

PEDAGOGICAL AND CORRECTIONAL PSYCHOLOGY

DOI <https://doi.org/10.30525/978-9934-26-146-6-8>

COMMUNICATIVE NEEDS OF PRESCHOOLERS WITH HEARING IMPAIRMENTS: OPPORTUNITIES, SPECIFICS

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Children with hearing impairments are a special category of children with special needs due to the specifics of the conditions that determine these needs during the acquisition of preschool education and ways to provide them.

Special educational needs arise from the need to remove educational barriers. These barriers do not depend on the personality or the specifics of a particular developmental disorder. Educational barriers are essentially the inconsistency of the educational environment with the functional capabilities of the child.

Functionality is determined by a number of factors, not directly by developmental disabilities or preserved health capabilities. Functionality is determined by the ways that are used to compensate for lost or disrupted functions. The effectiveness of ways to compensate for lost or impaired functions does determine the amount of functionality of the preschooler. In this case, the functional capabilities of the child determine the specifics of its activity and participation in the educational environment.

The educational environment, in its turn, is regulated by the requirements of legal documents, staffing, qualification of specialists, the introduction of the principles of universal and special design, the use of individual educational adaptations and modifications.

At the intersection of these two factors, comes a discrepancy that is formed in the form of a barrier. At the same time, for different types of developmental disorders in the same educational environment, similar barriers may arise, while for the same developmental disorders in the same educational environment, different barriers may arise.

When organizing the educational environment of preschoolers with hearing impairments, it is necessary to remove barriers that arise in the establishment of the communication process. Communication is a generative mechanism on which the educational process is based. Just the effective communication between all participants in the educational process ensures the achievement of the requirements of the Basic component of preschool education. Communication is the main mechanism for transferring knowledge to the younger generation from the older. Barriers in communication are the main and most common type of mismatch between the communicative functionality of preschoolers with hearing impairments and the educational environment.

At the same time, barriers may not arise under certain conditions. This is observed in cases where the functional, namely the communicative capabilities of the child with hearing impairments correspond to the communicative characteristics of the educational environment. In particular, when a child with hearing impairments, born and raised in a family that uses sign language as a means of communication, enters a preschool institution whose specialists use sign language as a means of communication. In these circumstances, despite the child's hearing impairment, there will be no barriers in the educational environment. The child will master the content of preschool education similarly to preschoolers who hear in the conditions of mass educational institutions.

Therefore, special educational needs do not arise directly from the developmental disorder itself. It is in the case of inconsistency of communicative opportunities and characteristics of the educational environment the communicative educational barriers arise in preschoolers with hearing impairments.

Communicative functional capabilities of preschoolers with hearing impairments are determined by the compensating features for difficulties in communicating with the child, which were used in the family circle.

If the family tries to use methods of communication with the child, which are based on impaired auditory perception, thus «adapting» the child to the family environment, then communication barriers will be formed in the family environment.

Thus, the communicative functionality of a preschooler who grew up in such conditions will be limited by the degree of functioning of auditory perception and technologies for its enhancement (hearing aids, cochlear implants, etc.).

Under these conditions, it is necessary to evaluate the effectiveness of compensating methods for impaired auditory perception in the preschool educational institution. A sign of effectiveness is the success of the process of

communication with the child. This is determined by the ability to achieve the goal of communication – to fully and meaningfully convey information, share thoughts, emotions, impressions, etc. of communication participants. If the technologies of hearing aids allow to fully compensate for the impaired auditory perception, the educational environment should be built on its basis.

If the family has developed an effective way to compensate for hearing loss based on preserved health opportunities – visual perception through the use of visually oriented communication language – sign language, the educational environment should become a sign language one. Accordingly, the educational environment of a preschool institution should provide sign language communication as a basis for a child with hearing impairments to obtain preschool education.

Given the differences in the communicative needs of preschoolers with hearing impairments, groups in preschool education should be divided into types of communicative compensatory educational environment: verbal educational environment focused on providing communicative needs by compensating for impaired auditory perception for free speech perception; sign language educational environment, which is focused on providing communicative needs by establishing sign language communication in the educational process.

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DOI <https://doi.org/10.30525/978-9934-26-146-6-9>

КОМПЛЕКСНИЙ ПІДХІД ДО ДІАГНОСТИКИ ДІТЕЙ РАНЬОГО ВІКУ З ООП

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Досвід ранньої допомоги дітям заснований на багаторічних дослідженнях, які доводять, що грамотна організована рання корекційна робота здатна попередити появу вторинних відхилень у розвитку, забезпечити максимальну реалізацію реабілітаційного потенціалу, а для значної частини відкриває можливість включення їх в освітній потік.

Обов'язковим елементом ранньої допомоги є діагностика розвитку дитини. В даний час існують кілька підходів до діагностики розвитку дітей раннього віку як в західній, так і у вітчизняній науці. Однак основним і загальним критерієм в діагностиці залишається комплексність і глибина.

Застосовуваний комплексний підхід до діагностики, повинен включати клінічні, параклінічні, психологічні та педагогічні дослідження. Клінічне дослідження дитини проводиться традиційними клінічними методами. Аналізуються скарги на стан здоров'я, поведінку дитини, вивчаються анамнестичні дані, проводиться огляд з аналізом соматовегетативних і неврологічних симптомів, оцінюється психоневрологічний статус.

Дані клінічного обстеження доповнюються даними параклінічних досліджень, що дозволяє скласти точніше уявлення про стан