'first generation' users, as they took part in Krakowiak's experiment from the nineties. After being taught with Cued Speech in primary school they sporadically used Cued Speech in their secondary education, but were provided with Cued Speech transliteration service while at university. Grażyna graduated from the Pedagogy faculty and Łukasz from History of Art. They both consider Cued Speech mainly as a powerful tool in expanding their vocabulary and helping them to master their national language: *Cued Speech taught me Polish grammar and I was able to perceive new words thanks to handshapes and hand locations. I felt secure and I spoke a lot* (G.Z.); *Some of my friends from the faculty of Art can cue and I also got regular transliteration service at university. It helps me immensely while studying. I like learning new words and speaking, especially with the people who know Cued Speech. Then I understand everything clearly* (Ł.K.). They both also have been learning English with very good results (Domagała-Zysk 2003).

## 7. CUED SPEECH AS A TOOL FOR DEVELOPING SPECIFIC LANGUAGE SKILLS IN FOREIGN LANGUAGE INSTRUCTION

*English for the Deaf and Hard of Hearing* classes have been conducted at John Paul II Catholic University of Lublin since 1998. They were set up on the initiative of Ewa Domagała-Zyśk, (cf. Domagała-Zyśk 2006, 2009a, 2009b, 2010). Currently eleven hard of hearing students are attending the class. Throughout the university the students have varying degrees of language ability in English and hearing loss: between 70 and 100 dB in both ears.

The classroom was adapted to hard of hearing students' needs. Since the microphones in hearing aids and cochlear implants pick up and amplify all the sounds not just the speaker's voice, day to day management of the listening environment is of the first importance. In an effort to make sure that the acoustics of the room are as good as possible background noise levels<sup>1</sup> and reverberation time<sup>2</sup> were reduced to a minimum. The hard surfaces in the room were softened with carpets, soft wall coverings and blinds. The students are encouraged to develop values that ensure noise is kept low. Moreover, they are always positioned near the speaker.

The classes are taught in small groups or on one-to-one basis by a teacher/translator whose primary tasks include making the content of each lesson more accessible. Thus various methods of communication are used during classes, from speaking clearly and lipreading, gesticulating wildly and giving students step-by-step instructions in Polish Sign Language, to using Cued Speech. The regular feedback provided by our students towards the end of each semester shows that they find these methods of communication both helpful and satisfactory (cf. Podlewska 2012).

### 7.1. THE USE OF CUED SPEECH AT JOHN PAUL II CATHOLIC UNIVERSITY OF LUBLIN

Although Cued Speech was originally devised to give the deaf and hard of hearing access to spoken language by conveying all the necessary building

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<sup>1</sup> Background noise – the amount of noise going on in a room before the conversation or listening takes place. The most common sources of classroom background noise include: air conditioning systems, lights, computers, projectors, traffic and people.

<sup>2</sup> Reverberation – the length of time it takes for a sound to die away. Short reverberation times can make a voice easier to hear.

blocks, the system has also proved to be a useful tool for focusing on developing specific language skills such as speech production, extensive and intensive listening and literacy. At John Paul II Catholic University of Lublin cueing is used with deaf and hard of hearing adult students, who have not received Cued Speech before, to speed up communication in their instruction, to help them to clarify their articulation, to minimize the frequency of phonetic errors occurrence and to ease the strain of lipreading. It was necessary therefore to create a new approach to accessing English with cued English<sup>3</sup> to match the needs of the students at the University.

## 7.2. INTRODUCING CUED SPEECH TO STUDENTS

The idea of facilitating the process of learning English as a foreign language through cueing is gradually introduced to the first year students during a workshop aimed at explaining the fundamental principles of the system, its advantages and history. The introductory workshop always provokes an open discussion of the issues involved in foreign language learning and hearing impairment. A lot of hard of hearing students complain of having very limited access to natural settings for language learning such as exposure to the language outside the classroom. The same students admit that they are frustrated with their mainstream school English teachers who frequently modify the way they speak when addressing the hard of hearing learners. Hard of hearing-directed speech involves a much slower rate of delivery, shouting, shorter, simpler sentence patterns, repetition, and paraphrase and is counterproductive, as it uses unnatural lipshapes and grammar structures. The students often express the need to master the sounds and pronunciation of the target language. One of their most important learning goals is to develop communicative effectiveness and intelligibility. The workshop participants quickly realize that Cued Speech can cater for all the aforementioned needs and are usually willing to try this new approach to foreign language learning.

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<sup>3</sup> Cued English – the term referring to Cued Speech used with the English language (just as cued Polish means Cued Speech used with the Polish language). Even though a cued language and a traditionally spoken language can co-occur, neither hearing nor speech is necessary for the reception or expression of cued language.

### 7.3. LEARNING TO CUE

Materials and lessons are planned to gradually introduce students to the eight handshapes and four placements employed by the system in order from the most commonly used phonemes to the least commonly used ones:

- Handshape 5: /t, m, f/ and mouth placement: /i:, ɔ:, ʌ/
- Handshape 3: /h, s, r/ and chin placement: /e, ɒ, u:/
- Handshape 2: /k, v, ð, z/
- Handshape 4: /b, n/ and throat placement: /ʊ, ɪ, æ/
- Handshape 1: /p, d, ʒ/ and side placements: /ɔ:, ə:/ and /ə/
- Handshape 6: /w, l, j/
- Handshape 7: /q, g, dʒ/
- Handshape 8: /tʃ, ɲ, j/
- Diphthongs: /eɪ, ɔɪ, eə, ɪə, ʊə, aɪ, əʊ, aʊ/.

Right from the start the class teacher adds some cued words to the vocabulary used every day such as: ‘hello’, ‘goodbye’, students’ names, simple instructions and incorporates some of the topic vocabulary where possible. As students become more confident with the Cued Speech system, they are asked to tackle simple and complex phoneme-specific tasks. For example, they are instructed to break words into individual phonemes and put them back together using a sound grid<sup>4</sup> (see Figure 4).

### 7.4. SOUND GRIDS

Filling out sound grids involves providing English equivalents of Polish vocabulary items, fingerspelling English words, determining how many letters, sounds and syllables there are in a given word, putting it down in phonetic spelling and cuescript<sup>5</sup> and finding sample words that use the same spelling options for each of the sounds in a given word in *New English File* course book sound bank (see Figure 2). The activity of sound grid filling serves several

<sup>4</sup> Sound grids were first developed by Cate Calder, the Cued Speech Association UK’s tutor. The author of this paper made a couple of changes to the original model (e.g. putting words down in phonetic spelling, using *New English File* course books as a source of sample words) to make it ideally suited to her teaching agenda.

<sup>5</sup> Cuescript – a diagrammatic way of illustrating the handshapes and hand placements of Cued Speech. For instance the handshape which uses only the index finger is shown by the symbol which uses one horizontal line.

purposes. It promotes vocabulary growth as it clarifies numerous aspects one needs to understand about a word before they feel confident that they know it. Not only does it teach the basic meaning but also spelling and pronunciation. It helps to distinguish between the two completely different entities, sound and letter (or to use a more technical term, grapheme), and the two sciences, phonetics and graphemics. The information conveyed by fingerspelling about Polish or English is neither phonemic nor morphemic, but rather is graphemic. To fill out fingerspelling section of a sound grid Hard of Hearing students at John Paul II Catholic University of Lublin use English letter names and the Polish fingerspelling system. This is because when they start attending English classes they are already familiar with it. Fingerspelling systems vary from country to country. In Poland fingerspellers use discrete handshapes on a single hand to represent the letters of the alphabet. Some other countries, including England, use a two-handed system. Since there are more letters in the Polish alphabet than there are in the English one and a lot of letters are common to both alphabets, the staff decided not to introduce yet another unfamiliar code for spelling.

Both phonetic transcription and cued script give students a consistent coding system for referring to sound units. In a language such as English where spelling is so loosely related to sound, this is a major benefit. One symbol stands for one sound, and one sound is coded with a single symbol, unlike in the spelling of 'bike' below, where three sounds are represented by four letters. The consistent use of sound grids, without exception, makes hard of hearing students aware of the fact that certain words have individual phonemes in common. For example, it makes them realize that both 'paw' and 'more' have the same close rounded vowel sound /ɔ:/ at the end and that this /ɔ:/ is cued the same and sounds the same. It also makes Hard of Hearing students accept the concept of the whole word being a sum of its parts.

The task of looking for sample words which use the same spelling options for individual phonemes as the word which is being analyzed makes students aware of the fact that a single phoneme may have many different spellings and that the same spelling may represent many different sounds. In addition, the use of colour-coding for vowels (red) and consonants (blue) increases the students' ability to learn spelling and notice the correspondence between the number of vowel sounds and syllables in a particular word.

The cueing of previously sound grid analysed words prevents Polish hard of hearing learners of English from making native language interference pronunciation errors. To take an example, mispronouncing 'thumb' as \*/famp/

is a phonetic error due to interference from Polish, which does not poses the /q/ sound, uses a more retracted, lower and a bit longer vowel sound than the English /ʌ/ and does not allow voiced obstruents such as /b/ in the word-final position. Obviously the student who committed this error did not realize that <b> is silent in English whenever it occurs in the word- or morpheme-final position after <m>. By making every phoneme of the word in question visible, Cued Speech disambiguates the patterns of speech that can be seen on the lips of the speaker. The use of Cued Speech simultaneously with speech therapy and exercises in English pronunciation gives students a real understanding of how spoken and written English work, makes them more aware of the differences between Polish and English phonological systems, prevents them from categorizing English language sounds largery in terms of the phonemic inventory of the Polish language.

Word in Polish: ROWER							
English equivalent: BIKE							
FINGER SPELLING					NUMBER OF LETTERS	NUMBER OF SOUNDS	NUMBER OF SYLLABLES
					4	3	1
SAMPLE WORDS	bag	smile	key	smile			
SPELLING OPTION	b	i	k	e			
I.P.A	b	aɪ	k				
CUESCRIPT (SOUNDS)	≡ s	st	≡ s				
CUESCRIPT (WHOLE WORD)	≡≡ st s						

Figure 4: A sound grid

 <b>b</b> bag	<b>b</b> belt body probably job cab <b>bb</b> rabbit rubbish	
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Figure 5: The New English File sound chart showing typical spellings for /b/ sound

## CONCLUSION

The results of a survey show that Polish users of Cued Speech are strongly convinced about advantages of this method both in helping to build healthy family relationships between deaf children and their hearing parents and in enhancing education through language development of deaf individuals, also in education at a tertiary level. What is necessary is to convince pedagogues of the deaf and speech therapists to promote this method on a bigger scale and offer it as a way of communication to more families of deaf children.

The results of scientific research on Cued Speech enable us to formulate important linguistic statements: effectiveness of using Cued Speech verifies clearly the theories of ontology of language sign and basic psycholinguistic theories, confirming psychological reality of phonemes and importance of phonemic analysis of language information (Kakowiak 1995).

As we have also seen, even limited and late exposure to Cued Speech can positively impact the English skills of Polish hard of hearing adult students learning English as a foreign language. The benefits of Cued Speech enhanced instruction include: being able to distinguish letters from sounds, correctly producing a word containing a given sound and improving lip-reading skills in English. Increased phonetic awareness due to Cued Speech-exposure positively influences the students' confidence and attitude towards English. Future work with younger participant samples could prove even more effective.

These results should be treated as important principles of deaf students' education, both by school authorities and parents of deaf children. As nowadays new generation of deaf children is benefiting from Cued Speech (Domagala-Zysk 2008), there is a real hope for brighter future of deaf education.

## REFERENCES

- Clarke, B., Ling, D. (1976). The effects of using cued speech: A follow-up study. "The Volta Review" 78, 23-34.
- Cornett, R. O. (1967). Cued speech. "American Annals of the Deaf" 112, 3 -13.
- Cornett, R. O. (1977). Cued speech and oralism: an analysis. "Audiology and Hearing Education" 1, 26-33.
- Cornett, R. O. (1990). Annotated bibliography of research on cued speech. Reprinted from "Cued Speech Journal" 4.
- Domagała-Zyśk, E. (2003). *Nauczanie języka angielskiego studentów z uszkodzonym narządem słuchu (Teaching English to deaf students)* Audiofonologia XXIII, s. 127-136.
- Domagała-Zyśk, E. (2005). *Lektorat języka angielskiego dla studentów niesłyszących w Katolickim Uniwersytecie Lubelskim*. (English classes for deaf students at KUL. W: B. Harań (ed.). *Kształcenie studentów niepełnosprawnych w zakresie języków obcych. Teaching foreign languages to disabled people*. (107-122). Siedlce: Wydawnictwo Akademii Podlaskiej.
- Domagała-Zyśk, E. (2006). *Edukacyjne i terapeutyczne wartości lektoratu języka angielskiego dla studentów niesłyszących*. In: K. Krakowiak, A. Dziurda-Multan (eds.). *Przekraczanie barier w wychowaniu osób z uszkodzeniami słuchu*. (423-432). Lublin: Wydawnictwo KUL.
- Domagała-Zyśk, E. (2009a). *Trudności osób niesłyszących w nabywaniu słownictwa w języku obcym i sposoby przezwyciężania tych trudności*. In: M. Dycht, L. Marszałek. *Dylematy (niepełno)sprawności – rozważania na marginesie studiów kulturowo-społecznych*. (223-236). Warszawa: Wydawnictwo Salezjańskie.
- Domagała-Zyśk, E. (2009b). *Lekcje i zajęcia języka obcego dla uczniów niepełnosprawnych*. In: H. Komorowska (ed.). *Skuteczna nauka języka obcego. Struktura i przebieg zajęć językowych*. (232-246). Warszawa: Wydawnictwo CODN.
- Domagała-Zyśk, E. (2010). *Procesy pamięciowe u osób z uszkodzeniami słuchu a nauczanie ich języka obcego*. In: M. Wójcik (ed.). *Edukacja i rehabilitacja osób z wadą słuchu – wyzwania współczesności*. (119 -130). Toruń: Wydawnictwo Edukacyjne „AKAPIT”.
- Domagała-Zyśk, E. (ed). (2009). *Metoda fonogestów w Stanach Zjednoczonych i w Polsce*. Lublin: Redakcja Wydawnictw KUL.
- Hage, C., Alegria, J., Prier, O. (1990). Cued speech and language acquisition. "The Cued Speech Journal" 4.
- Hage, C. (1994). *Développement de Certains Aspects de La Morpho-syntaxe Chez L'Enfant à Surdit  Profonde: R le du Language Parl  Complet *.
- Kaczmarek, B. L. J. (1986). *Wzrokowa percepcja wypowiedzi s ownych*. Lublin, Uniwersytet Marii Curie-Sk łodowskiej, Polskie Towarzystwo Logopedyczne.
- Kipila, E. L., Williams-Scott, B. (1988). Cued speech and speechreading. "The Volta Review" 90(5), September, Washington, The Alexander Graham Bell Association for the Deaf.

- Kipila, B. (1985). Analysis of an oral language sample from a prelingually deaf child's cued speech: A case study. "Cued Speech Annual" 1, 46-59.
- Krakowiak, K. (1987). Czy fonogesty umożliwią dzieciom niesłyszącym pełny rozwój językowy? "Szkoła Specjalna" 1, 44-50.
- Krakowiak, K. (1996). *Fonogesty jako narzędzie formowania języka dzieci z uszkodzonym słuchem. (Cued Speech as a tool of forming the language of the hearing impaired children)*. Komunikacja językowa i jej zaburzenia. Vol. 9, Lublin 1995, Uniwersytet Marii Curie-Skłodowskiej.
- Krakowiak, K., Leszka, J. (2000). Efekty wykorzystywania fonogestów w procesie formowania języka dzieci niesłyszących. "Audiofonologia" XVII, 11-32.
- Krakowiak, K., Sękowska, J. (1996). *Mówimy z fonogestami. Przewodnik dla rodziców i przyjaciół dzieci z uszkodzonym słuchem. (We cue. A guide for parents and friends of the hearing impaired children)*. Warszawa, WSiP.
- Majors, J. (br). Cued Speech: The Key to Literacy. [www.cuedspeech.net/majors/csinfo.htm](http://www.cuedspeech.net/majors/csinfo.htm).
- Nicholls, G. (1979). Cued Speech and the Reception of Spoken Language. Montreal: McGill University, School of Human Communication Disorders. Doctoral Dissertation.
- Oxenden, C., Latham-Koenig, C., Seligson, P. (2009). *New English File Pre-intermediate*. Oxford: Oxford University Press.
- Podlewska, A. (2012). *Adaptacja materiałów dydaktycznych w nauce języka angielskiego studentów z dysfunkcją słuchu*. In: Z. Palak, D. Chmich, A. Pawlak (eds.). *Wielość obszarów we współczesnej pedagogice specjalnej*. (385-386). Lublin: Wydawnictwo UMCS.
- Wypych, K. (1983). Cued Speech i jej zastosowanie w kształceniu głuchych. Praca dyplomowa pod kierunkiem prof. dr hab. T. Gałkowskiego, Warszawa, mps.

# SUPPORTING DEAF AND HARD OF HEARING LEARNERS IN FOREIGN LANGUAGE CLASSES IN AN INCLUSIVE SETTING

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## ABSTRACT

Deaf and hard of hearing learners constitute a diversified group of students. Their language learning capabilities and the mode of the teaching and learning process depends both on their level of hearing loss, time of its onset and time of diagnosis, measures of early interventions taken and the type and intensiveness of therapy undertaken. Despite the challenges, these students are also subject to the inclusion process – understood as “a process of enabling all children to learn and participate effectively within mainstream school systems.” Inclusion “creates a learning environment that is child centered, flexible and which enables children to develop their unique capacities in a way that is conducive to their individual styles of learning” (The Dutch Coalition on Disability and Development, cf. Rieser 2008, 21-22). Deaf and hard of hearing students learning in inclusive settings do not require much specialized equipment or serious changes in classroom organization. However, if their inclusion has to be effective and if they are to benefit maximally from it, a series of conditions have to be met.

The goal of this paper is to present the principles of inclusion and suggest the conditions for its effectiveness in foreign language classes at which a deaf and/or hard of hearing student is present. The analysis is based on both a contemporary literature review and the author’s personal experience as a teacher of English for the deaf.

## KEYWORDS

*Deaf, hard of hearing, segregation, inclusion, integration, mainstreaming*

## INTRODUCTION

Inclusion is a comparatively new educational phenomenon in Poland, but the number of deaf and hard of hearing students learning in inclusive settings is scarce. However, inclusion seems to be the future of Polish education, and that is why it is important to closely research this phenomenon from the perspective of different users of this form of support.

In the Polish model of education, for many years in the past, disabled children, including the deaf and hard of hearing among them, were educated in Special Schools, employing special methods and techniques to support them to achieve school success. In the Special Schools for the Deaf and Hard of Hearing Students, the main principle was that sign language (Polish Sign Language or Natural Sign Language), or Sign Supported Polish (*system językowo – migowy*) should be the main means of communication. Social and political transformation of the 90's helped to implement in Poland the idea of integration, and many parents of the deaf and hard of hearing students decided that they wanted their children to be educated in local comprehensive schools. At first, the integration of this group of students seemed non-problematic: they easily cope with class discipline, rarely presented any behavior problems, did not need any specialized equipment and usually managed educationally well. However, the question soon arose: is the goal of the deaf or hearing students' education only to help them to graduate or should the aim be to help them become high-achievers? Placed in an integrative setting with no proper support, the deaf and hard of hearing students *managed* educationally, but definitely in many cases they could have managed better if they had been supported more effectively.

This situation continues to present. The Ministry of Education Regulation of 17/11/2010 and other regulations connected with educational reform state clearly that psychological and pedagogical support should be available for each disabled child in his or her local environment and local school, where special diagnostic and therapeutic teams have to be established. This should be treated as a meaningful step towards inclusion, which means education for all the children together, despite their disability or other conditions. However, inclusion also means that the children in need of special support should be provided with it in the local institutions they attend. The concept of inclusion is not well known in Poland, and it is often misunderstood as a synonym of integration or mainstreaming. This is why there is a necessity to discuss and

clarify its meaning among professionals engaged in the process of education of disabled students in local educational institutions.

The goal of this paper is to present the principles of inclusion and suggest the conditions for its effectiveness in foreign language classes at which a deaf and/or hard of hearing student is present. This analysis should serve as an example of the range and kind of assistance that is necessary to make the inclusion process effective. It requires effort from each party involved in it: the deaf and hard of hearing student, his or her peers and their teacher.

## DEAFNESS – ISSUES RELATING TO TERMINOLOGY

Deafness – or hearing impairment, is a partial or total inability to hear. The causes of this disability are multiple, beginning with genetic mutations through different side effects of medical conditions, like meningitis, measles, polio or rubella to physical and accidental injuries of the ear(s). Yet a significant part of causes of these disabilities remains unknown. Deafness may occur at different times in a person's life: it may be an in-born condition, and in this case, it is called pre-lingual deafness. Such a person has no experience of hearing or producing speech sounds and speech therapy and rehabilitation are extremely difficult in such cases. If deafness appears later in life, we may call it peri-lingual (usually we use this term for hearing impairment appearing in children who are between 2 to 7 years old) or postlingual, if it appears later than that. As for the degree of hearing loss, we can distinguish four types of hearing impairment: mild (20-40 dB), moderate (41-70 dB), severe (71-90 dB) and profound (more than 90 dB). A person with mild hearing impairment cannot hear quiet speech or a whisper, but while using hearing aids it is possible for him or her to recognize human speech and use speech as a major means of communication. When the disorder is moderate, it is impossible to hear any speech sounds, and this disability only to a certain point can be amended by using hearing aids. In profound and severe hearing impairments, a person does not hear any speech sounds and hearing aids or cochlear implants help only to some extent in recognizing different sounds from the environment and some speech sounds. Types of hearing impairment can also be differentiated concerning which part of the hearing system is damaged. Thus, hearing impairment might be conductive, receptive or central in character. In

conductive hearing loss, the conductive part of the ear is broken in the outer and middle ear. In receptive (sensorineural) hearing loss, the damage can be localized in the inner ear or in the auditory nerve, while central hearing loss is localized in the brain's aural cortex.

For some time now, deafness is perceived and directly described as *deafness* or as *Deafness* with a capital "D". This second movement, resulting also in using the term Deaf with a capitalized "D," stems from deaf people's desire to treat deafness as a normal medical condition, not a disorder. In such a perspective, deafness should not be cured or amended by using hearing aids or undergoing costly or dangerous operations, like cochlear implant surgery. People identifying themselves as Deaf are proud of having this condition, feel like an ethnic minority, and they do not want to *be changed*. They treat sign language as their primary language and want it to be a language of their education and social participation.

Some specialists and practitioners use the term *deafhood*. This is the newest term, and as Paddy Ladd (2003) from Bristol University, England, who coined this term in 1993, states that it is meant to convey the positive meaning of being deaf. She sees it more like a process by which deaf individuals can actualize their deaf identity, their priorities and principles. Deafhood is viewed as an opposition to the term *deafness* that indicates the biological and factual state of a hearing loss. Deafhood treats being deaf as a normal, even positive state and opposes those who want to cure it by hearing aids or cochlear implantation (CI). Deafhood is also understood as the personal journey of deaf individuals to discover who they are and what role they are supposed to play in society. In order to do this, one has to liberate oneself from the oppressing hearing society:

"Deafhood is not, however, a 'static' medical condition like 'deafness.' Instead, it represents a process – the struggle by which each Deaf child, Deaf family and Deaf adult explains to themselves and each other their own existence in the world. In sharing their lives with each other as a community, and enacting those explanations rather than writing books about them, Deaf people are engaged in a daily praxis, a continuing internal and external dialogue" (Ladd, 2003, 3).

This term is a kind of reaction towards the historical praxis of forcing deaf people to become "like the hearing people." This practice, sometimes described as "audism," was widespread in Europe and the USA, especially after the Congress in Milano in 1880, which recognized sign language as inferior to spoken languages and promoted the idea of oralism. Consequently, sign

languages were abandoned and forbidden and even in special schools for the deaf, pupils were forced to speak, not to sign. The idea of deafhood was especially recognized in 2006 at Gallaudet University, when deaf students protested against oppression and promoted the Deaf way of thinking.

The distinction between being a deaf person or hard of hearing is not easily stated, neither in theory nor in practice. In the past, the audiological measure was usually used and presumed to name a *deaf person* as one who had a hearing impairment of 70dB or more. Those with minor levels of hearing impairment were diagnosed as hard of hearing. It is worth noticing that in Polish pedagogy for the deaf, two terms are used in describing the group of hard of hearing: 1. *Niedosłyszący (hard of hearing)* and 2. *Ślabosłyszący (severely hard of hearing)*. In the case of the first subgroup, *niedosłyszący*, it is implied that they can rely on their residual hearing while learning and using speech, although their hearing abilities are restricted. In the case of the second subgroup, *ślabosłyszący*, they are defined as people who are not able to use their hearing in the process of speech and language acquisition and who have to rely on visual signals to master it. Their level of hearing impairment is usually deeper than in the case of the first subgroup, but it is not the only criteria of being ascribed to any of these groups.

In Poland, the distinction between people who are deaf and those who are hard of hearing is quite clear and in the past, even separate special schools were created – exclusively for the deaf and for the hard of hearing. However, the medical and technological advances, early diagnosis and early intervention practices made the audiological typology not precise: it happens that a person with profound hearing loss, but with broad and early intervention experience with constant rehabilitation uses speech and functions more as a hard of hearing individual than a deaf person. On the other hand, in schools for the deaf, there are still children whose level of hearing impairment is relatively small (50-60 dB) and who are not able to use speech as their means of communication, because they prefer using sign language and being treated as deaf. Paradoxically, it sometimes happens that students at Special Schools for the Deaf prefer to be called hard of hearing – in Domagała-Zyśk research (in print) it was 67% of the research group in primary school and 58% in middle secondary school who, despite their serious hearing impairment, called themselves “hard of hearing,” not “deaf.”

In the practice of teaching a foreign language, it is very important to know the hearing-impaired student present in our class. Taking into account the above considerations, there are many different types of hearing loss and the consequences differ. If a student uses speech as his or her primary language

and mastered language abilities to a high degree, it can be predicted that oral communication will be possible, and while learning a foreign language, this student will be willing to use speech. On the other hand, if a student communicates in sign language, during foreign language classes this means of communication, supported with writing, should prevail. These students usually do not want to learn speaking in a foreign language, but they can master lip-reading to some extent. In conclusion, the outline of a foreign language class has to match the preferred means of communication and hearing status identity of the student.

### INTEGRATION AND INCLUSION – DOES IT WORK FOR THE DEAF AND HARD OF HEARING STUDENTS?

The position of a hearing – impaired person has never been central in society. Like other disabled members of every society, they encountered times of extermination and rejection. In the past, when a disabled child was born in a family, it was considered a punishment for the parents' faults and a sign of God's disgrace. Therefore, the disabled people were locked away or even abandoned by their families, placed in total care institutions without any hope for a proper education. It was even believed that disability might be an effect of a curse or a spell, so it was advisable not to maintain contact with disabled people, as regular contacts with them might have brought bad luck to the non-disabled people or their families. Manifestations of this way of thinking can be found in common social stereotypes and prejudices, e.g. a pregnant woman should not look at disabled people because as a result of such contact, the child might be born disabled; it is better for non-disabled children not to play with a disabled child since the disability can be contagious, etc.

The stereotypes are also kept alive in literary and artwork, where a disabled person usually performs the role of a wicked and negative character: a witch has to be cross-eyed, somebody obsessed – a giant is usually malicious and mean and bad people are usually presented with some physical disabilities, like face deformations, a hump, short legs or lengthy arms. Disabled people used to be ridiculed and performed the roles of clowns, court jesters or “freak shows” (Rieser 2008). Sad to say, such roles were ascribed to the disabled people not only in the past, but they have been continuously played by the

disabled-like characters in modern soap operas, comic and cabaret TV programs. It is enough to watch e.g. Polish popular cabarets to notice that the people about whom we are made to laugh possess definitely some kind of mental challenge or learning difficulty and due to this, they do not understand some social situations and are ridiculed. It also happens in these programs that people are ridiculed because they do not hear properly.

Nowadays, such inhuman treatment has often been replaced by a charitable and medical model of treating the disability. According to it, disability is a medical condition and has to be cured and amended. This happened in many poorhouses, asylums and other state institutions devoted to securing the basic needs of the disabled. Even in the first half of the 20<sup>th</sup> century, when a disabled (deaf) child was born, their parents were offered a solution by placing this child in a special institution, so as not to burden the family with upbringing such a “problematic” child. In the case of deafness, this movement was connected with the Munich Congress on Deafness in 1880, where it was established that sign language communication should be banned in schools for the deaf and in deaf education in general and all deaf children should be taught only via oral language. This decision might be recognized as a tendency to “make deaf people normal,” to make them use only speech for their communication, just like the hearing people do. However, the results of this approach as estimated in the middle of the 20<sup>th</sup> century (comp. e.g. Cornett, Daisey 2002) showed that a majority of the deaf graduates of grammar schools were not able to comprehend texts more difficult than these for fourth graders. Great hopes were also put on technological development, and many professionals believed that hearing aids could finally solve the problem of deafness and change the deaf people into hearing people.

Without a doubt, the development of medicine has solved many medical problems connected with deafness: presently, we know more about the causes of deafness and some of them have been eliminated, as for example deafness resulting from polio, measles or rubella. New generations of hearing aids and other technological inventions have dramatically improved the quality of receiving speech sounds and, consequently, have improved the language functioning and educational outcomes of deaf people. On the other hand, there is no single technical equipment (including cochlear implants) which is able to remove hearing disorder as such and deaf and hard of hearing people are constantly in need of proper rehabilitation and therapy.

The medical and charity model is presently criticized as being ineffective by both specialists and disabled people themselves: *Charity has not really solved*

*the problem of disabled people. What it has done is entrenched the negative attitudes; it has made the position of disabled people worse. Disabled people have not benefited from charity, because charity is not a part of the developmental process. It is not part of national socio-economical development. Disabled people want to be treated as normal citizens, with rights* (Rieser 2008, 15).

Because of this criticism, the social model of disability begins to prevail, and this movement is strongly supported by disabled people themselves. It is presumed that if somebody has lost any kind of physical, mental or sensory function, it should be perceived simply only as *impairment* or *disorder*. Effectively managed, such a condition does not have to exclude a person from ordinary, everyday functioning: e.g., a deaf child has a serious hearing loss, but if amended with a cochlear implant and speech therapy, he or she is able to start and continue his or her education and lead a normal family and social life. *Disability*, however, is defined differently: *Disability is the loss or limitation of opportunities to take part in the normal life of the community on an equal level with others due to physical and social barriers* (Disabled People's International. In: Rieser 2008, 16). It is important to differentiate between these two notions: we usually cannot totally free people from their disorders, illnesses or impairments, e.g. we cannot take away their loss of hearing, but even having it – they do not have to *feel disabled* in the sense of being deprived of the opportunity to participate in normal social life.

Full social participation of disabled people in the social life is possible in the social model of disability. In the social model of disability, it is not *the disability* that is problematic – the problem is seen in structures within society: lack of useful education, an inaccessible environment, devaluing, prejudice, inaccessible transport, inaccessible information, 'belief' in the medical model, poverty, segregated services and discrimination in employment (Rieser 2008, 17-18). In the medical model, the disabled person has to adjust to society. In the social model - society has to adjust to the disabled person. This process begins with mental changes and continues on to the transformation of different institutions' structures, making the environment fully accessible.

In the case of deafness, the social model provides a basis for perceiving the deaf and hard of hearing people according to their real capabilities, according to the motto: "deaf people can do everything, apart from hearing." In the past, they were very often perceived as intellectually deficient, low motivated and educationally passive. These stereotypes were unfair, since among the population of deaf and hard of hearing, there are both intellectually bright and challenged students, those highly motivated and those with low educational

expectations. It is important, however, to diagnose the deaf child's real possibilities and needs in order to properly respond to them.

The social model of disability also allows the usage of different modes of communication, be it sign language, oral communication or Cued Speech. A very important factor that should be discussed here is to give the child and his or her family a real chance to choose: the choice cannot be influenced by the therapists' personal preferences or the availability of certain therapies on a given territory. The parents and, if possible, the child have to be informed about the advantages and disadvantages of each of these methods and the anthropological implications that lies behind each of them (Krakowiak 2003). The social model, in the case of deafness, also requires specialized activities to fight the communication barrier between the world of the hearing and hearing impaired. As Krakowiak states, if my interlocutor does not hear my voice – *I am* not able to talk with him, that is why I (not they) have to do something to change this situation – I have to learn how to talk with this person using sign language, Cued Speech, writing, speech-to-text service etc.

Deaf and hard of hearing people should also be perceived as capable of being employed, not underemployed (cf. Domagała-Zyśk 2010). They are quite often capable of performing different tasks, but the work environment has to be adjusted to their needs by possessing visual emergency symbols, clear patterns of communication (e.g. by e-mails or sms), and changes at job management meetings. For example, the room has to have an induction loop or the deaf worker has to have the possibility to use the translation service to keep up with the job requirements. A very important thing is disability awareness among the staff and their sensitivity to the subtle needs of their hearing-impaired colleagues, e.g. the need to be informed about social events, the need to feel included in gossip and social small talk, etc.

The education of disabled children can be organized in three different settings: as special education (segregation), integrated or inclusive education. In the segregation model, special schools or institutions are created, where disabled children are educated by special teachers and with the use of special methods and forms. In the case of deafness, it often meant placing a child in a boarding school where the child lived and received an education, usually reasonably far from his family and neighborhood environment. It meant exclusion from local society and made it difficult to come back to it. Therefore, the pupils were very often isolated, working later on in special work settings, and created their own "subculture of deafness."

Integration in education means creating special conditions under which a disabled (e.g. hearing impaired) child can be educated in a mainstream setting. It also means that the child has to adjust to the system: he or she must be able to cope with other children and the school requirements. These precautions, however, mean that a disabled child is still considered to be “the problem”: he or she has to be diagnosed and special treatment has to be ‘prescribed’; they have learning difficulties and need a special teacher, a special environment and equipment and are generally different from other children (comp. Rieser 2008, 27).

Inclusion is a reasonably different model than integration and mainstreaming. It is understood as *a process of enabling all children to learn and participate effectively within mainstream school systems. It does not segregate children who have different abilities or needs. It creates a learning environment that is child-centered, flexible and which enables children to develop their unique capacities in a way that is conducive to their individual styles of learning* (The Dutch Coalition on Disability and Development, in: Rieser 2008, 21-22). Understood as such, inclusion treats each child in a given area as having the same right to be educated locally, to use local facilities without barriers, to be able to be an active member of a local community. It is not the child who is “the problem” – it is the environment that has to adapt to serve the needs of all community members. Disability in this model is seen rather as a resource than a disadvantage. As a resource, it may serve the social and personal development of the child’s peers. All the assistive technologies used for the disabled, like ICT programs, good quality printed materials, lack of architectural barriers serve not only the disabled, but heighten the quality of education in general. Inclusion is person-centered, since it respects the needs of a disabled child, his or her non-disabled peers, and the needs of teachers and parents.

UNESCO identified several factors that are responsible for the effectiveness of inclusion (UNESCO 2003). First, we should see inclusion a process rather than a state, which means that it is a never-ending journey to appreciate diversity, to find better solutions and resources. Second, inclusion is about eliminating barriers – naming them and searching for creative ways of removing them. Third, inclusion operates on three levels: presence, participation, achievement. This means that the disabled child not only has to be present in the inclusive setting, but also participate in its educational and social activities, and has the right to achieve. Fourth, the inclusion movement tries to care particularly for those most endangered with exclusion, lack of achievement and poverty.

Integrated and inclusive education for the deaf and hard of hearing students might be a tricky thing. On the one hand, they seem to be a group not requiring much special assistance: they do not need special computer software, wheelchairs and other equipment. Their behavior is not disruptive and they can easily cope with class discipline requirements. Their disability is an “invisible” disability – not seen at first sight. Because of these facts, deaf and hard of hearing students are very often placed in integrated or inclusive settings. Unfortunately, these settings very often have also not been prepared to answer their special needs: there are no communication facilities, like translators or transliterators (the staff prefer to assume that the child can lip-read perfectly), no technical support like induction loops of FM systems and there is no provided educational support (like tutorials, note-taking service or peer-tutoring enhancement). Deaf students left without any support are not able to fulfill their potential. To make a long story short, inclusion it is not a spontaneous action, but a well designed project with different forms of support prepared for the student. The next paragraph presents an analysis of several factors for a well-prepared environment.

## FORMS OF SUPPORTING THE PARTICIPATION OF THE DEAF AND HARD OF HEARING STUDENTS IN INCLUSIVE EFL CLASSES

In the last part of my paper, I plan to analyze the range and kind of support that have to be taken into consideration while teaching a deaf or hard of hearing student in an inclusive setting. Inclusion, as Rieser (2008) states, is the process of searching for the best possible solutions that can support the disabled student and maximize his or her learning opportunities. Based on this, the following analysis should not be treated as “*a once and for all*” solution, but as a voice in the discussion of the issue of inclusion of deaf students. This fragment also immensely relies on my previous works on the topics of *English as a Foreign Language for the Deaf and Hard of Hearing University Students* (Domagła-Zyśk 2009, 2010, 2010a, 2010b, 2010c, 2010d, 2010e, 2011a, 2011b, 2011c, 2012).

Placing a deaf student together with his or her peers in a foreign language class presents both challenges and opportunities. The first positive fact is that a deaf student is included in one more activity shared by the rest of his class

members and not only involves him or her directly in the foreign language teaching and learning process, but also gets the student involved in a social atmosphere connected with it. All the students together wait for important tests, learn vocabulary for a given task, share the same class jokes and anecdotes. At the same time, if not supported, the deaf student may easily feel lost, not understanding the class messages, being confused at the fast speed of teaching and feel ridiculed in situations when he or she does not understand the instruction properly. Inclusion requires a serious effort from the deaf or hard of hearing student, his or her peers and their foreign language teacher.

## A TEACHER'S AWARENESS

While teaching a deaf and hard of hearing student in an inclusive class, certain conditions have to be met. First, it is necessary to take a team approach towards this work and try to build a coalition of people who aim at supporting the deaf student. Both staff members and the student's peers should participate in this work.

The deaf and hard of hearing student's participation in an inclusive lesson is specific. This also results from the major teaching approach that is currently used - the communicative approach. It implies that all the students are actively participating in the process of teaching and learning by asking questions, entering into dialogues, negotiating the exact meaning of new words and grammar rules. Such an approach is thought to be effective: thanks to it, students are to become more autonomous and independent language users. They are more active in using language in communication with foreigners and native speakers.

On the other hand, for those not possessing the ability of hearing well, a lesson conducted using the communicative approach might pose serious problems. First, it is connected with multiple language users actively participating in the conversations. For a deaf or hard of hearing student, it is difficult to identify the source of sound – and only after he or she does it, is it possible for them to lip-read. Unfortunately, it is then usually too late to catch the full meaning of the utterance. Hearing – impaired students receiving individual tutorials for foreign languages get used to the style of speaking presented by the teacher – his or her intonation, rhythm of speech, tempo, pitch, etc. While

being accustomed to it, it is much easier for them to lip-read the teacher's words.

The situation is less encouraging when different people are speaking and a deaf student has to recognize different voice and language qualities, which makes lesson participation much more difficult. In order to minimize the obstacles arising from using this communicative approach, it is advisable to stick to some rules. It is essential that both the teacher and the hearing students understand the significance and keep to the rules of effective communication. They should be seated in such a way as to make it easy to see one another's lips (their desks should be placed in a circle). Each person should indicate his or her will to speak by using a common signal – e.g. raising a hand or a thumb – so as to help the deaf student via this visual signal to quickly identify the speaker. The next important thing is for everybody to speak clearly and not too quickly, to enable the deaf student to keep up with the pace of the conversation. Such a layout for the language classroom on the one hand restricts spontaneity and slows the pace of the lesson, but on the other hand, these improved sound and vision conditions will be profitable for all class participants.

It is also advisable for an English teacher to have support staff employed. This second teacher may play the role of a note-taker, lip-speaker, sign language interpreter, Cued Speech transliterator, communication support worker, learning needs assistant, classroom assistant for the deaf student or speech therapist. The roles mentioned above are different, but the tasks of these staff members are similar: to make it possible for the deaf student to participate effectively in a foreign language class.

The first thing that should be done to achieve this is to make it possible for the student to understand the teacher's and the peers' words. This can be achieved by correct lip speaking, which is repeating the teacher's words clearly and silently, at a closer distance, supporting them with gestures or finger spelling. The second effective way is that of note taking – writing down important passages during the lesson. If it is done electronically, the advantages are doubled: not only does the student have immediate access to the words of the lesson, but after class, the text can be copied and given to him or her as material for revision and individual studies. Such support is available with the use of a simple notebook, but there is also special software available, *speech-to-text reporters*. Thanks to this equipment and the efforts of qualified steno typists, there is the possibility of high speed writing, which enables the majority of the words to be written down for the deaf students.

## PEER AWARENESS

Hearing disability is in fact a language and communication disability, since the main problem of deaf and hard of hearing students lies in understanding other people's communicates (both oral and written) and to react to them in a language manner that will be understood by the interlocutor. It is of utmost importance that the classmates of the deaf and hard of hearing students understand this issue and consciously do their best to manage the situation. Not only the teacher but also the students themselves have to be aware of the rules of proper communication with their hearing-impaired mates. In the case of the hard of hearing students who use speech as the main means of communication, the hearing peers should keep in mind not to speak if their deaf colleague does not see their face. Peers should feel obliged to attract his or her attention before starting their utterance. Their speech does not have to be too loud – it is enough if it is of a normal loudness and pace, but it has to be delivered clearly and attentively. The hearing students should learn to repeat their utterances or exchange words for those who more easily lip-read, and thus be understood by their hearing impaired mate. In fact, such a way of speaking might be very effective for both the hearing and hearing-impaired while using a foreign language in an unknown context, e.g. abroad, where in order to be understood, one has to speak clearly and patiently choose words. It is similar when doing group work with a deaf colleague, who might teach the hearing students cultural and communicative competencies necessary in using language in a natural context.

It is advisable that during group work activities, a deaf or hard of hearing student work with different groups of students, and it is the teacher's role to ensure this. A useful way to achieve this is to assign different rules for group building – it should not always be a spontaneous student decision. The groups can be formed according to students' positions on the list, according to the first letters of their names or surnames, months of their birthdays, their favorite season, etc. In such a case, a deaf and hard of hearing student will feel integrated with the classroom (not only with his best friend who always "has to" work with him or her). At the same time, every student will have the chance to better get to know his or her deaf colleague and learn how to work together with him or her.

However, group work might create certain problems for the deaf students. First, during such exercises, the level of noise is usually much higher and it

may be more difficult for the deaf learner to cope – the background noise due to other people talking might disturb them and be tiresome. Second, the deaf and hard of hearing student may feel uncomfortable in speaking to their colleagues who are not well known to him or her, and this may even lead to stopping their participation during group work. These difficulties can be maintained by constant work on the peers' disability awareness and care for securing best possible acoustic conditions (e.g. a deaf or hard of hearing student should be seated in a corner of the classroom).

## DEAF AND HARD OF HEARING STUDENTS' ACTIVE INVOLVEMENT

It is a well-known fact that even the most comfortable learning environment in itself cannot guarantee success in education. This is particularly the case for students with special educational needs, where the issue of motivation is a critical one. On the one hand, deaf and hard of hearing students might be de-motivated to learn foreign languages, and this may be a consequence of their different past experiences: difficulties in mastering their national language, failures at early stages of learning a foreign language, low self-esteem and self-image, passiveness in learning new material, or low educational expectations. On the other hand, it very often happens that experiencing difficulties makes people stronger, and deaf and hard of hearing students perceive learning foreign languages as a chance to make their education more professional and of a higher quality.

Domagała-Zyśk (2011) performed studies on motivating deaf university students to learn foreign languages. Eleven deaf subjects (9 females and 2 males), all but one of whom experienced a hearing impairment of 90dB or more, completed a paper-and-pen questionnaire concerning their motivation to learn a foreign language. The results showed that deaf students present mature and integrated motivation for this activity. They are aware that knowing a foreign language gives them additional knowledge about other countries and makes it possible to travel and communicate with foreigners. On the other hand, these students treat English as a useful tool that enables them to advance in their job career faster. When asked about a factor that motivates them, for most that undergo the effort of learning a foreign language, the majority chose a teacher who was a person who supports and encourages their learning. All

these statements were chosen by 10 out of 11 participants (91%). Commenting on these results, Domagała-Zyśk (2011) concludes that the deaf students, participants of the *English for the Deaf and Hard of Hearing* classes, present mature motivation for foreign language learning in all three dimensions as proposed by Pintrich (2000). They formulate and know the reasons for learning a foreign language, estimate adequately their abilities and challenges in this process and experience positive emotions during this process.

Another important dimension for deaf students' activity is the help-seeking attitude they present. It is not a problem when a deaf student does not know some facts, rules or vocabulary issues. The problem arises when he or she pretends to know it and does not look for support or tries to solve their problem by using immature strategies, like cheating, using ready-made materials from the internet or using work prepared by other students as his or her own. It is a kind of achievement when a student feels safe enough during class to ask for help and thus monitor his or her own process of learning.

## COMMUNICATION AND INFORMATION TECHNOLOGY

One cannot simply presume that using Communication and Information Technology (CIT) makes it always simpler to conduct the foreign language lesson. An audio component is very often an indispensable part of the teaching material, and if it is not possible to get the subtitles, the presentations might be useless for deaf and hard of hearing students. For a deaf and hard of hearing student, it is much more difficult to understand what is being said on the screen than by a real live person. Standard CIT materials do not recognize the special needs of deaf and hard of hearing students. For example, when two people are speaking, their faces are not always visible and this makes it difficult or even impossible for a deaf or hard of hearing person to understand such a speech.

The majority of deaf and hard of hearing students use hearing aids or cochlear implants (CI), which help them receive speech. Only a small majority of them do not take advantage of this kind of technical support, so they do not use, it and rely only on visual signs. For those using hearing aids or CI, there are different kinds of technological assistance available that can improve their abilities to hear the sounds of speech. One of them is the hearing induc-

tion loop, which is a kind of electromagnetic detection system that is used for transmission and reception of sound signals. When installed in a lecture room or other space, an induction loop provides an audio frequency oscillating magnetic field in the area where a hearing aid user might be present. Modern hearing aids should all have a tele-coil installed into their structures, so using an induction loop does not require any additional special equipment. The quality of sound that is received by a hearing aid user is much better – the sound “goes” straight to their ear and they feel as if a speaking person “talks directly into their ear.” The hearing induction loop is definitely technology of the 21<sup>st</sup> century, and when installed in classrooms, it can dramatically change the deaf and hard of hearing person’s abilities to benefit and participate in inclusive lectures and classes.

Deaf and hard of hearing students may also benefit immensely from other kinds of CIT. Using computer programs or on-line activities for foreign language learners might be highly profitable: they usually contain plenty of visual prompts and written material, so it is easy for the deaf and hard of hearing learners to follow. They also promote self-motivation and autonomy, as the students usually can check their progress automatically and get proper feedback on their progress immediately. It should also be noticed that hearing impairment is often accompanied by other disorders, for example motor disorders resulting from cerebral palsy. In such cases, technological support may make it possible for the students to intensify their learning, as they do not have to do exercises in handwriting and do more language activities using a computer mouse or a keyboard, which are easier than using a pen and paper.

## CONCLUSION

The paper aims to present the principles of inclusion and suggests the conditions for effectiveness at foreign language classes in which deaf and/or hard of hearing students are present. As the analysis suggested, there are many conditions for the inclusion process’ effectiveness that have to be met by the disabled students, their peers and their language teacher. The analysis suggests that inclusive education is an inevitable step towards normalization and expresses the authorities and teachers’ real care for the disabled students. If the conditions of inclusion are met, it can be fruitful for all parties involved.

## REFERENCES

- Domagała-Zyśk, E. (2009). Trudności osób niesłyszących w nabywaniu słownictwa w języku obcym i sposoby przezwyciężania tych trudności. In: M. Dycht, L. Marszałek (red.). *Dylematy (niepełno)sprawności – rozważania na marginesie studiów kulturowo-społecznych.* (223-236). Warszawa: Wydawnictwo Salezjańskie.
- Domagała-Zyśk, E. (2010a). *Postrzeżenie predyspozycji zawodowych osób z uszkodzeniami słuchu.* In: D. Bis, J. Ryś (red.). *Szkolnictwo i kształcenie zawodowe- wybrane aspekty.* (235-265). Lublin: Studio Format.
- Domagała-Zyśk, E. (2010b). Idea integracji a potrzeby niesłyszących studentów w zakresie uczenia się języków obcych w szkołach wyższych. In: S. Byra. M. Parchomiuk (red.). *Student niepełnosprawny. Wybrane konteksty.* (155-165). Lublin: Wydawnictwo UMCS.
- Domagała-Zyśk, E. (2010c). Kształcenie studentów z uszkodzeniami słuchu w Stanach Zjednoczonych. In: S. Byra. M. Parchomiuk (red.). *Student niepełnosprawny. Wybrane konteksty.* (169-180). Lublin: Wydawnictwo UMCS.
- Domagała-Zyśk, E. (2010d). Uwarunkowania rozumienia tekstu w języku obcym przez osoby z uszkodzeniami słuchu. In: Z. Palak, A. Bujnowska, A. Pawlak (red.). *Aktualne problemy edukacji i rehabilitacji osób niepełnosprawnych w biegu życia.* (163-173). Lublin: Wydawnictwo UMCS.
- Domagała-Zyśk, E. (2010e). Procesy pamięciowe u osób z uszkodzeniami słuchu a nauczanie ich języka obcego. In: M. Wójcik (red.). *Edukacja i rehabilitacji osób z wadą słuchu – wyzwania współczesności.* (119-130). Toruń: Wydawnictwo Edukacyjne „AKAPIT”.
- Domagała-Zyśk, E. (2011a). Podstawowe trudności osób niesłyszących w opanowaniu pisowni języka obcego i ich kompensowanie. In: K. Krakowiak, A. Dziurda-Multan (red.). *Ku wspólnocie komunikacyjnej niesłyszących i słyszących.* (149-162). Lublin: Wydawnictwo KUL,
- Domagała-Zyśk, E. (2011b). Kompetencje uczniów niesłyszących i słabosłyszących w zakresie posługiwania się językiem angielskim w szkołach podstawowych, gimnazjach i szkołach ponadgimnazjalnych, „Neofilolog” (Czasopismo Polskiego Towarzystwa Neofilologicznego), 36 (Niezwykły uczeń – indywidualne potrzeby edukacyjne w nauce języków obcych, red. K. Karpińska-Szaj), 91–110.
- Domagała-Zyśk, E. (2011c). Style uczenie preferowane przez niesłyszących uczestników lektoratu języka obcego. In: M. Białas (red.). *Specjalne potrzeby niepełnosprawnych.* (243-260). Kraków: Arson.
- Domagała-Zyśk, E. (2012). *Trudności osób niesłyszących w zakresie opanowania systemu leksykalnego i składniowego języka angielskiego jako obcego i strategii pokonywania tych trudności.* In: Z. Palak, D. Chimicz, A. Pawlak (red.). *Wielość obszarów we współczesnej pedagogice specjalnej.* (361-382). Lublin: Wydawnictwo UMCS.

- Krakowiak, K. (2003). *Kim jest moje niesłyszące dziecko? Rozważania o ukrytych założeniach antropologicznych współczesnych koncepcji surdopedagogiki i audiofonologii*. Lublin: Katedra Pedagogiki Specjalnej KUL.
- Krakowiak, K. (2006). *Studia i szkice o wychowaniu dzieci z uszkodzeniami słuchu*. Lublin: Wydawnictwo KUL.
- Krakowiak, K. (2006). *Zaburzenia mowy u dzieci z uszkodzeniami słuchu*. In: *Studia i szkice o wychowaniu dzieci z uszkodzeniami słuchu*. (7-46). Lublin: Wydawnictwo KUL.
- Ladd, P. (2003). *Understanding Deaf Culture: In Search of Deafhood*. Multilingual Matters: Clevedon.
- Mole, J., McColl, H., Vale, M. (2005). *Deaf and multilingual. A practical guide for teaching and supporting deaf students in foreign language classes*. Brasington: Direct Learn Services Ltd.
- Pintrich, P.R. (2000). An achievement goal perspective on issues in motivation terminology, theory and research. "Contemporary Educational Psychology" 25, 92-104.
- Rieser, R. (2008). *Implementing inclusive education. A Commonwealth guide to implementing Article 24 of the UN Convention of the Rights of People with Disabilities*. London: Commonwealth Secretariat.



# WHEN PEOPLE WITH INTELLECTUAL DISABILITIES DEVELOP WORSE HEALTH IN OLD AGE. A NEW CHALLENGE FOR SPECIAL EDUCATION?

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## ABSTRACT

Having a disability is not a sickness, but one of many different ways of life. People with disabilities are right to lay special emphasis on not being considered to be ill. Fortunately, improvements in general living conditions, medical and social welfare and pedagogical support, as well as the establishment of paradigms of assistance and inclusion have led to continuing increases in the life expectancies of people living with disabilities. Just as there has been an increase in the number of older people in the general population, there has also been an increase in older people living with age-related diseases.

This presentation deals with the question of whether old-age illnesses among the mentally disabled pose special and new challenges to mental health workers. Diseases or disorders are sometimes correlated to mental and social crises, changes in one's living situation and restrictions to autonomy. They can also lead to mistaken diagnoses and misinterpretations when the symptoms and utterances of the mentally disabled are not correctly understood.

The following three examples will be used to demonstrate opportunities for pedagogical support:

Alzheimer's disease occurs particularly often among people with Trisomy 21 (Down syndrome). The symptoms of disorientation are sometimes only identified quite later on. Thus, caregivers working with these people need to have specific competencies. When properly diagnosed, depression in old age can also be handled well, even in mentally-disabled people. Support can also be seen as an opportunity for pedagogical treatment. Finally, a project will be introduced specifically designed for mentally-disabled diabetics

(adult-onset diabetes), in which they are taught in simple language how to deal with their disorder. All in all, there are new challenges and important treatment options for assisting pedagogues/ mental health workers in their work with people with intellectual disabilities, whose health deteriorates in old age.

## KEYWORDS

*Intellectual disability, Alzheimer's disease, depression, diabetes, pedagogical support*

## I. INTRODUCTION

Issues of health and illness are constant points of interest. We would like to be healthy and want our friends and relatives to be in good health. But what does this mean? Surely it is not just the absence of disease, but also a well-being that includes – according to the Declaration of Ottawa (1986) – a comprehensive physical, mental and social well-being. In this sense, health is seen as an essential part of everyday life. When we want to promote health and well-being for disabled people, we have to realize that disability is not a disease, though it is true that diseases such as untreated meningitis can cause disability. In some cases, with increased vulnerability, this is correlated to diseases. For example, epilepsy or heart disease should be detected early and specifically treated to prevent additional suffering. Nevertheless, having a disability is not a sickness, but one of many different ways of life. People with disabilities are right to place special emphasis on not being seen as sick.

The International Classification of Functions (ICF), based on a bio-psycho-social model of disability, emphasizes function, skills and inclusion and sees these factors in a close interaction of biological, psychological, and in particular, social context. When people with intellectual disabilities get ill, this is a new life experience for them. Disabled and non-disabled people as well come in contact with different phenomena on a physical, mental and social level. Pain, discomfort and more or less specific symptoms may be found on the physical level. On the psychosocial level, crises, confusion or sadness may be present. Disabled and non-disabled people want to be informed emphatically and objectively and they need advice regarding their future prospects in life and the consequences of the disease. On the social level, points of interest are the family and relationships, role expectations and role changes, mainte-

nance and security. The secondary network (types of housing, work, contact with friends and neighbours, care for hobbies or the teaching of new horizons) are important. Disabled and non-disabled people want to be strengthened in their self-healing facilities.

## 2. DEMOGRAPHIC ASPECTS

Fortunately, improvements in general living conditions, medical and social welfare and pedagogical support, as well as the establishment of paradigms of assistance and inclusion have led to a continuing increase in the life expectancy of disabled people.

Just as there has been an increase in the number of older people in the general population, there has also been an increase in older people living with age-related diseases. This presentation deals with the question of whether old-age illnesses among the mentally disabled pose special and new challenges to mental health workers. Just like in the general population, elderly people living with mental disabilities are also affected by worsening eyesight and hearing, disorders of metabolism (such as diabetes), cardiac and pulmonary diseases and, above all, impaired motor functions, which lead to frailty and the danger of falling. The most predominant mental disorders are depression and dementia.

According to Dieckmann et al. (2010, 56-66), not only will the proportion of persons with age-related intellectual disabilities rise in the next few decades, but this will particularly include the proportion of people with dementia. Dieckmann's research group examined the district of eastern Westphalia. They found that the number of mentally handicapped adults will increase over the next 20 years by about a third. The proportion of senior citizens will cover about 30% of the general population. We can also expect a larger number of people with dementia. The multi-morbidity in mentally handicapped people will also increase. That means a higher percentage of them will suffer from two or more disorders than in the general population.

Factors in the risk of falling may illustrate the relationship of multi-morbidity: disorders of cognition, the function of the inner ear, power of muscles, the motor system, but also the auditory and the visual systems may correlate with intellectual disability, especially in specific syndromes

(i.e. Down's syndrome, etc.), disproportionately more frequently than in the rest of the population. This may lead synergistically to secondary disorders, and finally, the hazards in falling may increase. This should be considered in special education. Similar phenomena may also be found in cancer or diseases of the musculoskeletal system. Additionally, there are barriers in access to health care, i.e. when medical practitioners have no barrier-free access, or when behavioural and communication problems cause difficulties in diagnoses and treatment. Sometimes handicapped people have previous experiences (painful tests, etc.). Sometimes doctors and nurses have a relatively low level of knowledge about specific symptoms of certain diseases in mentally people. Diseases or disorders such as these are sometimes correlated to mental and social crises, changes in one's living situation and restrictions to autonomy. They can also lead to mistaken diagnoses and misinterpretations when the symptoms and verbal communicates of the mentally disabled are not correctly understood.

Aging people with intellectual disabilities feel the need for health and well-being. They also have the desire for security, safety and continuity of life, and a continuity of caregivers and the environment, especially in times of illness. Disabled people find security in encounters that are familiar to them, and situations that can estimate it. A stable environment is particularly important, particularly when seniors are in a state of helplessness or illness. Therefore, it is useful and necessary that particular dependent or chronically ill older people with disabilities remain in their previous place of residence.

The following three examples will be used to demonstrate opportunities for pedagogical support:

- Alzheimer's disease occurs particularly often among people with Trisomy 21 (Down's syndrome). The symptoms of disorientation are sometimes only identified quite late. Thus, caregivers working with these people need to have specific competencies.
- When properly diagnosed, depression in old age can also be handled well, even in mentally disabled people. Unfortunately, it often is not done. Support (through sports, music and relaxation, etc.) can also be seen as an opportunity for pedagogical treatment.
- Finally, a project will be introduced specifically designed for mentally disabled diabetics (adult onset diabetes, also known as type 2 diabetes) in which they are taught in simple language how to deal with their disorder.

### 3. ALZHEIMER'S DEMENTIA IN AGING PEOPLE WITH INTELLECTUAL DISABILITIES

Alzheimer's disease is a disease that destroys brain cells and brain tissue. In this case, brain tissues shrink by one third. Inside the brain substance, there are so-called senile plaques, a conglomerate of protein fragments, as well as dysfunctional brain cells and tangles, and fine protein filaments, the result of cell destruction. The surrounding, primarily functional nerve cells can be damaged by a reduction of acetylcholine. The following symptoms are characteristic of Alzheimer's disease:

- Memory disorders (initially of the semantic, and later of episodic and procedural memory).
- Disturbances of recognizing objects or persons (*agnosia*).
- Disorders of movement despite intact motor function (*apraxia*).
- And finally disorders of executive functions (of planning, deliberating and abstract thinking).

There are also secondary symptoms such as poor impulse control, excitement, night walking, depression, etc.

The focus of these symptoms is spatial, temporal and situational disorientation or confusion. Disorientation is the result of the profound disorders of memory. Those who have no memory of the environment will have difficulties in finding their way around. Inability to remember events leads to temporal disorientation and the inability to name the day or year. Finally, failure to detect people and social situations also leads to social disorientation. Disorientation is usually correlated with a high level of anxiety. This is not only due to pragmatic reasons, since people ultimately do not know how to act. Probably even more disturbing and burdensome is the loss of the structures of space and time. As Immanuel Kant observed, human beings fundamentally think in spatial categories (in relation to the world) and time related categories ("I was, I am, I will be"). Losing this framework causes a shock of self-consciousness, which is experienced as extremely painful. This also applies to the spatial orientation – loss of it is extremely frightening, because we are influenced by numerous physiological brain mechanisms enshrined in an orientation in space and the loss of this orientation is often associated with crises of identity. The result is usually a high degree of arousal, as indicated by a restless search for hiking and helpless walking, and those affected usually cannot specify what they are looking for.

People with intellectual disabilities do not generally have a higher risk of developing Alzheimer's disease. A significantly increased risk is present only in Down syndrome. Recent studies point to chromosome 21 (which is present in Down's syndrome in triplicate) on which the gene is located that controls the structure of the amyloid precursor protein (APP). If it is formed in excess, it accumulates over the years to form plaques. Perhaps because of chromosome 21's triple feature, the probability of developing Alzheimer's disease increases. Meanwhile, a number of other genetic and biochemical processes also combined with chromosome 21 are well known, but this cannot be discussed in detail. Norberto Alvarez of Harvard Medical School gives a good overview (*Alzheimer's Disease in Individuals with Down Syndrome*, 2010). Unlike other forms of intellectual disability, Alzheimer's disease occurs in people with Trisomy 21 relatively often. Plaques can be found most likely from the forties in computer tomogram (CT). The onset of Alzheimer's disease and the first symptoms appear 20 – 25 years earlier than in the rest of the population, sometimes even in the forties, with an accumulation around the fiftieth year of age.

The course (in the general population about 8 years after initial symptoms) also appears to be faster for people with Down's syndrome. Related to the different and sometimes misdiagnosed symptoms the diagnoses follows, on average, two years later for the disabled persons, compared with the average population. Sometimes the result is that drug treatment with acetylcholinesterase-inhibitors (which may compensate a neurotransmitter-deficit for a year or two) may become impossible. Even diagnosis of Alzheimer's disease is difficult in people with intellectual disability. The frequently used and quite typical "clock test" in which patients are asked to draw a clock, may sometimes be too difficult for these patients. The same applies to standard tests for the detection of dementia, such as the minimal-mental-state-examination (MMSE), when questions like "What is the district you are living in called?" may be too difficult. Certain other tasks such as spelling complicated words or subtracting numbers may also be too difficult for the disabled people, so there are limitations to those tests.

The first symptoms of dementia are also different in people with intellectual disabilities. The first signs are often unnoticed because they are interpreted as an expression of the present disability and changes in this area are not initially perceived.

Imaging techniques as CT or MRI can provide information on anatomical changes (senile plaques). But this does not necessarily correlate with the

severity of the disease and it is not useful to burden older people with disabilities with this complex and sometimes frightening procedure. In the case of suspecting dementia, it would be important to ask close relatives or caregivers (health educators, coaches) about changes in behaviour, language, everyday life, mood and social relationships.

Non-disabled people in the early stages of Alzheimer's disease often tend to build up a façade towards the social network. They seem capable of understanding a common television show, or they seem to read a book, although both are no longer the case. This is often a result of fear and shame and can be found – on another level – even in people with intellectual disabilities, for example, when a person tries to hide incontinence. The following symptoms of the early stage of Alzheimer's disease are the most visible: confusion, disorientation, constant walking and behavioural changes. The person may, for example, refuse to follow certain directions or to do chores because of Alzheimer's related mental changes. These changes are hard to recognize, only those familiar with the individual notice these changes. Change can include change in daily routine, change in sleeping or eating habits, the inability to make decisions about clothing, getting lost in unfamiliar environments and the inability to remember the names of familiar persons. In the course of dementia, aggressiveness and panic reactions may also increase, as well as disturbances in the circadian rhythm and depression.

The “Alzheimer's Functional Access Management Tool” is a series of targeted observations for the early detection of Alzheimer's disease that can be used to document a progression of the symptoms and therefore can be helpful in evaluating the use of any drug treatment or behavioural interventions (excerpt, taken from Alvarez 2010, 5, modified) :

*Toileting:*

1. *Can use bathroom in familiar and unfamiliar environments independently*
2. *Goes to the toilet independently or asks staff for assistance; may need reminders to use toilet paper and wash hands*
3. *Has occasional toileting accidents; needs verbal reminders...*
4. *No bowel or bladder control; may require frequent changing or special clothing (for example pads, diapers).*

Another topic deals with nutrition:

*Dining:*

1. *Can prepare simple food (for example a sandwich, a toast); can set table and clean up after meal; uses knife and fork to cut food, may or may not use adaptive equipment to eat independently*

2. *Can use fork and spoon to eat independently but needs food to be cut*
3. *Eats independently with the help of adaptive equipment*
4. *Can use fork and spoon to eat independently but may need occasional prompts to start or continue eating, may be finger feed, needs food to be cut*
5. *Needs physical assistance to complete the meal*
6. *Develops swallowing problems, needs change in consistency of food or thick drinks*
7. *Completely dependent on assistance; may need specialized feeding.*

In addition to the previously described aspects of “toileting” and “dining,” the following areas are also investigated: activities of daily living, description of skills such as walking/motor, bathing, dressing, personal and oral hygiene and environmental awareness.

As it appears, special education may be helpful for diagnosis, but also for assessment of functional therapy. Above all, agitation, walking around, auto-aggression and aggression and withdrawal of common activities and social relations are often misinterpreted and not associated with Alzheimer’s disease. The differential diagnosis of depression can be difficult. On the one hand, depression can lead to confusion; on the other hand, especially in the initial phase of AD, the loss of memory is often associated with depression.

There are also differences between non-disabled and disabled people with consecutive Alzheimer’s disease in psychosocial issues. People with Trisomy 21 often have no spouse and no children who can give them security and social support. Their siblings are often old, the parents often advanced in years, which may complicate social support. Often they have been living for a long time, maybe their whole lives, in residential facilities (i.e. not in their own home). Biographical experiences are important for people with Alzheimer’s disease. They often remember experiences from childhood and youth, while current events are forgotten immediately. This phenomenon is often used in monitoring and treatment, for example by singing songs from childhood or the experience of Christmas traditions from childhood, etc. Some people with intellectual disability had a stressful childhood, and memories of youth – especially in Germany – are sometimes characterized by persecution, endangerment of life, growing up in very stressful, large institutions, neglect by parents or educators and so on. We should take all of this into account in daily life assistance, biographical talks and educational support. In everyday life, personal dignity and identity should be guaranteed by an empathic and compassionate understanding. Response, adequate physical contact, relaxation exercises, use of music, memory exercises, eye contact, and so on are important methods of

outreach to increasingly disorientated people with disabilities. Educators can also inform carers, especially professional geriatric nurses, about the special needs of these clients.

#### 4. DEPRESSION IN AGING PEOPLE WITH INTELLECTUAL DISABILITIES

Depressive disorders typically show symptoms in four areas: on the emotional level as infinite sadness or a “feeling of emptiness,” as physical symptoms (fatigue, loss of energy and weakness, headache, backache and other pains and signs of somatisation), in thoughts and loss of action (simple tasks cannot be done, decision problems, withdrawal, slowed thinking, impaired concentration, forgetfulness), and in disorders of vegetative functions (disorders of sleep, gain or loss of weight). The prevalence of depressive disorders of the total population is about 3-8%, in people with intellectual disabilities between 2-30% (Dosen 2010, 254). The causes of depression are complex. The commonly used presently vulnerability-stress-model is based on an increased vulnerability (sensitivity) caused by biological, genetic disorders, changes of neurotransmitters or a deficiency of serotonin. Other factors are caused by biographical factors: early and long-term stress experience, permanent deprivation etc. In addition to this, vulnerability can be found in social and cultural contexts (deprivation, rejection).

In old age, physical health and mobility may become worse due to the death of relatives or friends. Some people have to move to sheltered rooms, others are isolated. A depressed mood in old age is sometimes misunderstood as “normal sadness,” when in fact it has already begun to be depression. Depression in older age often correlates with more serious symptoms over a long time. Nevertheless, it can be treated well. Often, symptoms include headaches, insomnia, poor concentration and problems with memory, weight and anorexia.

Feelings of worthlessness, frequent thoughts about death and suicidal thoughts should be seen as important warning signs. About 10 – 15 % of older people are suffering from depression. In homes for the elderly, the proportion is 30%. Depression in old age is often detected too late, or not detected at all. Regarding the biological level, pharmacotherapy may be useful (antidepress-

sants, which must be dosed lower due to the organic characteristics of age), as well as psychological and social therapy. The diagnosis of depression correlated with mental disabilities is quite difficult, because the symptoms vary at times.

According to Dosen (2010, 260) the following symptoms may be found in adults with severe intellectual disabilities: depressed and sad moods, self-injurious behaviour, impulsivity, withdrawal, panic attacks, rituals, the loss of social skills, inhibition of the motor system, incontinence and physical-vegetative disorders. It is noteworthy that depressive moods, negative self-image, feelings of guilt or suicidal thoughts are rather lacking – they require a higher level of cognitive and emotional development. However, topics such as death or burial (in drawings) may occur. If these or other symptoms occur, it is important for their educational environment to look for possible triggers of the depressive episode. These can be caused by moves, changes in living and employment situations, emotional stress such as the death of a parent, being placed outside of the existing type of housing and so on. The depressive symptoms often occur weeks or months after the stressful situation. In people with moderate intellectual disabilities, we find the following symptoms: sadness (expressed verbally or by facial expressions), loss of interest and initiative, anxiety, irritability and aggressiveness, sometimes self-injurious behaviour, disorders of sleep or nutrition, constipation, talking about death, etc.

The stressful events that lead to depression are similar to those just mentioned. With a slight intellectual disability, the symptom profile is similar to that of the rest of the population: behaviour problems, loss of drive, negative self-esteem, guilt, suicidal expressions, vegetative disorders, a decline of cognitive functions etc. Suicide attempts, however, are comparatively rare (but not suicidal statements). While standard depression scales are often not useful due to the associated intellectual overload, diagnostic criteria for depression have been established by Pary et al (1999). Also, the application of a so-called “tuning curve” can be helpful.

The treatment of depression in people with intellectual disabilities includes physical, psychological and social measures. On the somatic level, treatment usually includes antidepressants, and selective serotonin reuptake inhibitors (SSRI) are especially used. They show fewer side effects than so-called tricyclic antidepressants (attention should be paid to constipation, obesity and development of metabolic syndrome). Measures for regulating sleep, light exposure, exercise and relaxation exercises can also be counted as physical therapies. The psychotherapeutic treatment is primarily focused on support. Particular consideration must be given to the quite low capacity in older people with

additional disabilities. We should protect the concerned persons from overload. Self-esteem can be strengthened by preparing the foundations for skills, positive reinforcement and encouragement. In pedagogical and social therapy, it is important to focus attention on deficits as an expression of depressive disorder. Also, we have to improve self-esteem and should be helpful in critical situations. A successful measure of closeness and distance as well as inactivity and withdrawal on the one hand, motivation, stimulation and exposure on the other hand are helpful (Meinert and Wilking 2008, 84 ff.).

Depression in people with intellectual disabilities in old age is often misdiagnosed or not recognized. This is reflected in the fact that antidepressant drugs are given significantly less often than neuroleptics for “disruptive behaviour.” However, those drugs are often prescribed (Koniarczyk and Henniker 2003). Educational monitoring and support for people with depression and retardation is an important task. George Theunissen (in: *Special education...*, online) points out the necessary forms of support: *Teaching everyday work, the requirement of an adequate daily structure, neither under – nor over-demanding activities, assertiveness training, cognitive re-thinking, social learning, guidance of consultants and employees, advice how to construct a viable social network and basic features of helpful contact with depressed people at risk.*

## 5. DIABETES IN ELDERLY PEOPLE WITH INTELLECTUAL DISABILITIES

Elderly people with and without disabilities may suffer from type two diabetes. To prevent this disease, it is necessary to reduce weight and to change nutrition habits. In short, it is necessary to change their lifestyle. This applies to all vulnerable people. The motivation for a “body-promoting lifestyle” and activating a “Mediterranean diet” is independent of an underlying disability. At the same time, parameters such as isolation, lack of information or a lack of alternatives and stressful life habits are considered.

According to Rey-Conde and Lennox (2007), diabetes type 1 is about 35 times more common in people with intellectual disability as compared to the general population. The factors for type 2 diabetes are the same in people with intellectual disabilities as for other people, being the following: old age, lack of physical activity, obesity. Intellectually disabled people seem to have an

increased risk of this illness. Consequently, the first thing is that physical activity should be trained by health care providers. Unfortunately, many health care providers do not seem to be educated to support those clients in a specific way, explaining in a clear way that exposures can be understood. It is very important to respect people with intellectual disabilities by using clear and direct speech, to use real and familiar examples, to use body language and so on. Rey-Conde and Lenox come to the following conclusion: “The many and varied tasks involved in the daily management of diabetes are complicated in people with intellectual disability. Furthermore, people with these conditions often fall into a low-resource-group with limited care facilities. It is essential that these people receive the coordinated support of carers in health care providers...” (Rey-Conde and Lennox 2007,18).

In a project of the Catholic University of Northern Westphalia, department of Münster, attended by an educator, a social worker, a nurse and a doctor (the author), eight people with mild and moderate intellectual disabilities and type 2 diabetes were trained intensively over a period of six months. The training included topics such as basic knowledge about diabetes, treatment of diabetes, administration of oral drugs and insulin, diabetes-related diet basics, consecutive damage in diabetes and its prevention (including “diabetic foot”), physical activity in spite of diabetes and many others. In addition to a “clear and simple” language, symbols and interactive games are very important. Using an illustrating figure for the clients, insulin was compared with a key to open a door (to the cell) to ensure the transport of sugar to the cell. In another figure, the pancreas was compared to a sponge that can drop “water content” or not – which has been associated with depletion of Langerhans’ insulin-producing cells (this picture was so impressive that there was a severe grief reaction of a participant). The medication can be supported and visualized by a simple structured day-calendar, the necessity of washing hands before insulin administration can be shown by photography.

The dietary advice often has to be administered in situations of common cooking and eating, and may be supported by pictures or by a “food-memory game” in which certain kinds of foods are associated with each other and recognized (for example, all corresponding to a “bread unit”). The inspection of food was also clarified. The instructions were combined with practical exercises. The instructions were in simple language, and the psycho-educational approach was published in a book (Redmann et al. (2007): *Living with Diabetes. A Guide for Diabetics with Learning Disabilities and Their Assistants*). In a second edition, this book will not only be offered to mentally handicapped

people but also to people with speech difficulties, with an immigrant background and to older people with mild states of confusion.

## 6. EDUCATIONAL APPROACHES IN MONITORING AND TREATMENT

On the first and basic level, existential and essential needs of the patients (food, care) must be satisfied. The second level involves promoting and monitoring psychosocial processes, such as social participation in group processes, motivation, daily activities and so on. On the third level, educators can work therapeutically and perform training activities for depression, exercise training in Alzheimer's disease or psycho-education for diabetes. There is need for assistance in addition to primary care and therapeutic aspects, restoring emotional balance in spite of and by using the disease correlates with the educational approach: respect and autonomy despite increasing dependence, restoration of confidence in spite of functional loss. Educational interaction may establish closeness and distance, stimulation and relaxation, expansion of the behavioural repertoire, extending or limiting social and motor activities, and acceptance of responsibility, among other things.

Pedagogues offer specific treatment, linked to the cognitive capabilities of their clients, considering their emotional development, needs and motivations. They set limits, work in the present situation, accept the client's personality and consider specific needs such as short time meetings or difficulties in concentration and a slow curve of learning. Of particular importance is milieu therapy. We can distinguish between the internal and external environment. The external environment contains the structural conditions, retreat, single rooms, meeting rooms and so on. It is necessary to focus the infrastructure of the residence (walking routes in the case of dementia, marking of toilets and other rooms by photos and other visual anchors, accessibility, adequate light without glare, etc.). The internal environment is characterized by the daily routine, issues such as how to deal with each other, to accept rules, the design of free time and structured time, the celebration of festivals, the style of communication, personal attention, including regulations of closeness and distance, etc. Ultimately, to establish the internal environment, both are involved: the educational staff as well as the nursing and caring staff. Sometimes it is the task of the pedagogues to reflect this process and to offer supervision,

if necessary. Other tasks for the educational staff are training the team or the establishment of networks outside the residential facility.

Working with the client's biography - a biographical approach may be useful to cope with illness-related crises - it may be helpful to discover recourses and to honour the life experience of the clients. As already mentioned, in some client's biographies, we find stressful events. So a special feeling and a good methodological knowledge is required of the pedagogues.

## 7. CONCLUSIONS:

### EDUCATION IN AN INTERDISCIPLINARY CONTEXT

People with intellectual disabilities, even if they are physically or mentally ill in old age, should remain in their traditional environment. Therefore, it is not useful to bring them from an institution for the disabled into a residential facility for the elderly just for cost reasons. Institutions primarily for disabled are increasingly involved with problems of older age and age-related illness. The structures of the institution and the staff must change. In short: geriatric nurses will work together with educators (health educators, special pedagogues, social workers with special training). The demands of the employees are partly different, but certain areas overlap, as shown in Table 1.

Tab. 1: Requirements for employees in institutions for disabled and elderly people (Taken from Ding-Greiner and Kruse 2010, 50, modified and translated by Hülshoff)

Common requirements, tasks and areas of problems	Requirements, tasks and areas of problems in institutions for the elderly	Requirements, tasks and areas of problems in institutions for the disabled
<ul style="list-style-type: none"> <li>- openness to change</li> <li>- increasing needs for support and care</li> <li>- additional qualifications</li> <li>- high effort for documentation</li> </ul>	<ul style="list-style-type: none"> <li>- changes of mood of the residence</li> <li>- maintenance of appropriate closeness and distance</li> <li>- adequate time for (social) care is not provided by law</li> </ul>	<ul style="list-style-type: none"> <li>- excessive demands in care</li> <li>- loss of independence of the inhabitants</li> <li>- increased time spent on nursing care</li> </ul>

In the future, care for the elderly will include intense social monitoring, the perception of emotions of the clients and the regulation of closeness and distance. On the other hand, caregivers in institutes for disabled people will consider the requirements of physical or mental disorders of old age. Professionals of both groups must be open to changes in their jobs.

Traditional care for the elderly mainly deals with basic care, medical and nursing care for physically and mentally frail people. The staff in institutions for disabled, e.g. pedagogues and caregivers, is mainly responsible for education, promoting and educational support. This also includes structuring of daily living, knowledge of the conditions the clients are living in, and their biography. Pedagogues establish care plans and work together within several different disciplines.

All methods and approaches, previously mentioned, such as diagnosis, monitoring, rehabilitation or education, are subordinated to the main target: a life lived with dignity!

These aspects of the educational approach are not exclusive – geriatric nurses act holistically as well: they consider the life history of their clients and work with them physically, psychologically and in a social manner. So it is necessary that all professional groups learn from each other, join together, describe similarities and differences of their actions and formulate synergistically valid action for the benefit of their clients.

At the Catholic University of Applied Sciences' division in Munster, for many years we have formed parallel courses of special education and social work (as of two years in undergraduate courses). In a consecutive master's degree program, which deals in particular with special education for disabled adults and senior citizens, gerontological and geriatric issues will be especially deepened in advanced research such as in special projects. Currently, a program of "nursing studies" is going to be established. It will start next year and focuses – in addition to basic care – on care for elderly disabled people. Although those courses are independent studies, there is the possibility that special pedagogues, social workers, nurses and geriatric nurses will join each other, will speak together and will get information on working together in their job with people with intellectual disabilities in old age.

Overall, there are new challenges and important treatment options for special pedagogues and mental health workers in their work with people with intellectual disabilities, whose health becomes worse in old age.

## REFERENCES

- Alvarez, N. (2010). *Alzheimer Disease in Individuals with Down Syndrome*. <http://emedicine.medscape.com/article/1136117-overview>, updated Jun 16, 2010.
- Carmeli, E., Kessel, S., Coleman, R. et al. (2002). Effects of a Treadmill Walking Program on Muscle strength and Balance in Elderly People with Down Syndrome. In: *Journal of Gerontology, Series A: Biological Science and Medical Science* 57 (2), M 106-M 110.
- Coppus, A./Evenhais, H. et al. (2006). Dementia and mortality in persons with down's syndrome. In: *J. of Intellectual Disability Research*, 50. Jg., H. J., 768-77.
- Deb, S., Hare, M., Prior, L. (2007). Symptoms of dementia among adults with Down's syndrome: a qualitative study. In: *J. of Intellectual Disability Research*, 51. Jg., H. 9, 726-39.
- Dieckmann, F., Giovis, L., Schäper, S., Schüller, S., Greving, H. (2010). *Vorausschätzungen der Altersentwicklung von Erwachsenen mit geistiger Behinderung in Westfalen-Lippe*. Edited by KatHO-NRW, Münster.
- Ding-Greiner, C., Kruse, A. (Hrsg.) (2010). *Betreuung und Pflege geistig behinderter und chronisch kranker Menschen im Alter*. Beiträge aus der Praxis. Stuttgart.
- Dosen, A. (2010). *Psychische Störungen, Verhaltensprobleme und intellektuelle Behinderung. Ein integrativer Ansatz für Kinder und Erwachsene*. Göttingen, Bern.
- Gitschmann, P. (2003). Ältere Behinderte zwischen Behinderten- und Altenhilfe. In: *Informationsdienst Altersfragen* 30 (5), 2–6.
- Haveman, M., Heller, T., Lee, L., et al. (2010). Major Health Risks in Aging Persons With Intellectual Disabilities: An Overview on Recent Studies. In: *Journal of Policy and Practice in Intellectual Disabilities* 7 (1), 59–69.
- Haveman, M., Stöppler, R. (2010). *Altern mit geistiger Behinderung. Grundlagen und Perspektiven für Begleitung, Bildung und Rehabilitation*. 2. Aufl. Stuttgart.
- Hennicke, K. (Hrsg.) (2000). *Modelle spezialisierter psychiatrischer Hilfen für psychisch kranke Menschen mit geistiger Behinderung*. Materialien der DGSG, Bd. 1, Berlin.
- Hülshoff, Th. (2010). Gesundheitsförderung für alle – Inklusion in Zeiten von Gesundheit und Krankheit. *Teilhabe*, 1/2010, Jg. 49: 2-3.
- Hülshoff, Th. (2010). *Medizinische Grundlagen der Heilpädagogik*. 2. Aufl., München, Basel.
- Hülshoff, Th. (2008). *Das Gehirn. Funktionen und Funktionseinbußen. Eine Einführung für pflegende, soziale, pädagogische und Gesundheitsberufe*. 3. Aufl., Bern, Göttingen.
- Hülshoff, Th. (2006). *Emotionen. Eine Einführung für beratende, therapeutische, pädagogische und soziale Berufe*. 3. Aufl., München, Basel.
- Hülshoff, Th. (Hrsg.) (2004). *Neue Erfahrungen. Bildungs- und Freizeitangebote für Menschen mit Behinderung*. Freiburg i. Br.
- Koniarczyk, M., Hennicke, K. (Hrsg.) (2003). *Psychopharmaka bei Menschen mit geistiger Behinderung. Eine kritische Standortbestimmung*. Materialien der DGSG, Bd. 5, Berlin.

- Meins, W. (1995). Depression und geistige Behinderung. Ausgewählte Ergebnisse einer Studie. In: *Geistige Behinderung* 3/95, Marburg: 209-10.
- Meinert, Th., Wilking, E. (2008). *Affektive Störungen*. In: Schanze, C. (Hrsg.) (2008). *Psychiatrische Diagnostik und Therapie bei Menschen mit Intelligenzminderung. Ein Arbeitsbuch für Ärzte, Psychologen, Heilerziehungspfleger und-pädagogen*. Stuttgart: 84-93.
- Pary, R. J., Levitas, A. S., Hurley, A. D. (1999). Diagnosis of Bipolar Disorder in Persons with Developmental Disabilities. *Mental Health Aspects of Developmental Disabilities*, 1, 148-53.
- Redmann, V., Goldbach, M., Fließ, B., Hülshoff, Th. (2007). *Mit Diabetes leben. Ein Ratgeber für Diabetiker mit Lernschwierigkeiten und ihre Begleiter*. Freiburg i. Br.
- Rey-Conde, T., Lennox, N. (2007). Delivering diabetes care to people with intellectual disability. *Diabetes Voice*, Vol. 52, Issue 2.
- Rey-Conde, T., Lennox, N., McPhee, J. (2005). Diabetes and intellectual Disability: Perceptions from People with Disability and their Supporters. [http://espalibrary.uq.edu.au/view/UQ:9458\(2.5.2011\)](http://espalibrary.uq.edu.au/view/UQ:9458(2.5.2011)).
- Schäper, S., Schüller, S., Dieckmann, F., Greving, H. (2010). Anforderungen an die Lebensgestaltung älter werdender Menschen mit geistiger Behinderung in unterstützten Wohnformen – Ergebnisse einer Literaturanalyse und Expertenbefragung. – Edited by KatHO-NRW, Münster.
- Schanze, C. (Hrsg.) (2008). *Psychiatrische Diagnostik und Therapie bei Menschen mit Intelligenzminderung. Ein Arbeitsbuch für Ärzte, Psychologen, Heilerziehungspfleger und -pädagogen*. Stuttgart.
- Seifert, M. (1998). Pflege- und Behinderteneinrichtungen im Vergleich. In: *Geistige Behinderung* 3.
- Skiba, A. (2006). *Geistige Behinderung und Altern*. Norderstedt.
- Stoppe, G., Mann, E. (Hrsg.) (2009). *Geriatric für Hausärzte*. Bern.
- Strydom, A. et al. Dementia in older adults with intellectual disabilities. A report on the State of Science on Dementia in older adults with Intellectual Disabilities by the IASSID Special Interest Group on Aging and Intellectual Disabilities, March 2009, online: [www.iassid.org/pff/dementia\\_iassid\\_reportfin%5B1%5D.pdf](http://www.iassid.org/pff/dementia_iassid_reportfin%5B1%5D.pdf).
- Theunissen, G. (2005). Depression und geistige Behinderung. In: *Heilpädagogik online*, Jg. 4, Ausg. 1/04, 34-69.



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