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EXPLORING PROFESSIONAL BOUNDARIES: A SHIFT TO INTER-PROFESSIONAL EARLY CHILDHOOD INTERVENTION PRACTICE IN LITHUANIA

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Abstract. *A vast body of literature is focusing on the interdisciplinary approach in the field of early childhood intervention (ECI) practice, however inter-professional relations challenge traditional understanding of professional role and identity. The article contributes to the discussion about the value and the pitfalls of inter-professional cooperation in the field of ECI and its possible effects on family and child life. The aim of the research was to explore what competences professionals representing different fields perceive as most important for successful inter-professional collaboration. The study was based on experts' evaluation (questionnaire). An analysis of the data revealed the importance professionals allocated to opinion-sharing in the emerging early childhood intervention inter-professional teams as well as a lack of attention to the parents' voice, which indicates the need for further cohesiveness – a shift from a polylogue of different disciplines to an inter-professional culture.*

Keywords: *early childhood intervention, inter-professional relationships, parents, professional boundaries, shared competence.*

Introduction

A vast body of literature (Peterander, 2003a, 2003b; Pizur-Barnekow et al., 2011) is focusing on the interdisciplinary approach in the field of early childhood intervention (ECI) practice. There is little doubt that any person or family in a difficult personal, professional or social situation benefits best from the support of a team of professionals (Peterander, 2003a; Inkilä et al., 2013). *Professional role boundaries in some professional fields (e.g. health) have always been dynamic, though exhortation towards new inter-professional roles and cultures is more recent and global*[1]. There is significant evidence, that inter-professional relationships and learning from each other does produce positive outcomes for the participants in terms of changing attitudes towards another profession, increasing knowledge of inter-professional cooperation and enhancing collaborative behaviour (Reeves et al., 2010).

A prominent strand of this research has been the study of professional identity and inter-professional relationships. It is admitted, that the competence of inter-professional cooperation presupposes constant communication, the

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[1] www.srhe.ac.uk/conference2012/abstracts/0094.pdf

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ability to transfer professional information in such a way that it is understandable and meaningful to others (Thompson, 2013; Freeman & Vakil, 2004). It also implies the attitude to learn – that is, to reflect and challenge one's own professional information and to review the gist of the work or professional paradigm (Mitchel et al., 2010). From an epistemological perspective, knowledge is not a fixed or unquestionable end product, but is negotiable and constructed through cooperation (Ampartzaki et al., 2013).

The international debate on professional identity and inter-professional relationships has, however, not fully considered how challenging the overcoming of traditional professional boundaries can be in the new type of inter-disciplinary practices in a specific socio-cultural context (e.g. in post-soviet Lithuania). In this context we *aimed* to analyse how professionals from different fields working in the field of ECI see and interpret their professional collaboration through the expression of the expected competencies and those observed in real situations of inter-disciplinary teamwork. The exploratory study, including analysis of experts' training portfolios and questionnaires, has been used as a *method* of the research. Using exploratory research we as researchers sought to understand better the interprofessional collaboration in the field of ECI. An exploratory research was an attempt to determine if the results might be explained by a currently existing theory. For the analysis of professional roles and competencies needed in ECI the constructivist approach, namely Bourdieu's conception, has been employed. In doing so, it is envisaged that a stronger awareness of inter-professional relationships could lead to improved professional dialogue, as well as the promotion of new forms of partnerships and a new focus in the development of inter-disciplinary training programmes.

The research presented in this article has been implemented in two stages: first stage of the research aimed at the analysis of a training content of different professionals and was undertaken in 2011; the second stage aimed to explore how ECI professionals interpret their professional roles in teamwork through an articulation of the assumed and observed in reality competencies. The second stage was undertaken from September, 2012 to March, 2013.

Ethical considerations. The participants were informed about the research aims, methods and the use of the results before the research started. Confidentiality of their personalities was assured. In order to respect the privacy and autonomy of the specialists only those who were willing to took part in the research.

The development of early childhood intervention in Lithuania

In Lithuania, the system of early childhood intervention/ ECI for very young children (0-3) in need and their families started to be established in 1996. This system supplemented the educational support for children aged from 3 to 7

and employed the approach of *disability prevention*. The services of ECI are organised according to the teamwork principle. In general, the ECI system in Lithuania is mostly focused on therapy given to the child (Ališauskienė, 2010). In recent decades the prevailing traditional child-centred and therapy-based orientation is shifting from a *deficit model,* focused on the child's disorder, to a *social model*, orientated towards the systemic support for a child and a family, positive development of the parents/ child relationship, the involvement of parents in the process of intervention and the creation of links between the family and community (Ališauskienė, 2005). Based on the new documents from 2011, and new initiatives the focus in ECI has shifted from the child to a child in his/her family as a system, and to a wider context. The focus on the ecology of the child and family has challenged the traditional roles of professionals. Professionals of different fields/ agencies need to learn to work together and develop a shared team competence: to cooperate in formulating aims, tasks and intervention procedures, and to cooperatively evaluate the outcomes of the intervention. The inter-agency and multi-disciplinary cooperation did take place in ECI services a couple of decades ago, but not on a regular basis and it depended more on a voluntary initiative and not on the inter-professional paradigm.

Reflecting on the past experiences, it is evident that the role of a professional was strictly defined by the precise set of functions described in a certain professional code and did not foresee inter-disciplinary cooperation nor flexibility in professional roles and functions. The emphasis on professional identity was strengthened by the historically developed "niche" of certain professions and their status and prestige in society. In this aspect the discussion can be based on P. Bourdieu's conception of *habitus,* capital (knowledge, linguistic, cultural, etc.), "practical theory", which emphasizes virtuous interactions between individuals (King, 2000). Bourdieu's practical theory offers a way out of the impasse of objectivism and subjectivism by focussing on the inter-subjective interactions between individuals (ibid). According to Bourdieu, "the habitus, the product of history, produces individual and collective practices, and hence history, in accordance with the schemes, engendered by history" (Bourdieu, "Outline of a theory of practice", 1977, p. 82). The concept of habitus implies that "all meaning is socially constructed and culturally arbitrary" (McKnight, 2012, p. 83), which also means that habitus implies power and privilege as well as the reproduction of existing relationships and / or structures. *Carpenter & Phil (1997) refer to tensions that arise when professionals mediate their identities as professionals, increasingly as members of integrated service teams.* The inter-disciplinary cooperation in ECI might be problematic, when professionals encounter a variety of complex new roles in multi-service settings.

Apart from the philosophical framework of Bourdieu the arguments of Anning et al. (2006); Osgood (2012) (in Payler & Georgeson, 2013) about the historically developed social status and power of a certain profession, deeply

rooted cultural differences and lack of trust between professional groups (Watkin et al., 2009) is also fully applicable in Lithuania.It is a country with a short history of inter-disciplinary teamwork in ECI, but a long history of fundamental and prestigious disciplines such as medicine, and later – psychology. The legislative documents related to professional requirements for specialists of different fields working in multi-service settings (e.g. ECI centres) show that the competence of cooperation is mostly stressed in the requirements for professionals of social fields (social pedagogues, psychologists, etc.), but not in those of medicine. However, professionals from different fields are part of the newly developed multi-professional ECI teams and their participation might have influence on the characteristics of inter-professional relationships and cooperation.

Individual professional competencies *vs* mutually shared team competence

ECI professionals working in teams come from different professional fields and provide support to vulnerable persons, e. g. young children with developmental difficulties and their families. The requirements for professional competence in this area are very high – professionals need specific knowledge and skills, an inter-disciplinary approach and have to be able to create supportive and empowering culture in the organization. Team building approaches require shared principles, objectives and working strategies, that is, shared competencies, necessary for ECI. Moreover, in order to communicate, team members need to develop common meanings and use a common language. This allows for a common knowledge creation (cognitive factors) determining the mutually shared conception of the team (Bossche et al., 2006). Along with the cognitive competence, technical (skills) affective competency (attitudes) is also needed in order for teamwork to be effective (Sargeant et al., 2008). It is also true, that the collaborative culture in ECI is influenced by interpersonal relationships among the team members (social factors) (Bossche et al., 2006). The collaborative culture ensures cooperation not only among professionals, as the experts of theoretical knowledge, but between them and the parents, as the experts in the everyday life of their child, whose children need support.

A collaboration culture is based on *communities of practice* – groups of people who share a concern or a passion for something they do and learn from each other how to do it better as they interact regularly and have an opportunity to develop personally and professionally (Lave & Wenger, 1998). The contemporary paradigm of the ECI stresses the importance of communities of practice, though the phenomenon is still not very much discussed in Lithuania. Communities of practice have a distinct identity that is defined by the rules of their professional practice (Ampartzaki et al., 2013, cit. Wenger et al., 2002). Under the circumstances when a community of practice consists of professionals from different fields the cooperation within or amongst such communities

involves the problem of professional boundaries and their flexibility. As a specialist one has to not only be aware of one's professional competence but also be able to cross professional boundaries in order to learn – that is, to challenge one's own professional identity, and thus the creation of a new *habitus* as a set of shared values, traditions and skills occurs. This process is called inter-professional learning and can be described as learning "…with, from and about each other in order to improve collaboration and the quality of care…" (Watkin et al., 2009, p. 152).

The factor of professional *status* plays an important role not only on a macro level (in terms of the profession's status in society), but also on a micro level of decision making. Often a "full picture", consisting of various professional insights is determined by the leader of the service, by the person who provides a direct service to the child or the expert who consults the provider of the direct service (Freeman & Vakil, 2004; Thompson, 2013). However the term "*expertise*" in the context of multi-disciplinary cooperation may be destructive if used to name an *individual* professional, because, according to Bourdieu, it can conceal the "symbolic violence", which implies the imposition of a certain paradigm by the subject with the power. The relevant attitude therefore would be to speak about a *shared capacity or expertise* of a team and a *shared power* (Freeman & Vakil, 2004; Payler & Georgeson, 2013).

In this context it was also important to discuss the role of the family, which was one of the aims of our research. There is a lot of evidence, that family involvement is a significant factor in achieving success in ECI (Carpenter & Phil, 1997; Guralnick, 2001; Peterander, 2003a, 2003b; Ališauskienė, 2005), but many professionals still adhere to the old fashioned paradigm which preferences professional expertise (Block & Block, 2002). Parents' participation in decision making might create an uneasiness among staff, when the meaning and nature of parental involvement lacks clarity. It is not easy to find the balance of power in parent-professional relationships (Shimoni & Ferguson, 1992; Carpenter & Phil, 1997). Reflecting on Bourdieu, parents are the ones who intervene in the interchange of professional *habitus*, and unwillingly complicate their discourse. Along with that (and because of that) the work with the family presupposes the ability to be open-minded and flexible, because of the unpredictable, changing, and "fleeting reality" of family life (Thompson, 2013).

Training content of professionals working in ECI: findings from the first stage of the research

Research design

In order to identify competencies which professionals of various fields gain formally and informally in their professional studies the content of professional training portfolios (N=60) of specialists working in the field of ECI were assessed with regard to the recommendations of the European program

(EBIFF)[2]. Descriptive statistics based on a secondary document analysis were applied with the aim of identifying which knowledge/skill areas dominate in the content of each discipline's professional training and what areas of different professional's training are specific and/or common.

Sixty professionals working in the field of ECI in Lithuania participated in this research stage. The research sample consisted of representatives from different sectors and professionals (providing special educational support: 20 speech therapists, 6 special teachers, 11 physiotherapists; health care professionals: 3 paediatricians, 2 nurses; also, 5 social field professionals; 9 preschool teachers; 4 psychologists) who work in the field of ECI. All participants were females.

Results

The data analysis revealed that the content of professional training is geared towards the sphere in which they operate and is directly connected with their occupation and its specific functions. The dominant areas in addition to those that are in the content of different professionals' training portfolios[3] have been identified (see Figure 1).
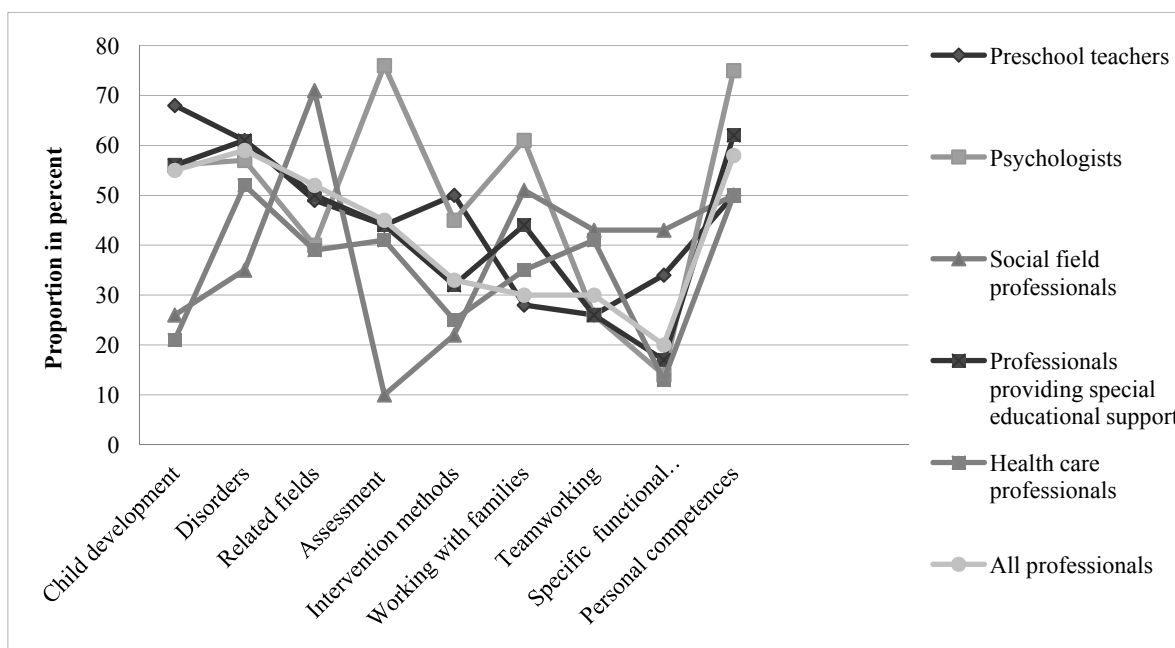
Figure 1. Training content of professionals working in the field of ECI

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[2] EBIFF / Curriculum for the professional training in Early Childhood Intervention, 2006. More information:www.ebiff.org

[3] Professional Training Portfolio is used to store one's career and employment history, qualification and training certificates and any other documentation relating to the professional development (see http://www.surreycc.gov.uk/learning/early-years-and-childcare-service/early-years-practitioners-and-providers/your-professional-development-in-early-years/professional-development-portfolio-for-early-years,-playwork-and-childcare-practitioners).

The dominating competence areas *of preschool educators and professionals providing special educational support* are child development, various disorders, intervention methods and knowledge from related fields (disciplines). Portfolios *of psychologists* working in ECI revealed the following dominating content: ability to assess child's development, to work with families and personal competencies, including good communication skills. The training content *of pediatricians and nurses* is focused on knowledge of disorders and related fields. Analysis of *social field professional* portfolios shows that their training focuses on working with families and specific professional functions[4]. Comparing the portfolios of these professional fields certain discrepancies in knowledge and/or competencies that may hinder inter-professional collaboration became evident. One of the fields that informs about possible misunderstandings is in the area of child development: 68% of preschool teachers comparing with 21% of health care professionals and 26 % of social field professionals had the opportunity to gain knowledge in this field. Another large knowledge gap is manifested in the assessment area. Most competent in this field, according to the data analysis, are psychologists (78%), least are those in the social field professionals (10%). Work with families is the most important issue in early childhood intervention (Shimoni & Ferguson, 1992; Carpenter & Phil, 1997), though it is evident that health care professionals (35%) and preschool teachers (28%) had fewer possibilities to learn to cooperate with parents compared to psychologists (61%) or social field (51%) professionals.

In general, according to the findings, the training of *all* professionals working in the field is mostly oriented to their specific discipline (this is evident in the content of formal training at Bachelor / Master level, as well as in informal and in-service training). The knowledge and competencies acquired by professionals focus on problem identification (different disorders – 59%, child's development – 55%, assessment – 45%) as well as related areas – 52%. However, there is a lack of discipline necessary to successfully select and apply ECI models (including philosophy, approaches, methods – only 33%). There is also a lack of evidence proving the preparedness of those professionals to understand the child's development and its assessment. In *all* professional portfolios we found evidence of certain knowledge in teamwork (30%) and work with the family (30%), but at the same time there is a lack of general competences, independent of the profession and important for ECI practice (such as the ability to cooperate with other professionals and families) as well as specific functional competencies (20%), which are extremely important for inter-disciplinary practice in the field of ECI.

The findings revealed considerable differences in knowledge and skills which specialists gain during professional studies. The results motivated authors

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[4] Due to the function in ECI, due to the target groups, due to institutional requirements, due to legal framework (see EBIFF).

to study further how specialists working in inter-professional areas, such as ECI, perceive competences which are important for the inter-professional team work.

Inter-professional cooperation in ECI: findings from the second stage of the research

Research design

The second research stage was based on experts' evaluation (questionnaire), assuming that specialists working in inter-professional teams can be viewed as experts of inter-professional cooperation. It is also often referred to as practitioner based research and refers to a practical way of looking at one's own work to check if it is as one would like it to be (McNiff, 2002). The research took place during seminars for professionals working in the field of ECI in different regions of Lithuania. Despite the main purpose of the seminars to disseminate new ideas related to a shift of paradigm, we had an intention to improve our understanding of ECI practice (especially, to better understand what competences team members emphasise as most important) as well as to create a learning environment which would allow participants to engage in shared activities, help each other, share information and to build relationships that would enable them *to learn from each other*. The seminars (10 seminars of two days each) were based on U. Bronfenbrenner's ecological approach, which is successfully applied in ECI (Peterander, 2003a, b; Guralnic, 2001; Alisauskiene et al., 2007).

183 participants completed the answers to 2 open-ended questions: *What competences you stress (expect) as most important for successful teamwork in the field of early childhood intervention? What competences you recognise as successfully implemented by your colleagues?* Participants returned 1054 responses (further – propositions) to the first question and 532 to the second. The extended discussions in *Focus groups* based on the answers and reflections of participants, were organised at the end of each seminar. Initial open coding was conducted based on principles of content analysis of the written answers: the propositions were categorized according to their themes. In this process no categories were invented *a priori* (Elo & Kyngäs, 2007). The number of propositions in each category and ratio of each within all propositions was counted in the second stage of analysis. In the third stage of the data analysis competencies related to the category of *team* work were subdivided into smaller sub-categories. The validation of the results was performed by participants and three external experts (all experts have PhD in social sciences and teamwork experience in multi-professional practice). The study was based on descriptive statistics.

Research participants. The research sample was composed of 183 professionals working in the field of ECI in Lithuanian early rehabilitation services, pedagogical psychological services, kindergartens, and children rights'

protection service. The participants were from the following fields:speech therapists (38), physiotherapists (13), special pedagogues (50, including 7 teachers for children with visual impairment, and 11 teachers for children with hearing impairment), psychologists (38), paediatricians (6), pre-school teachers (23), social pedagogues / workers (15). Participants represented all the country (55 areas) and 75 services: 32 pedagogical psychological services from 54 (60% of all services); 19 early intervention services from 38 (50%); 23 pre-school institutions and 1 children's rights service. The demographic profile of the group is almost homogeneous in terms of gender (only 1 male from 183 participants took part) and the average number of years of service as an ECI professional was 10 years. All participants have Bachelor's or Master's degree. Along with professionals, representatives of families (1–2 parents in each seminar) took part in the training.

Results

In analyzing the data, first, it became evident that there was a sharp contrast between the number of competencies the participants could name in their speculative thinking (when participants formulated their expected competencies – 1054 propositions) and in the reflection of practice, when they had to recall the valuable competencies they observed in their team work (532 propositions).

Competences which participants identified as most important for the successful team work in *speculative thinking* were grouped under the following titles: a) team competences (29.5%), b) individual professional competencies (26.3%), 3) personal competences (for instance sincerity, creativity, etc.) – 23.2%. Competences observed *in real* situations of inter-disciplinary teamwork *practice* and stated by EIC members as the most significant and most visible ones were divided as follows: personal competencies – 39.7%, b) team competences (22.3%), c) individual professional competencies (15.2%). It is evident, that internal differences within each category are not considerable, however, the number of referrals to personal competence which are *observed in real practice* is salient (Figure 2).

Many answers had to be summarized under the category of "tautology" (the use of redundant words), because the wording of those propositions just repeated the wording of the question: to the *question what competencies do you need to work successfully as a team* some participants answered: *to work as a team* (6.2% in theoretical and 5.7% in practice reflection).

In speculative thinking just few participants mentioned collaboration with parents (1.8%): 7.5% of them, had, however, observed the value of parents' input for the EIC team work in practice. Other propositions, after analysis, were included in the category "basic communication skills". These were mostly composed of the capability to speak clearly and to listen to others.
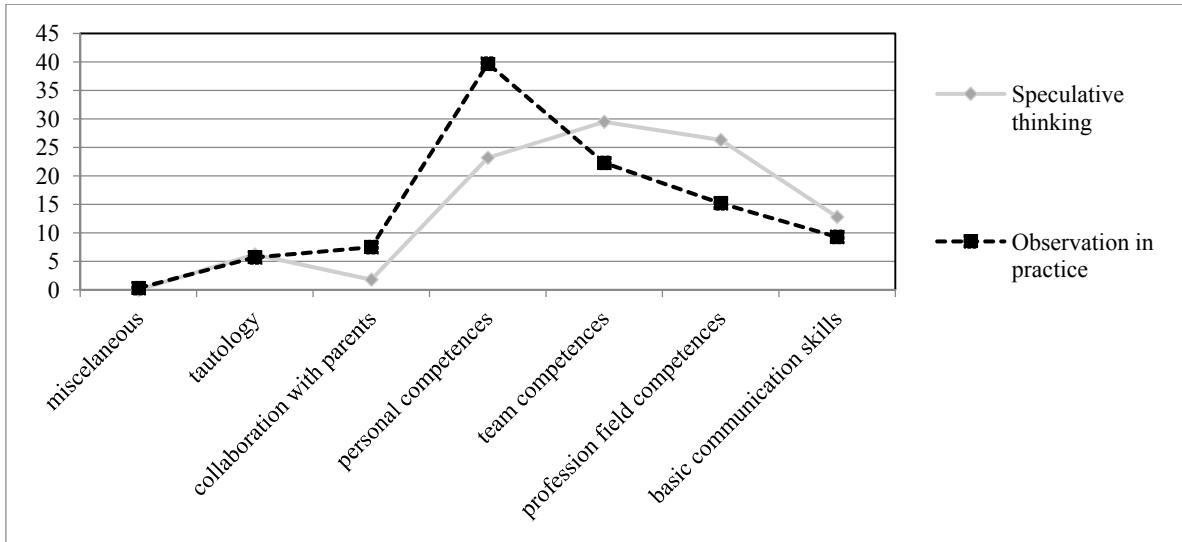
Figure 2. Structure of the competencies important for successful team work

As it was said in the methodology, in the next stage of the content analysis propositions in the category "team competence" were further analyzed in order to identify a structure of the category and frequency of the statements (Figure 3). In the category of team work two subgroups could be distinguished: 1) disposition to work in a team (23.6% of statements in speculative, 13% in practice reflection), 2) instrumental team competencies (76.4 % and 87 % accordingly). The highest number of propositions, both in speculative thinking and in practice observation, revealed the importance which participants allocated to the ability to express and substantiate one's opinion in professional discussion (26.9 % and 35.2 % accordingly). The other important areas in speculative thinking were: tolerance and respect (14.2 %), capability to accept the other's opinion (13.5 %), ability to coordinate actions (11.2 %).
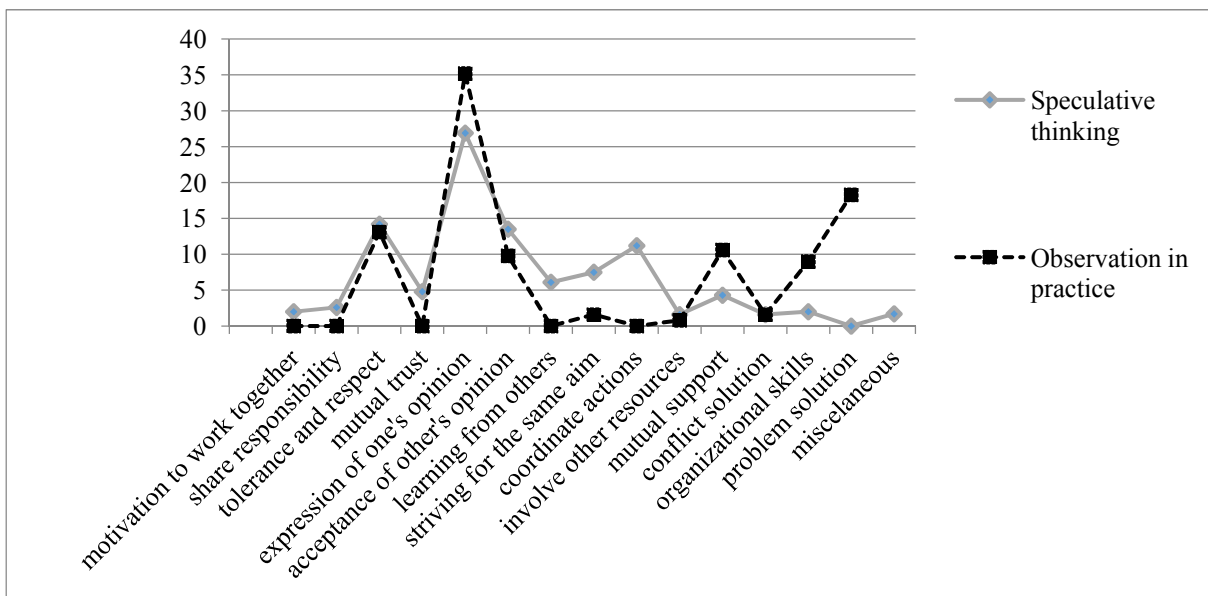
Figure 3. Structure of the team competence

In the analysis of propositions related to a real practice a new category has emerged, which was absent in the speculative thinking: this was the ability to solve problems (18.3 %). The other competencies, frequently mentioned by the participants reflecting their practical observations fell into the categories tolerance and respect (13.1 %), mutual support (10.6 %), ability to accept the other's opinion (9.8 %) and organizational skills (ability to manage time, and to guide the group in discussion, etc. – 9 %).

In general, skills observed by early childhood intervention specialists in their daily practice are more concentrated in their content than the ones they formulated based on their speculative thinking. These main team competences could be summarized as follows: in practice, specialists of ECI appreciate the ability of colleagues to clearly express and value their opinion in solving different professional problems, a readiness to accept other views and do it in the atmosphere of tolerance, respect and mutual support in the team work. After a secondary analysis some statements included in the category "personal competencies" were distinguished separately due to their negative formulation: *not to be afraid to express one's opinion, not to be afraid to make a mistake, not to be superior towards the other, not to perceive comments as a criticism, not to remind others of their mistakes, not to use a "teaching intonation", etc.* Such formulations were found in 10 % of questionnaires.

In some questionnaires the use of specific terms and statement of very specific skills, mostly related to a medical model and to other professional fields was evident. For instance: *ability to talk with a patient, knowledge in medical psychology, ability to design language development program*, etc. Such specific statements were found only in 3 % of questionnaires, but the content of those questionnaires in general was concentrated mostly on the individual professional field and had little to do with team work.

Discussion

The intensity of expectations for the competencies that are important for successful ECI team work are very similar for three categories – *team, individual professional* and *personal* competencies, with a slightly higher emphasis on the team, however this could be affected by the question itself. In response to the question "*what do you think is important..?*" respondents articulate their own *knowledge* of the topic, team work in this case. In the reality of daily practice, personal competencies (sincerity, humor, kindness, etc.) overrun the other two dominating categories which suggest the importance of a general feeling of compatibility in team work. Adopting Bourdieu's term these personal competencies might be referred to as social capital, which in the situation of the inter-professional encounter (and, thus, the contest of the *habitus*) play the role of a "damper" or a "shock absorber", helping the professionals to accept flexible professional boundaries. In his reflection on

Bourdieu, Frank (2012) states, "capital and habitus – intimately related as they are create terms of recognition between persons" (p. 328).

The inter-professional collaboration in ECI services is further illustrated by the group of answers initiated with "**not to**…" Such propositions supposedly manifest certain insecurity in the team and stress the need for a good psychological climate. Therefore, it is no surprise, that an important role in our data was attributed to such preconditions of common work as tolerance, respect and trust in communication. It might also indicate the existing social categorization of professions with an unequal distribution of power in ECI teams which manifests in the fear of ridicule and lack of trust in discussion (Mitchell et al., 2010). Striving for personal (not professional) cohesiveness reduces threats to identity, but also has a potential to refocus the attention – from the task to the personal relationships (ibid.) which is one of the findings of our research.

In the category of the team competence (Figure 3) the dominant (expected as well as valued in practice) competence is the **ability to express one's opinion**. This preference can have two implications: on the one hand, it can indicate the professionals' need to learn from each other, on the other – the effort to protect and strengthen one's professional status and the body of professional knowledge. The analysis of training portfolios (see Figure 1) reveals that there are significant discrepancies in such knowledge fields as in the assessment of a child's needs and problems, child development and collaboration with families, etc. Such cognitive heterogeneity in inter-professional groups can lead to misunderstandings, affective conflict and defensive behavior (Mitchell et al., 2010). Bourdieu speaks of the power of an institution (in our case represented by a particular professional) not only to communicate what the other's identity is, but to impose it on the other informing "in authoritarian manner what he is and what he must be" (Bourdieu, 1991, p. 121, in McKnight) and also, "to discourage any attempt to cross the line, or to transgress..." (Bourdieu, 1991, p. 336). As Frank states, "humans do compete for capital and, often in the same activity, they work to achieve mutual understandings and excellence in particular practices for their inherent value"… (p. 325).

According to Anderson et al. (2010), Mitchell et al. (2010), professionals from different fields operate distinct knowledge that is embedded in the **language** the profession uses. Professional language, a kind of linguistic capital, symbolizes access to professional power and creates a particular discourse which helps to reproduce a particular practice or *habitus*. As knowledge is transferred through expressive language it explains the high value respondents in our research allocated to the expression of one's opinion. A monopoly of knowledge may become a barrier when professionals "fail to openly consider information or perspective that threatens their dominant paradigms" (Mitchell et al., 2010, p. 14). It is evident (Figure 1) that there are gaps as well as overlaps in competencies developed within the framework of different professions.

Therefore, sharing of knowledge across professional boundaries is essential in order to cooperate effectively (Anderson et al., 2010). The sharing of meanings and terms also indicates the emergence of a common narrative, which is so important for the development of an inter-professional collaboration culture. However, in the inter-professional team not only the knowledge sharing, but similar problem solving strategies and mutual support are important that the collaboration could be called inter-professional (Olenick et al., 2010). In our research these competencies were not yet evidenced, and little observed in practice.

Figure 1 suggests that in some knowledge and practice areas the bridges have yet to be created to connect possibly different mental paradigms. For instance, one of the first aims of early childhood intervention is to conduct the assessment of the child's and his / her family strengths and needs. According to the first research data, most competent in this area are psychologists (76%), least – social field professionals (10%). Such an imbalance contradicts the principles of an ecological model of assessment and generates doubts as to whether services provided by early childhood intervention teams can be family-centred. In relation to Bourdieu's *habitus*, free sharing of knowledge and, especially, values and approaches is necessary for the "conversion" of professional dispositions embedded in professional cultures. However we haven't found any intention which reveals an *active* disposition to involve others into one's professional field, such as teaching each other's discipline-based knowledge and values (Clark et al., 2007).

The competence "ability to **solve problem**" appeared only in the practice reflection (respondents observed this skill, but did not formulate it in speculative thinking). On the contrary, "ability to coordinate actions" appears only in the speculative thinking. The emergence of the competence that the participants did not think *a priori* indicates that in real practice situations specialists of ECI teams do encounter difficulties which require a common solution. However, as Mitchel et al. (2010) warn, problem solving may be both innovative in inter-professional groups, but also difficult due to semantic misunderstandings which imply the need for an inter-professional narrative and, it might be added – the "conversion" of established *habitus*.

In the general overview of competencies there is an evident lack of attention to the ones which were grouped under the category "**collaboration with parents**". This result is partly explained through the analysis of training portfolios (Figure 1) where the knowledge difference between health care professionals (35% had an opportunity to acquire these skills) and, for instance, psychologists (61%) is evident. The "invisibility" of parents in the respondents' propositions is even more interesting due to the fact that parents having children with disabilities were invited to some seminars in order to create an opportunity for ECI team members to analyse and give voice to the family situation.In this respect, the neglect of the family – which should be the main focus of an ECI

team applying the ecosystem model – generates doubts as to whether the researched teams can be described as inter-professional.

According to the concept analysis, made by Olenick et al. (2010), one of the important features of the inter-professional team is its cohesive work focusing on the service user or how it is "apprehended as co-created at the interface between the service user and the various professionals" (D'Amour and Oandasan, 2005, in Kvärnstrom et al., 2012, p. 288). In our case, specialists of EIC were more focused on each other's competence which suggests another term for the current state of early childhood intervention in Lithuania: it seems more *inter-disciplinary* than *inter-professional*. Bourdieu's term "misrecognition" might be applied here, which implies that in the labyrinth of different professional languages, moderated by the new meanings attached to familiar words, it is too challenging to see parents as partners of the team when much has yet to be learned from each of other (from colleagues, representing different, yet related fields of knowledge). Moreover, the efforts might be put into a reconstruction of professional power relations, mentioned earlier. However, as Anderson et al. (2010) state, "working together through learning from service user insights and experience has proved to be a powerful common currency" (p. 238).

Conclusion and implications for ECI practice

In summary, the training content of professionals, represented in different early childhood intervention discipline fields, reveals discrepancies in some competence areas. In the daily inter-professional encounter this creates a need for constant discourse amongst professionals, sharing of power and "conversion" of traditional professional *habitus*, in general. In the context of the interchange processes that emerge in inter-professional discourse there is a danger of neglecting the important partners – families of children at risk. In order for inter-professional collaboration in early childhood intervention to be successful, parents' voice – in terms of expertise and language – must also be included in the discussion.

The present study has some limitations. Firstly, the participants were chosen using convenience sampling, and the findings of this exploratory research cannot be generalized to the overall situation in the country. Secondly, the findings are based on opinions of professionals representing different professional fields, but no family member took part in the questionnaire. Thirdly, the represented ECI teams were too diverse according to the profession and to the number of representatives. Finally, the questionnaires were delivered to the participants only at the final stage of the seminar, not before it; therefore any advantages occurring from the training could not be identified.

Given the limitations of the current study, a clear future direction is to go on with similar research in other ECI teams focusing on indicators of both

professional and inter-professional support. Family members should be included in all phases of action research in order to gain a family's perception of early childhood intervention teams' services and find out what competencies parents observe and which they perceive as most valuable. The questionnaire should be delivered before the seminar and at the end of the seminar, and the participants should be acquainted with the research results in order to help practitioners to recognize the discrepancies between the desired and current practice.

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INDIVIDUALIZED EDUCATION PLANS: WHAT CHARACTERIZES THE RESEARCH?

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Abstract. *This study illuminates the research question what characterizes the research of Special Needs Education's (SNE's) use of Individualized Education Plans (IEP), during the period 2010-2015? A sample of 11 relevant Norwegian publications has been analyzed by means of these criteria: Type of publication, research method(s) applied, sub-topics focused on and perspectives of SNE. Findings show (1) the amount of the research is still scarce, (2) only three researchers of PhD-level or above have participated in this sample of publications, (3) the sample demonstrates various research methods applied, although document analysis dominates, (4) there is still a need of research looking for catalysts of good planning and using of IEP, (5)the study presents one way of constructing thematic and sub-topical categories, and (6) one needs to validate how the SNE's perspectives of traditionalism and inclusionism influence the outcomes of IEP research.*

Keywords: Individualized Education Plan, literature review, research methods, special needs education, inclusionism, traditionalism

Introduction

The aim of this study is to throw light on research linked to the use of Individualized Education Plans (IEP) within the field of Special Needs Education (SNE). In particular it is essential to highlight this field's research characteristics in Norway. Until relatively lately the school systems in the world based their teaching of pupils on general curriculum programs only - often of a kind of national standard. In the US the IEP was introduced during the 1970s (Aarnes, 2008). In Norway the first signs of the IEP were seen around 1990. The term Individualized Learning Plan (ILP) was introduced in governmental propositions (St.meld. no.54 (1989-90); St.meld. no.35 (1990-91). The latter explicitly stated the purpose of IEP by emphasizing that it should strengthen the education of children and youth with special needs. And the Education Act (§ 5-5) underpinned that an IEP should be worked out for all pupils who receive SNE. Nordahl &Overland (1997:75) presented this definition of IEP:

"An individual education plan should state important issues and principles, related to the individual pupil's needs and readiness of learning and should, based upon the national curriculum's goals and decisions, contain concrete instructions that comprise the total educational situation of the pupil in such a way that the plan is transparent for critical investigation of others, and at the same time possible to implement in practice."

Their definition emphasizes three important aspects that are basic for the teacher to consider when he produces, uses and evaluates an IEP: (1) to have a

thorough knowledge of the needs and readiness of each individual pupil; (2) to adapt the IEP to the goals and decisive values of the school's national curriculum; and (3) to make the IEP useful in practice. Figure 1 illustrates the relation between ordinary education, SNE and IEP. In many cases pupils that have an IEP are taught by a specialist teacher in separate rooms (often a segregated group). If it is only one pupil, he is taught individually in a corner of the common classroom, at least for some periods daily. In some cases a school might practice inverted inclusion where the non-IEP-pupils are included in the group of IEP pupils for some periods.
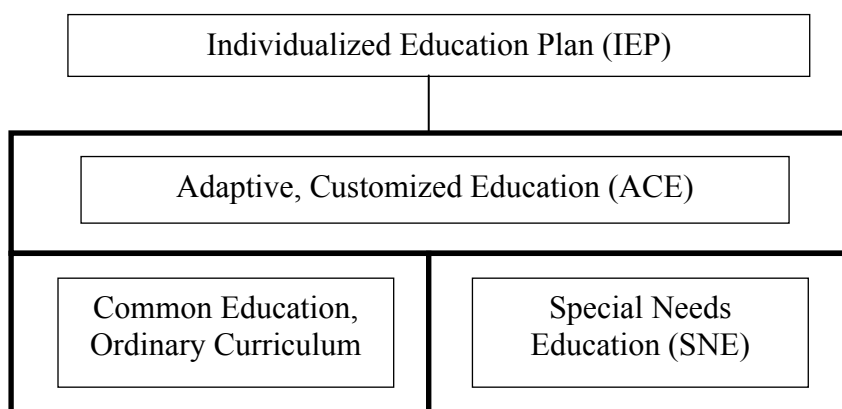
Figure 1. The links between common education, SNE, ACE and IEP
(Based on Nordahl & Overland, 1997:31)

Since the early 1990s different terms have been introduced to describe the IEP-phenomenon. In Norway these designations have been applied (translated to English, abbreviations in brackets): *Individualized Learning Plan (ILP); Individualized Training Plan (ITP); Individualized Development Plan/ Development Plan (IDP/DP); Individualized Customized Teaching Plan (ICTP); and Individualized Education Plan (IEP)*. Different connotations are linked to the various terms.

The number of pupils receiving SNE in Norwegian primary school has increased since the last curriculum reform (Kunnskapsløftet, 2006). In 2006 the figure was approx. 6 %. It stabilized itself at 8.6 % around 2011. The highest registered rate, 11 %, is found in secondary schools (St.meld. no.20, 2012-2013). These figures indicate that the need for formulating and using IEPs in the Norwegian school system is significant. In 2011 Bachke contended that IEPs were much used. One may ask however, is this practice based on thorough empirical research? In 2011 Bachke claimed that the quantity of the research was scanty. Has there been any change during the last 5 years? If still scarce, many questions might be asked: What are the research's qualitative characteristics; what about its sub-topics; which research methods and perspectives have been applied? Thus the research question is: *What characterizes the research of SNE's use of IEP, during the period 2010-2015?*

Before answering this question a description of a categorizing of the research into sub-topics formerly done by Dalen & Ogden (2008) and by Bachke (2011) will be presented. In addition, a Norwegian educator's division of perspectives within SNE will be described. This knowledge serves as a background for analyzing and discussing the findings.

The status of the Norwegian IEP research

The Norwegian research has so far been scarce. Most publications are found in chapters in anthologies of SNE, that is text books for students of the discipline (Rygvold & Ogden 2008); subject-articles in the journal *Spesialpedagogikk*; master-theses; legally linked texts; and in encyclopedias at the Internet. Any recent and thorough summary of this research does not exist. In 2008 Dalen & Ogden (professors of SNE) presented a brief "survey" of important sub-topics described by Norwegian researchers until that year. They included these themes:

(1) The importance and value of the stage of planning was strongly emphasized by the teachers who were involved.

(2) The guidelines for planning an IEP state clearly that the pupil himself as well as his/her parents should be involved in the process. Research showed that the parents wished to be involved. However, in most cases the teachers worked out the plan alone before showing it to the pupil and his/her parents (for signing).

(3) The IEP should be a written document, available for all it might concern. Research showed that teaching based on such a shared document was of a higher quality than education implemented without a written IEP.

(4) The onset of an IEP is a thorough examination of the pupil's abilities and disabilities done by the school psychologist and other educational specialists. Their expert statements were to a certain extent reported to be too abstract and general. Subsequently, the teachers in charge of writing the IEP found them less pragmatic and helpful.

(5) The teachers assessed that they lack necessary competence to work out IEPs. Therefore they asked for both post-qualifying education and supervision.

(6) Research identified some dilemmas connected to the use of the IEP, like the IEP drastically reduced the teacher's traditional space of freedom to do the work in his/her own way; the IEP counteracted the idea of inclusion; in some cases there might be doubt as to who was responsible for working out the IEP: the special educator or the form master.

Bachke (2011) did a smaller review of American IEP-topical peer reviewed articles, sampled from ERIC (EBSCO), published until 2010.It showed that the American contribution of research is larger in numbers, and that the following themes were the most frequently focused:

(1) IEP and goals: The importance of stating, writing and concretizing goals
(2) IEP: Training in writing the plans
(3) IEP: How to make plans that are functional
(4) IEP: What prevents it from being used properly, and how to reduce obstacles?
(5) Information Technology (IT), might it be helpful in practical use of IEP?
(6) IEP-meetings: How to make conversations effective and functional?
(7) IEP and how to improve the empowerment of and co-operation with pupils and their parents, in particular increasing their participation
(8) IEP and ethnicity
(9) IEP and legal issues

Table 1 summarizes the research presented above. It consists of three columns. Column 1 deals with which stage of the IEP-research findings are mostly related to, either the preparation and writing of the plan (row I); or the use of the plan (row II). In addition, there is a row III; other issues. Column 2 relates the six sub-topics mentioned by Dalen & Ogden and links them to the three rows of column 1. Column 3 does the same with the nine American sub-categories. References to some Norwegian master theses published in 2009-10 are included in column two to update it until 2010.

Table 1. A summary of main themes and sub-topics of IEP-research by 2010

Main categories of IEP-research	Examples of Norwegian sub-topics of research until 2010	Examples of American sub-topics of research until 2010
(I) Knowledge related to the preparation and planning stage	The insufficient involvement of pupils and their parents in the planning process	How to improve the empowerment and co-operations with pupils and their parents
	Weaknesses linked to the language and concreteness of the expert statements; Thorbjørnsen (2009)	
	Teachers' lack of competence in writing and making the written IEP-document; Aarvik (2009)	Teachers' need of training in working out the IEPs How to make functional IEPs
	Teachers' emphasis on the importance of a proper planning stage	The importance of stating and writing concrete IEP-goals

(II) Knowledge related to the (use)implementing stage	The written IEP has a positive impact on the quality of teaching; Holst-Jæger (2009)	IT – a helpful tool in practical use of IEPs
	Identified dilemmas in using IEPs	What might be preventive obstacles, and how to reduce them
(III) Other issues		IEP collaborative meetings, how to make conversation effective and functional
		IEP and legal issues
		IEP and ethnicity

Various perspectives of SNE

Haustätter (2007) introduced various perspectives applied in SNE, representing different ways of thinking and acting in the field. The *pathological perspective*, also named the *traditional* or *narrow* perspective (Hausstätter, 2011; 2012), focuses on the biological and psychological deficiencies of the pupil as the main cause for slow learning and inability to benefit from the ordinary educational program.Subsequently the pupil needs special educational approaches that may "cure" or "reduce" his/her insufficient learning progress. The assistance offered is mostly based on methods and tools which have evidentially proved helpful for pupils affected by similar diagnoses. Like patients treated in a hospital, these pupils are offered a segregated educational program both because it will be tailor-made for them and at the same time not disturbing the pupils who are learning at a "normal speed".

The *organizational perspective* looks at dysfunctional learning differently: The pupil's problems are seen as reactions to the organizational systems and structures offered by society. It is argued that most pupils will have arenas where he/she does not appear to misbehave/learn slowly. Subsequently, to assist these pupils one should look for structural solutions that promote solid learning and avoid unsatisfactory systems, like physical hindrances. In brief, the environment should be organized in both an accessible and learning-promoting way for everyone, to avoid any form of stigmatization.

The *social perspective* is partly connected to the latter perspective, but it emphasizes more strongly that dysfunctions are considered a product of how we understand the society: Basically no one is dysfunctional. It is the society that creates barriers for the individual and thereby prevents him/her from proper learning and growth which then leads to marginalization. The aim of this perspective is to avoid exclusion and promote what Hausstätter (2011) calls *inclusionism*. This is the opposite of particularly the first perspective, also nicknamed *traditionalism*. In the analyses of the literature this dichotomy of inclusionism and traditionalism will be used.

Method

Aveyard (2010:1) defined literature review as *"the comprehensive study and interpretation of literature that relates to a particular topic."* It may be more or less systematic. If it is the latter – the so called narrative review, the methods of searching and synthesizing the literature are not or poorly described. If the review is systematic, the methods of searching, critiquing and synthesizing the literature are explicitly stated and rigorously followed. The present study belongs to the latter category.

The literature search has been based on the Norwegian data base ORIA. The Norwegian concept Individuell opplæringsplan (abbreviated IOP) was used and publication period was limited to 2010-2015. The search was done on 17th of Feb. 2015, and resulted in 23 hits. Except for one book-chapter the hits were either master theses or peer reviewed articles. This number is higher than for any previous five-year-period since 1990. Some hits were doubled and some of less relevance. So the total number of analyzed items was 11. The analyses of these items are presented under "Findings" below. The analytic categories used are type of publication; method(s) of research applied; categories of table 1; and Hausstätter's perspectives of SNE traditionalism and inclusionism.

Findings

The sample consists of two types of scientific literature: The three peer reviewed articles, presented firstly; and the eight master theses, presented secondly.

Thygesen et al (2011) did a literature review of white papers and former research articles presenting the effects of SNE, looking at the legitimacy and role of SNE in relation to the general education in schools. Inter alia the researchers argued that special pedagogy is a necessary competence to attain the ideal aim of an inclusive school. In addition they underscore the dilemma of "creating" an adaptive education tailor made plan for each pupil, like the IEP, without at the same time reducing the level of belonging to an inclusive community. Thematically, Thygesen et al dealt mainly with dilemmas of using the IEP; and they linked this to the perspective of inclusionism.

Haug (2011) also dealt with the question of dividing general education and SNE, and how this might affect the education of all the pupils. By means of observing the activities in 45 classrooms Haug found that pupils that received SNE showed a lower level of learning related activity than "ordinary" and clever pupils. Haug interpreted this as if the former pupils had an education of poorer quality. He contended that this might be a side effect of the gap existing between the two professional curricula, special pedagogy and general pedagogy respectively. Also Haug's findings related to the sub-topic dilemmas in using IEP; and his study threw light on controversies linked to inclusionism.

Runde (2013) focused on the sub-topic of IEP and legal matters by means of reviewing laws and legal cases. He looked at the liability of damages and its terms of compensation in cases where the basic resources of SNE had been insufficiently offered by the school owner, i.e. most often the local municipality. Among the flaws, the author referred to the Educational Act statement of §5-5: *"If special needs education is granted, an IEP should be made."* If the IEP lacked, appeared too limited or not properly used, it represented a breach of the legal individual rights of the pupil. Runde's focus on the individual is interpreted as a connection to the perspective of traditionalism.

Nergaard & Hauge (2011) applied a hermeneutic approach to analyze documents like the written IEPs and expert statements and detect how these written papers corresponded, item by item. The findings showed that both the statements and the IOPs referred to the laws and regulations, but in some cases insufficiently. Moreover the aims stated were assessed to be both general and not very realistic. To a certain extent the IOPs were marked by standardized statements which might be a sign of "copy paste" practice among the professionals in charge of writing them. It was concluded that the school faced difficulties in making aims for each pupil, based on the expert statements. Thematically this research linked partly to the sub-topic weaknesses of expert statements, and partly the teachers' lack of skills to formulate aims. One purpose of the study was to look for ways to improve the statements and the aims of IEPs, which attends to the perspective of traditionalism.

Kvilhaugsvik (2011) looked at the statement of aims in IEPS for pupils with dyslexia, and assessed to which extent they were precise, relevant, communicable and evaluable. Among the seven categories of aims she classified, she found only two of sufficiently good standard. Furthermore, she compared the content of the aims with the content required for improving skills of reading. She partly found a match (for decoding text), but also partly a mismatch (for understanding the text). The latter worried the researcher: Is it probable that the aims prevent pupils' progress in reading? Thematically this study belongs to the sub-topic: The importance of stating and writing concrete IEP-goals; and subsequently the perspective of traditionalism.

Halvorsen (2011) analyzed the IOP-documents of pupils in secondary schools who received an education with extended practice due to learning difficulties in theoretical subjects. In addition she interviewed both pupils of two small classes and their teachers, and did field observations during one school-week. The findings showed that the quality of IEPs varied between the classes both in volume, how general the language was, and how concrete the goals and content were stated. The observations underscored that the class with more complete and specific IOP formulated plans experienced a teaching which was more dedicated and relational and of better quality. The same impression was confirmed in the interviews of pupils and teachers, although the two classes were exposed to two different "educational cultures". Thematically the study

supports the positive impact of a detailed written IEP has on the teaching. It focused on the use of the IEP and thereby belongs to the perspective of traditionalism.

Heldal (2012) used analyses of IEP-documents and a questionnaire to caregivers of ADHD-diagnosed pupils to throw light on how the aim of inclusion was expressed in the documents and the level of involvement of the caregivers in the development of the IEP. She operationalized inclusion by means of three areas: to increase fellowship belonging and participation (these two factors were measured by document-reading/-interpretation), and to increase democratization (also enlighten by answers in the questionnaire). She found that the IEPs expressed inclusive elements, cf. the three areas. However, the information statements were difficult to match directly with operationalization which made assessing difficult. The study also showed that the IEPs could be improved to express more clearly how inclusion could be obtained. The caregivers expressed that they were included in the development of their children's IEPs. This finding underpins a variant of the sub-topic "involvement of parents in the planning process", in a positive way. The study's focus on inclusion shows that it mainly belongs to the perspective of inclusionism.

Kvam (2013) combined two methods in order to illuminate how teachers work to accomplish the intents of the IEP. She interviewed a small sample of teachers, and also collected data from a questionnaire of a bigger sample of teachers. Kvam found that IEP proved to be a profitable tool to assure the quality of a customized education in accordance with the pupil's legal rights. Moreover, the study showed how important the teachers' knowledge of each pupil was and also that SNE was organized in different ways. The informants generally reported that the pupils according to their assessment felt included in the school society. The need of more resources to meet the requirements of the laws and regulations was also stated. Thematically the study partly belongs to the sub-topic IEP's positive impact on the quality of teaching; and partly, through the statement about the need of more resources, to the sub-topic how to reduce obstacles. These two sub-topics relate both to the perspective of traditionalism. However, the statement of "felt inclusion" refers to a positive variant of inclusionism, because a proper use of IEP makes it more obtainable.

Olsen (2013) used a survey to enlighten the participation of mothers of kindergarten children in developing IEPs. She found that there was a correlation between the mothers' feeling of influence/participation and their amount of Bourdieu's social capital concept. However, due to a too low number of respondents this could not be generalized. Thematically this is a positive variant of the sub-topic parents' involvement in the planning process. This study was a smaller project under a major project investigating to which extent kindergarten as a public institution promoted integration. In that way it might attend to the perspective of inclusionism. On the other hand, the main finding is related to

positive experiences of participating in IEP-planning, which might be assessed as traditionalistic. So this study bears elements of both perspectives.

Solem (2014) studied what teachers experienced as helpful support when working out an IEP. By means of interviewing a sample of teachers she found that (a) collaboration with the pupils' homes, colleagues, and external experts; and (b) the involvement and arrangement of the management of the school both constituted essential support. However, (c) the "pragmatics" of the expert statements could vary. Thematically this study partly by finding (c) attends to the sub-topic weaknesses of expert statements; and partly by findings (a) and (b) to a variant of the sub-topic importance of a proper planning stage. With its focus on helpful experiences it belongs to the perspective of traditionalism.

Walden (2014) explored by means of in-depth interviews of parents, teachers and principals facilitating and inhibiting factors in the collaboration between home and school in developing IEPs. She found as a facilitating factor the professionals' and parents' dedication for the pupils' thriving and development, which emphasizes the sub-factor of involvement mentioned above. The inhibiting factors were several like lacks of time, unclear structure, blurry roles and unsatisfactory communication between home and school. Thematically this study adheres to the sub-topic of co-operation with parents, partly a positive variant (the facilitating factor), and partly a negative variant (the inhibiting factors). Since it points to possible improvements in the IEP-collaboration, it belongs to the perspective of traditionalism.

Table 2 presents an analytical summary of the findings.

Table 2. Summary of findings, analyzed by means of the theoretical categories

Analytic variable Item	Column I: Type of publication	Column II: Research method(s) applied	Column III: Sub-topics focused	Column IV: Perspective of SNE related to
Thygesen et al (2011)	Peer reviewed article	Document analysis: white papers, laws	IEP-dilemmas	Inclusionism, neg.
Haug (2011)	Peer reviewedarticle	Classroom observations	IEP-dilemmas	Inclusionism, neg.
Runde (2013)	Peer reviewedarticle	Document analysis: white papers, laws, court cases	IEP and legal issues	Traditionalism, neg.
Nergaard & Hauge (2011)	Master thesis	Document analysis: IEPs and expert statements	Weaknesses of expert statements; lack of skills to word aims	Traditionalism, neg.
Kvilhaugsvik (2011)	Master thesis	Document analysis: IEPs	Not good enough wording of aims	Traditionalism, neg.

Halvorsen (2011)	Master thesis	Document analysis: IEPs, field observation, interviews of pupils and teachers	Positive impact of detailed written IEPs	Traditionalism, pos.
Heldal (2012)	Master thesis	Document analysis of IEPs, questionnaire	The inclusion of caregivers in developing the IEP	Traditionalism, pos.
Kvam(2013)	Master thesis	Interviews of teachers, + collection of data from a survey	IEP's positive impact on the quality of teaching, need of more resources to reduce obstacles	Traditionalism, both neg. and pos.
Olsen (2013)	Master thesis	Survey among mothers of kindergarten children with IEP	Positive involvement of parents in the planning process Kindergartens as an institution promoting integration	Traditionalism, pos. Inclusionism, pos.?
Solem (2014)	Master thesis	Interviews of teachers about collaboration with parents, experts, colleagues	Weaknesses of expert statements, proper planning stage important	Traditionalism, both neg. and pos.
Walden (2014)	Master thesis	Interviews of parents, teachers, principals	IEP-collaboration and development promoted by the informants' dedication for the child; + positive involvement of parents	Traditionalism, pos.

Findings commented and discussed

In the following the findings of each of the four analytic columns of table 2 will be commented and discussed, one by one. *Column I, Type of reviewed publications*, is divided into two categories: Referee articles (N = 3); and master theses (N = 8). The total of 11 relevant Norwegian publications, registered during 2010-2015, is higher than any previous five year period since the introduction of the IEP around 1990. This implies primarily that research in this field, although still scant, is slowly increasing. Secondly, the figure 3 indicates that few full-fledged researchers, holding a PhD, are directly involved in this field's research. One should also notice that one of the articles is written by Runde (2013), who is a trained in the legal profession. It emphasizes that the

phenomenon of IEP challenges other professionals than the educators: something which is also indicated by former American research stating that IEP and legal issues is an important topic, cf. table 1. The fact that 8 out of 11 publications are master theses may be seen as a sign of high interest for IEPs in the every-day practical life of schools and kindergartens. Master's students in SNE in Norway often either have years of practice behind them when they reach this level of study, or they do it as a part-time-study, combined with work. Seen in this light, the figure of 8 theses indicates that the research done is solidly founded in issues based in practical experiential IEP-settings. Subsequently these theses, if read, ought to have valid impact on both planning and use of IEPs.

Column II, Research method applied, primarily shows that these 11 studies comprise four methods: Observations (2); surveys/questionnaire s (3); interviews (4) and document analyses (6). Secondly, one should notice that no meta-theoretical review article has been published in Norway during this period. This fact indicates that thorough summaries of previous national and international research related to the IEP are deeply needed. Thirdly, the document analyses concentrate mainly on two types of documents: The expert statements; and IEP-documents. These are beyond doubt the most crucial documents, but there are other IEP school documents to be investigated too, like budgets, plans of disposition of personnel, minutes from meetings deciding the use of resources, minutes from meetings of commitment groups in charge of IEP-planning and –implementation, the SNE-teachers' and form masters' preparatory books/planning and evaluative comments, etc. Fourthly, the samples of the interview-informants show that only one study so far has included the pupils themselves. Fifthly, the scarcity of observational studies is conspicuous to the extent that it is almost equal to a white spot on the map of IEP-research.

Column III, Sub-topics focused, reveals first of all that at large the research published in 2010-15, focuses on the same topics as in table 1. However, there are two major differences: In table 1, most findings are related to problems in planning, writing and using the IEPs, while in table 2 half of the findings are positively pointing to IEP's usefulness and impact on the quality of SNE. The last 5 years research has so to speak looked more for success factors than previous years' research. Secondly, table 1 dichotomized between a planning stage and a implementing stage as main categories, plus a general "other"-category. Table 2 indicates several findings by means of "investigating the IEP documents" themselves. This fact makes it reasonable to suggest a fourth main area of research: the IEP document itself, detached from the stages and processes connected to planning and using. Such a category might, however, be a less valid research object. Because it is separated from the professionals using it, it appears more "dead" and non-dynamic, and subsequently a narrower source of knowledge.

Bachke (2011) pointed to a lack of a separate didactical tool for SNE, which could step by step describe an application of the main didactical factors of aims, content, methods/teaching principles/learning activities and evaluation. One would think that the research of IEPs in use would detect more knowledge about how such factors are applied in SNE. However column III explicitly refers to the aim factor only, and then emphasizes the importance of formulating the goals concretely (cf. Kvilhaugsvik, 2011). I therefore contend that since IEP is a didactical tool, the future research should pay more attention to how teachers and other professionals involved make use of didactical knowledge in connection with IEP work. The IEPs offer a unique opportunity to develop the didactics of SNE.

In *Column IV, Perspectives of SNE,* the figures show a distribution of 8.5 studies belonging to the traditional perspective while 2.5 studies mainly adheres to inclusionism. I interpret the significantly higher figure relating to the former as if most researchers basically believe the IEP is a useful tool which faces some problems (cf. the 4 neg. in the column) that still prevent a full practical functionality. Therefore it is an important research task to identify those obstacles, and possibly point to how they might be overcome. On the other hand, the traditionalism pos. of Halvorsen, Heldal, Solem, Kvam, Olsen and Walden might hint at some success factors, or at least underlining the value of a positive research approach, looking for factors promoting successful practice. The inclusionism-studies might represent a critical methodological approach since it mainly, in particular among the scholars, voices negative side effects of using IEP like making segregation and possibly stigmatization more explicit. However, the voice of the mothers in Olsen's study (2013) might imply that some researchers as well as some actors in this field experience the IEP as promoting inclusion. In other words, they might suggest that there are ways of using IEP which facilitate inclusion. If so, this fact ought to inspire researchers to detect these ways explicitly, and to describe more in detail in which contexts they operate positively and functionally.

Conclusions

The research question was: *What characterizes the research of SNE's use of IEP, during the period 2010-15*? Primarily, this study supports the impression that the Norwegian contribution to IEP-research is still scarce. Secondly, it shows that only a few researchers holding a PhD have participated in this research sample. Thirdly, it reveals a wide use of research methods applied in the reviewed sample of publications. Some researchers have even applied 2-3 methods. However, the fact that half of the sampled reviewed studies have applied document analysis as their main approach underpins the lack of empirical research. It should also be remarked that no research project during this period has been of the longitudinal kind. Moreover, only one study partly

voices the experiences of the pupils. A fourth characteristic is that a systematic research of good ways of formulating the IEP-document to detect catalysts of the planning stage is still missing to a great extent. The same goes for the implementing stage. Until now the focus has been more on the problems, weaknesses and dilemmas. However, this review reveals that there are some signs of studies identifying what might be called "best practice of IEP work". Fifthly, this review has introduced one way of constructing topical categories, both on a general level and implying some sub-categories. This classification will need a broader international review to prove its validity and reliability. For now, it might serve as a starting point for further studies. Lastly, generally few researchers place themselves in a specific perspective of SNE. My attempts to put them into the dichotomy boxes may therefore contain mistakes. However, the unstated perspective of SNE leads me to claim that there is a need for more research on how basic scientific views might affect the findings of any IEP research project.

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CREATION OF THE METHODOLOGY OF THE DEVELOPMENT OF FUNCTIONAL MATHEMATICAL LITERACY IN THE 8TH FORM OF MAINSTREAM SCHOOL

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Abstract.*The article deals with the aspects of the development of functional mathematical literacy of students with moderate special educational needs. Creating the methodology of the development of functional mathematical literacy of students with moderate special educational needs the action research was organized, where 9 eighth form students with moderate special educational needs, 9 parents of these students, 7 teachers of mathematics and 4 special educators participated. It has been found out that the development of functional mathematical literacy of students with moderate special educational needs educated in mainstream schools can be successfully organized when the methodology of its development is based on the combination of the concepts and theories of pragmatism, constructivism, social participation, empowerment, mathematical literacy, practical applicability of mathematical knowledge.*

Keywords: *action research, functional development of students' abilities, mathematical literacy, methodology, students having moderate special educational needs.*

Introduction

Problems and relevance of the research. Having restored the independence of Lithuania the process of the reform of the system of education has started, in which one of its important components is making special education closer to mainstream education when in fact the whole concept of the functioning of special education has changed (Ambrukaitis, 2013). The ideas of integration and inclusive education have expanded education areas into various contexts of the educational system in order to ensure the use of all possible resources and effective meeting of learners' needs. In UNESCO Policy Guidelines on Inclusion in Education (2010) it is emphasized that inclusive education, when a person is in the centre of the process, is useful for a teacher and all students – both who do not have special needs and who have them because of disability or other reasons. A student with special educational needs educated together with peers has the opportunity to take their experience, learn to communicate together with his/her peers who are more advanced and skilful, creating the conditions to learn while teaching others, and develop positive attitudes towards people's differences, form value attitudes acceptable to modern society. Here the teacher's disposition to involve all students into the

learning process that takes place in the classroom, to create conditions for everyone to be educated according their abilities, to set adequate learning aims relevant to everyone, to choose suitable strategies of evaluation and self-evaluation of achievements is very important. Students with moderate special educational needs educated in mainstream classes of comprehensive schools can experience the influence of the especially large number of negative factors aggravating and destroying their self-esteem, if the needs of such students are not taken into account and the students are not helped or inappropriately helped to learn, socialize, and get involved into the classroom activity. Since the number of students with special educational needs in mainstream schools has increased, the teachers face the challenge – how to work in a classroom where students of different abilities learn. It has to be stated that in the practice of mainstream schools of Lithuania there is still a lack of more elaborate researches that reveal the educational impact of empowering educational systems and techniques for senior form students with moderate special educational needs educated in mainstream schools and focused on the development of these students' functional mathematical literacy on the development of mathematical skills. It stimulated us to conduct the research in order to create the methodology of the development of mathematical literacy, to more purposefully model various strategies, methods, instruments that help to develop students' general skills and apply them in practice.

Research aim – applying the action research to create the methodology of the development of functional mathematical literacy of 8th form students with moderate special educational needs in mainstream school.

Research methods: Creating the methodology of the development of functional mathematical literacy of students with moderate special educational needs the action research was organized, during which *group discussions, observation, analysis of documents, interviews with the research participants* took place. To process the data the methods of *content analysis* and *statistical data analysis* have been applied. It was aimed to ensure the feedback criterion by planning and discussing the educational process and conducted activities with all participants of the research performing the comparative characteristics of students' works performed at the beginning and at the end of the research.

Research sample: In the action research 9 eighth form students with moderate special educational needs, 9 parents of these students, 7 teachers of mathematics and 4 special educators participated. The main principles followed in selecting the participants of the action research are: 1) students with moderate special educational needs educated in the 8th forms according to the adapted or individualized programme of mathematics; 2) the principle of voluntary resolution, therefore, written agreements of all the participants of the research to participate in the action research were received. A mainstream school for the action research was selected by convenience sampling.

Methodology, organization and results of the research

For the initiation of changes in mathematical education in real-life environment, creating the methodology of the development of functional mathematical literacy of students with moderate special educational needs, planning the activities, didactic technologies, it was referred to the factors discovered in the previous stages of the research related to the concept of functional mathematical literacy of students with moderate special educational needs, the expression of skills and theoretically and empirically substantiated theoretical attitudes of the development of functional mathematical literacy of students with moderate special educational needs (SEN), the situation of education in mainstream schools of Lithuania meeting special educational needs.

The teachers of three mainstream schools, the 8th form students and the representatives of their families (students' mothers) participated in the research. In one school where one of the researchers works and three students with moderate special educational needs study (one student is diagnosed with the complex disorder, one with general educational disorders and one with the disability due to mild mental disorder), every day there was direct participation in creating the methodology of the development of functional mathematical literacy. The meetings with the participants of the action research from other mainstream schools were organized every 1,5-2 months according to the arranged schedule. To plan the action research and identify the results the data collection scheme has been created (Table 1).

Table 1. Scheme of data collection

At the beginning of the research:	→	In the process of the research:	→	At the end of the research:
* primary meetings – group discussions with the participants of the action research, introducing the aim of the action research, planned activities; * **written survey** of the 8th form students with moderate SEN who participated in the research, using the exercise book of diagnostic mathema-tical tasks created by the researchers, * analysis of students' certificates about primary/secondary evaluation.	→	*5 intermediate meetings; group discussions of the teachers of mathematics and special educators, * evaluation of students' mathema-tical achievements and self-evaluation of activity at the end of the semesters I and II – group discussions with the participants of the educational process of every student (students, parents and educators).	→	* retest written survey of the 8th form students with moderate SEN who participated in the research, using the same exercise book of diagnostic mathema-tical tasks; *group discussion of all the participants of the action research

It was decided to process the data collected during test-retest of the written survey by statistical methods, and to analyse and interpret the data collected during group discussions between teachers and all the participants by using the method of content analysis. The **action research** was chosen because it is a special research strategy integrating practical activity and scientific research. By such integration it is aimed not only to understand and interpret reality but also improve it (Kemmis & McTaggart, 1988; Cohen, Manion & Morrison, 2000, Denscombe, 2003). Practical specialists (teachers of mathematics and special educators) aimed to develop the process of mathematical education of students with moderate SEN supporting it with the factor of functionality. It was aimed that all the participants of the action research process (researcher, practical specialists, students and their parents) were equal and involved into every stage of the process (Kemmis & McTaggart, 1988); the relationships between the participants were democratic. The action research took place in cycles also comprising the feedback (loop) where primary discoveries created the preconditions for the possibilities of change. The change is implemented and evaluated as the insight for new investigations (Denscombe, 2003). The cycle was made up of the identification of the problem, planning of the intervention, implementation of the intervention, evaluation of the results: planning – activity – observation – reflection (Lewin, 1946; Kemmis & McTaggart, 1988; Cohen, Manion & Morrison, 2000). During the stage of planning the cycle the participants of the action research were identified, the action plan was discussed, the intervention is determined in order to organize the development of functional mathematical literacy in the 8th form and the ways of collecting data about it.

During the action research it was referred to the teachers' insights obtained during the quantitative research about the methodology of the development of functional mathematical literacy in mainstream schools and various fields making up the components of the methodology of the development of functional mathematical literacy of students with moderate special educational needs were investigated:

- theoretical methodological approaches and principles of education − development of functional mathematical literacy based on theoretical approaches and principles ofeducational philosophies of pragmatism, constructivism (social, cognitive, pragmatic), the concepts of social participation, empowerment and mathematical literacy;
- teacher's and student's roles and positions in the process of education;
- teaching (learning) methods, replacing traditional teaching methods with active teaching methods (e.g., methods of discoveries, practical problem solving, projects, application of ICT) (Cohen, Manion & Morrison, 2000; data of the quantitative research);
- special education strategies applying inclusive approach towards the support of the process of mathematical education with the factor of functionality (e.g.: application of cognitive strategies, learning in

- collaboration, peer support, self-regulating learning, mnemonic and memory strategies, etc.);
- applicability of contents, paying more attention to teaching the topics of the fields of mathematical activity *numbers and calculations*, *geometry*, *measures and measurements*, *combinatorics* (partially), *expressions*; the development of essential mathematical skills (measuring, application of knowledge teaching how to solve the tasks of geometric and economic character); development of all types of cognitive skills and especially important competence of learning how to learn;
- evaluative procedures of performed activity, education achievements;
- attitudes and values stimulating positive attitudes of teaching and learning;
- continuing professional development of teachers developing teaching methods, instruments and strategies of working with students with moderate special educational needs, individualization of education with regard to child's abilities.

In order to help teachers to differentiate the process of education, enhance students' interest in the opportunities of practical application of mathematical knowledge L. Tomėnienė (2014) for every section of mathematics has prepared tasks of practical character created by herself (textual tasks, tasks of project activity, practical work, relating theory and practice, meant for the development of thinking, etc.), where attention is focused on practical applicability of knowledge, integration of subjects, use of information technologies, teaching students how to evaluate their activity, develop independence. The content of the given tasks was focused on four main contexts comprising wide fields of life – personal, social, professional, scientific. Students with special educational needs were suggested developing their skills by working, investigating, mastering, consulting with their family members, peers and teachers or performing other practical activity. During such lessons it is easy for a teacher to answer the question "Why do I need it?", explain where in life the performed tasks, gained mathematical knowledge, formed skills will be useful. During each work meeting the tasks suggested by the researcher were reviewed, the suitability of these tasks for the development of functional mathematical literacy of a student with moderate special educational needs was evaluated.

During the process of the action research the attitude has been followed that students with moderate special educational needs **have to be educated together with peers adapting** the contents of the programme of mathematics for the 8th form of mainstream school, withdrawing certain topics that are not understandable to students, applying the methods of active learning and paying more attention to practical applicability of knowledge. It was aimed that the content of learning material presented by L. Tomėnienė (2014) was as much as possible related to the general content of education in the classroom, that

students with special educational needs could participate in common classroom activity and perform differentiated (facilitated) tasks presented by the researcher. It is aimed to consolidate the essential information of learning material, relate theory to practical application of mathematics. To stimulate learning motivation the examples of tasks that illustrate the environment familiar to the students were presented (the tasks for students' active performance and real-life problems which was taught to solve in real-life way were presented; real-life short examples that should help a teacher at the beginning of the lesson to pose a practical problem, project works of practical character).

In the process of the development of mathematical literacy the teachers were suggested to apply Universal Design for Learning that refers to the philosophy that it is necessary to select learning methods and ways of teaching the subject of mathematics suitable for students. The attitude is followed that not a student should get adjusted to teacher's teaching style but the contents of the subject and methods should be combined so that every student had equal opportunities to strive for the best individual results (cit. Ališauskas et al., 2011, p. 40).

Performing the action research the teachers and the researcher could observe how learning environment was changing, reflect on their actions, interaction with learners, evaluate the efficiency of the applied methods and didactic technologies in the development of mathematical literacy of students with special educational needs in the 8th forms of mainstream schools. The result of the action research – reflection on the obtained research results and preparation of the recommendations on how under particular conditions to create the programmes of the development and optimization of the activity (in this case – how to create the methodology of the development of functional mathematical literacy of students with special educational needs adapting the general programme of mathematics for the 8th form students), while the basis of the knowledge is the existence of the reality analysed *here and now*, people's (teacher's) ability to solve problems analysing their performed activity and developing the ability of students with special educational needs to relate mathematical knowledge to real life, apply in practical activity.

The technique of the research is treated as semi-structured because the objectives and basis of the development of functional mathematical literacy is foreseen in advance (referring to the combination of the educational philosophies of pragmatism, constructivism and the theoretical approaches and ideas of social participation, empowerment and mathematical literacy and regarding the peculiarities of mathematical didactic process in mainstream school, the requirements of the general programme of mathematics the basis of the methodology of the development of functional mathematical literacy has been considered), and particular actions and decisions are dictated by the educational reality and individual character of the educational situation. On the basis of the tasks successfully performed by students and modified after the

action research in 2014 the didactic aid (exercise book of mathematics "Eighth-former's Mathematics", author L. Tomėnienė) was prepared for students with moderate special educational needs educated in 8th forms of mainstream schools. Therefore, teachers' remarks about the necessity of the tasks presented by the researcher and their suitability to develop functional mathematical skills of the students who participated in the research were very valuable.

The comparison of the research results of the written surveys of students performed at the beginning and at the end of the action research, using the previously created diagnostic exercise book of mathematical tasks, has shown that after the systemic and purposeful development of functional mathematical literacy based on the combination of the theoretical approaches of the concepts of pragmatism, constructivism, social participation, empowerment and mathematical literacy, mathematical achievements and the ability to apply mathematical knowledge in practical activity have improved in all three students. The students were able to much better concentrate, read the condition of the task attentively, use auxiliary aids, supporting tables, a set of formulas. Close collaboration between pedagogues and teachers, active involvement of a child himself/ herself into the construction of functional mathematical literacy have encouraged investigating the environment more actively, applying mathematical knowledge in practical activity.

The action research allowed the pedagogues to think over and regroup the activities of mathematical education developing functional mathematical literacy of the 8th form students with moderate special educational needs and the priorities: the focus on knowledge and results, the emphasis of the disorder have been replaced and complemented by the aspiration to acknowledge child's individuality and know a student, focus on assistance, taking into account student's strengths and purposeful use of teaching/learning strategies focused on practical application of mathematical knowledge in the process of education and life. It has been noticed that the participation in the research had impact on pedagogues' general competences related to personal development and person's general skills and professional skills in the field of special education (focusing the system of mathematical education of students with special educational needs on the development of functional mathematical literacy).

During the last discussion the teachers, students and their parents generalized the activities of all academic year and distinguished the most effective teaching (learning) methods: collaboration (*work in pairs was very suitable, but it was more difficult to organize work in groups*), project activity (students *liked it very much, I didn't think that it would be so fun,... great, I've performed many tasks, researches... while making project works we became better friends not only with classmates but also with family members; I became as if friends with my mum... and I'm not afraid to tell that I didn't succeed in something... I didn't think that there is so much mathematics in life – the projects showed it...; It was fun to participate in the projects with the child, to*

perform practical tasks..., communication with teachers has improved..., I can give advice to the teacher as well, what my child is better at...). All the participants of the action research indicated the importance of the method of peer support: teachers (*they became friends after classes as well, there's no need to tell him, he helps himself...; if O. doesn't understand, he hurries to help him...; both of them come to the consultations, earlier it never was like that...*),students (*I've found a friend..., I started to understand better... and if I don't know something, J. helps; it is quite fun to go to the consultations, when a friend is here, who will help me..., the teacher explains well but my friend somehow explains even more clearly and I understand...*), parents (*I'm glad that my child feels better in the classroom...; the child learned how to work in groups and pairs, receives assistance from friends...*).

All the participants of the action research indicated that they the students liked performing the tasks prepared by the researcher L. Tomėnienė. It was suggested making an exercise book out of these tasks ((parents – *a very good thing... if there are tasks of such practical character in one place, then parents will be able to help as well,... it will also be easier for a child... more interesting to learn*), (students – *I liked solving these tasks... it is from life, not only some formulas... I learned a lot... it would be nice if I could make the cover myself...*), (teachers – *a very good thing, there's no need to search, think... if there are tasks created for every section of mathematics – it would be nice... I also thought it would be nice to add tasks for students' self-evaluation, there would be feedback... students would learn how to plan, evaluate their activity... it would be also nice to have the rules – support material – here... I would like as many as possible such exercises...*).

During the last discussion it was aimed to find out students' mothers' attitude where it was purposeful to organize the development of functional mathematical literacy involving not only teachers but also parents and students into its planning. Mothers evaluated the usefulness of such activity based on collaboration: [*I saw school with different eyes, I learned more about my child, it was quite interesting...*], [*at the beginning I felt awkward, I thought I wouldn't be able to help my child, but I managed...*], [*now I go to school in completely different mood, willingly communicate with the teachers, try to listen to their advice and I advise myself...*].

During the action research, having discussed the peculiarities of the organization of the development of functional mathematical literacy of students with moderate special educational needs in mainstream school together with all the participants of the research, referring to the participants' experience the methodology of the development of functional mathematical literacy of students with moderate special educational needs were created.

All the participants emphasized that the development of functional mathematical literacy is a very changeable interactive phenomenon where **didactic mathematical process** itself based on the concept of mathematical

literacy should be reflected as well as **equal collaboration** between all the members of the process of education [*thus we empower not only students to participate in planning and organization of their learning but also parents and us – teachers], and **relating theoretical knowledge to practice**, and suitable **adaptation/ individualization of the programme of mathematics**, focusing on the necessity of the topics for the development of general skills and not forgetting that **a student must participate in the lesson together with other students in the classroom** [*contextuality is very important, ... not all mathematical topics are suitable, it is necessary to select.., it was interesting together with teachers and mum to choose what will be necessary for me, where I can use mathematical knowledge in my life]*. According to the teachers, philosophical substantiation of education is important [*during the action research I understood how important is to perceive the essence of the theories of pragmatism, constructivism, social participation and especially empowerment... It is very important to select one's activity, to organize the process of education in the right direction ... and it gave good results ...]*.

The participants of the action research have noticed in the reflections: the teachers indicated that *[organizing education in the right direction it is possible to achieve good results... It is nice to see that students are glad as well...]*, the parents expressed joy about the child's attitude towards learning: [*It is enjoyable that the child is not separated from everyone and willingly performs tasks that are related to real-life environment ... it is fun to perform project activities with the child and enjoy his successes... communication improved our relationship, the child has become more open...]*, the students indicated that [*participating in the research I gained more courage, I'm not afraid to ask the teacher, I gained more self-confidence...]*, *[I am glad with my classmates' support and assistance...]*, *[my relationship with parents has improved... I liked learning mathematics in a different way...]*, *[I understand that mathematics can be interesting...]*, *[To plan my learning together with my mum, teacher of mathematics and special educator was unusual but interesting and useful...]*.

Conclusions

1. The performed action research permitted in practical activity together with teachers-practitioners, students, their parents to create the methodology of the development of functional mathematical literacy in the 8th form of mainstream school and at the same time change the attitude towards the educational reality of students with moderate special educational needs.
2. The focus of teachers' activity on students' needs and positive skills, didactics of the development of functional mathematical literacy, construction of success situations during the process of mathematical education and planning of the educational activity together with learners permitted the students to experience success, raised their learning

motivation. These factors conditioned not only the improvement of learning outcomes that was noticed during the retest performed at the end of the action research but also improved self-evaluation.

3. The processes of the empowerment of a student and his/her family that were developed activating equal participation in the development of functional mathematical literacy, strengthening individual potential, improved the skills of interpersonal communication and learning in action, encouraged the responsibility for one's activities initiating collaboration-based activities.

4. All the teachers who have participated in the action research not only have improved the practice of the development of students' functional mathematical literacy but also developed their professional competences, because there were meetings-discussions, during which the theory of the development of functional mathematical literacy of students with moderate special educational needs was analysed, the discussions took place, the arising problems were discussed, the gained experience was shared.

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DEVELOPING THE LANGUAGE PRAGMATIC COMPETENCE IN CHILDREN WITH MODERATE AND SEVERE MENTAL DISORDERS

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Abstract. *In this research the effectiveness of didactic system is analysed in relation to forming communicative competence of children with moderate and severe mental disorders (MSMD) in the older classes. This publication presents the language competency model, which in this research serves as a theoretical base for studying the language development of pupils and for pedagogical activity. The publication reveals the system of methodological approaches in the educational process for developing pragmatic language competency for pupils with MSMD.*

Keywords: *didactic approaches, pragmatic competency, pupils with mental disorders, language competency.*

Introduction

Acquisition of linguistic competence for children with MSMD is linked to many challenges. In this regard, one of the main challenges is lack of common definition for this phenomenon. Language competence is a complex theoretical construct. In general it includes the productive and receptive abilities to manage the language components, e. g., grammatical features and vocabulary, and skills to use them in communication situations (Field, 2004).

The other challenge is connected with the difficulty to research the set of previously characterized abilities and skills because of the subtle differences and expectations that might exist in specific situations, cultures, and learning contexts. However, it can be estimated by speech intelligibility, developmental speech – language milestones, listening skills, and language comprehension (Smith & Cascella, 2007).

With the respect to above mentioned conditions, the language competence of children with MSMD is considered as particularly complicated research sphere. In this context the challenge is the individually-specific development potential, which is characteristic to the members of this marginal group. In the research process one must take into account the limitations of (a) intellectual abilities, (b) collection of conceptual, social and practical adaptive skills, (c) participation, interaction and social roles, (d) complete physical, mental and

social well-being, (e) interrelated conditions within every child lives, his own everyday life and includes the immediate social settings (Petry & Maes, 2007).

These conditions of development and use of the social context consequently affect the language development of this marginal group of children. The limitations can be observed in various expressions, which include both quantity and quality deficiencies of vocabulary, and in some cases absolute deficit of expressive verbal speech. At the same time these cases are also characterized by poor ability and skills to organize the language components in a meaningful phrase.

On the other hand, the main aim of the educational system for children with mental disorders is potentially more successful individual socialization process, and particularly the language competence is regarded as the foundation of this process. Keeping in mind the personality traits of pupils with MSMD, the acquisition of their language competence is focused on obtaining the knowledge and skills necessary for life in the society. Therefore, the most important aspect of language development is neither pure pronunciation nor absolutely infallible grammar, but it is to be understood as an integrated component of a successful personality development (Lentes & Thiesen, 2007), which would compensate the gaps of psychic functions and facilitate the acquisition of social roles and integration in different social contexts.Thus, obtaining the language pragmatic competence is one of the main tasks for children with MSMD.

This publication is part of the wider research study which *aims* to elaborate the functional methodical approach system for developing language pragmatic competence for children with MSMD. This publication examines language development regularities, research methodology and pedagogical activity methodology for above mentioned group of children. Selected language competence development profiles of children with severe mental disorders have been used for revealing the research results.

Language competence model for children with MSMD

As previously indicated, pupils with MSMD have individual-specific resources for their general language system development. Publication authors' experience proves that these cases are characterized by delayed language development. Sometimes expressive language impacts the severe damages of central nervous system. The lack of verbal means of communication is offset with gestures, confusing sounds, peculiar words in which children place their own meaning. In addition, the deficit of language skills limits also the updating, modification and enrichment of the information flow, while communication partners are in mutually active process.At the same time, orientation in communicative tasks and understanding of communication situations is limited as well (Smith & Cascella, 2007).

Therefore, in order to ground the effective communicative skill development research of children with MSMD, the complex language competency model is needed. This model must ensure systematic research of each particular child's language skills in all its variety and in correlations with possible deficits. At the same time it must be useful for activation and further development of language abilities and skills for children with mental disorders. For these reasons the Bachman & Palmer's (2010) model of language ability is very useful, which is also undoubtedly multidisciplinary and complex in its nature. A major advancement of this model in comparison to the previous ones seems to be its emphasis on the central role of strategic competence, metacognitive strategies or higher order processes that explain the interaction of knowledge and affective components of language use (Bachman & Palmer, 1996, 2010; Fulcher & Davidson 2007). The previously characterized language competence model includes several interrelated competencies.

Table 1. Model of Language Competence

Language Competence			
Organizational Competence		**Pragmatic Competence**	
Vocabulary/Lexicon/Semantics			
Grammatical Competence	Textual Competence	Illocutionary Competence	Sociolinguistic Competence
Morphology Syntax Phonology	Discourse Coherency Rhetoric	Problem solving Ideas Imagination Manipulation	Dialect Register Naturality Culture

Model is based on: Bachman & Palmer 1996; Reichert – Garschhammer & Kieferle, 2011.

Generally describing the above mentioned language competence subcomponents, it should be noted, that the indicators of *grammatical competence* are extensive vocabulary and its phonematic structure, and skills to apply the features of morphology and syntax, which cumulates in formation of meaningful and formally correct sentences. It can be added that in the verbal language of children with MSMD the limitations can be observed in several essential components including (a) oral language and vocabulary, (b) phonological awareness, (c) phonics and word recognition, (d) fluency, and (e) comprehension (Allor et all., 2008; Hudson at all., 2013; Lemons et all., 2012; Stockall, 2011).

Consequently, these limitations influence the *textual competence*, which includes skills to use appropriate means and their elements for creating an oral or written text. In this regard children with mental disorders often experience difficulty of planning (e.g., retrieving and organizing content knowledge and writing for audience), producing text (e.g. constructing sentences beyond a reiteration of listing topical knowledge), and effectively revising compositions

with regard to the organization of ideas and content (Woods-Groves at all., 2014, 249).

In order to diminish the above mentioned deficits, for these children the augmentative and alternative communication systems often provide the means by which they can communicate with other individuals in their lives (Beck et all., 2008; Beecher & Childre, 2012). In this case for achieving didactic goals the following global symbols are used: drawings, diagrams, pictograms, as well as depictions of operational and behavioural models. The effects of a use of comprehensive sign language are (a) sight word knowledge, (b) letter recognition, (c) letter-sound knowledge, (d) vocabulary, (e) listening comprehension (Beecher & Childre, 2012).

Pragmatic competence includes skills that ensure language use is the social context. Accordingly, the *illocutionary competence* allows expressing ideas, knowledge and feelings, manipulating with surrounding environment, using metaphors, humouring and understanding the poetic texts. The *sociolinguistic competence* provides with possibilities to use the means of language according to the particular context of social environment. This research study focuses on challenges and achievements of pragmatic aspect perfection of language competence.

Research design

Participants

The participants of the research: 13 pupils of special educational institution, age of 15-16, and five qualified special education teachers.

Forming the group of research participants the most characteristic factors that influence their individual development were summarized: age, special needs (official diagnosis), social conditions (lives in the family or social care centre), educational history (study year, change of education programme), use of language skills.

Two rather different cases are used for describing the research results

Table 2. The context of pupils' development

Participants	Age/ Gender	Special Needs	Social conditions	Education history
PP1	16/M	Severe mental development disorder, cerebral palsy	Lives in the care centre	8th study year, education programme has not been changed
PP2	16/M	Severe mental development disorder, Down syndrome	Lives together with family, in working days stays in a boarding school	8th study year, education programme has not been changed

Significant differences can be observed in organizational competence profiles in the beginning of the research.

Tabele 3. Organizational Competence profiles at the beginning of the research

Partici-pants	Vocabulary/Lexicon	Grammatical Competence	Textual Competence
PP1	Incommunication does not use verbal language	Uses alternative means of communication	Respond to the simple questions about family and daily routine , using alternative means
PP2	Incommunication uses verbal language, uses it according to the situation and according to the emotional state	Uses verbal and alternative means of communication; according to situation understands and can answer simple questions, name objects and activities, in conversation uses nouns and verbs	Can answer simple questions about his family, create a story about himself, family; if leading questions are asked, can clearly tell about his experiences, and answer questions about particular situations.

Research method and procedure

This research was conducted in year 2012-2014 in special primary education establishment with 23 years of experience on implementation of special education programmes for pupils with MSMD.

In the research programme three interrelated and successive phases can be distinguished. *In the first phase*, analysing 123 case studies, the typical language development expressions were researched for children with severe mental disorders. Their differentiation has served as the basis for elaboration of 83 typical indicator system of language competence.

In the second phase of the study the observation of the various educational process routines took place for children with severe mental disorders with the aim to explore the functionality of previously acquired indicators and their compliance with the actual cases.

In the third phase of the study the pedagogic approach system has been used for developing the language competence, including the pragmatic competence. For noticing the changes in the language competence structure, the observation of pupils' development was performed repeatedly in this phase. The research process was taking place 10 months, mainly in learning situations in classrooms, in groups and individually, and in the after-school activities. The research process and results are revealed in observation protocols.

Intervention

In the language learning process the *role play* is the way to prepare students for different life situations, where language elements are means of resolving the

situations. Using this method, students have opportunities to observe and understand a variety of communicative situations and social roles. The content of role plays is composed by pupils or their teachers depending on individual development potential of each pupil.

Communication situation modelling contributes to the development of students' understanding of the factors influencing communication. In this context, students are provided with opportunities to explore different possible situations in connection with various tasks that need to be performed in communication process.

The *interview* is used to develop students' skills of formulating questions and answers. In the intervention period methodological guidelines have been developed for using this approach: (1) teacher elaborates the question system and develop it further together with the pupils, (2) the teacher agrees with pupils who will be the respondent in the interview, (3) the implementation process of the interview is associated with the role play,e.g., taking the role ofjournalist or TV news presenter, (4) depending on the writing skills of the interviewer, the respondent's answers are fixed in writing or tape-recorded, (5) the narrative, prepared together with teacher on the basis of responses acquired in the interviews, is presented to the class members.

Dialogue and its formation in the intervention period has been used for revealing the problem issues in both daily and learning situations. It must be admitted that forming a sensible and continuous dialogue for students with MSMD is a complex process. Using this technique, the skill to observe other people's communication process is of great importance in order to perceive the information expressed in it. Therefore, it is necessary to analyse the dialogue conversation together with the teacher, understanding its nature and main aspects.

The aim of *situation plays* is to develop specific life situation awareness. The use of this methodological approach served as the basis of language pragmatic competence development in several aspects: (a) to support use of meaningful language components in various daily situations, as well as in social and cultural activities, (b) to develop skill to implement various communicative tasks with language resources and orientate in different communication situations (c) to encourage to overcome possible insecurity before starting communication with people one knows and with the strangers, (d) to improve the understanding of communicative culture. Implementing this methodological approach, pupils are encouraged to act in accordance with oneself, one's own experience and feelings. Thus, the goals of communicative situations are determined by the students themselves. However, teacher's support is important in this process according to the individual needs of pupils.

In intervention period, the *methodological approaches for strengthening the acquired skills* are used to ensure that the acquired pragmatic language skills are applied in real life situations, to promote pupils' interest about them and to

initiate future learning process. For these purposes the study tours and visits to cultural, sports and other events are used, observed and assessed.

It can be added that events with a transparent thematic content and in a limited space, such as concerts or theatre performances, or watching together a TV programme or listening to fairy tales in out-of-school hours are considered as effective for training the language pragmatic competence.

Results

In the end of the intervention period, the repeated observation of research participants was conducted with the aim to explore the qualitative and quantitative changes of children's linguistic competence.

Table 4. The quantitative indicators of changes in pupils'linguistic competence

Participants	Grammatical Competence		Textual Competence		Illocutionary Competence		Sociolinguistic Competence	
	Nr. of indic. before intervention	Nr. of indic. after intervention	Nr. of indic. before intervention	Nr. of indic. after intervention	Nr. of indic. before intervention	Nr. of indic. after intervention	Nr. of indic. before intervention	Nr. of indic. after intervention
PP1	1	1	1	1	1	2	3	5
PP2	8	11	7	11	6	9	11	15

PP1 linguistic competence profile confirms that for the pupil involved in the study expressions of *grammatical competence* are only possible with alternative communication means also after the intervention. *Textual competence* is consistent in responses to simple questions. With regards to *illocutionary competence,* at the beginning of the study the skill to attentively listen to the speaker was detected. After the intervention the results confirm the ability to follow simple instructions. Accordingly, the *sociolinguistic competence* scores before intervention certify that the pupil responds to his name and presents joy when someone works with him. The scores after intervention confirm that the respondent communicates, is capable to interact with adults, is interested watching others in action, expresses emotional attitude towards different situations.

PP2 linguistic competence profile confirms a relatively comprehensive *grammatical competence* development in pre-intervention period: the pupil uses

verbal and alternative means of communication, can answer the questions, e. g., what is your name? how old are you? where do you live? etc. according to the situation, understands and can answer to simple questions, name objects and actions, in conversation uses nouns and verbs. The observation of after-intervention period confirms skill development: skills to show nouns in the picture, expressions of verbs and adjectives, ability to use personal pronoun in the first person, skills to connect words, read the words, form short sentences and find their links to the pictures.

With regards to *textual competence* this student is able to answer simple questions about his family members and life in the family, create a story about himself and family if leading questions are asked. Before the intervention the pupil was able to clearly tell others about his experiences and picture events related to others (through verbal and alternative means of communication), ask simple questions about a specific situation to others, answer the questions asked by others, was happy to talk to peers, create a story after seeing a picture. After the intervention he was able to repeat accurately short texts, ask questions about the text that was read and was able to recall the scenes of more frequently read stories.

Before the intervention, the *illocutionary competence* indicators include ability to listen carefully to the speaker or literal reading of the text, the ability to perform simple tasks given by the teacher and to account for their performance, to identify and specify things in the surroundings after the verbal characterization. After the intervention the pupil can recognize and describe the mistakes and correlations in the images, he has skill to involve other pupils in certain activities, ask for help, express wishes or verbally articulate the invitation.

Accordingly, before intervention *sociolinguistic competence* indicators showed skills to respond to one's name, say the name, surname, age, date of birth, verbally articulate belonging to a specific gender, the names and surnames of other family members and other relatives. The pupil is happy to cooperate with an adult in the communication process, with interest watches and comments on another people's actions, present joy or disliking (using nonverbal means of communication). After the intervention the following aspects were observed: adequate emotional reaction to comical situations, skills to recognize and show emotions in the image, to name emotions and describe the reasons for them, differences are observed in behaviour and communication with familiar and unfamiliar people, skills to use phrases of politeness, gratitude, greeting and parting in familiar situations.

Discussion and conclusions

Influenced by humanist ideas, modern pedagogy cannot be oriented towards the deficits of human development. On the contrary, its mission is to

respect the personality development potential and its individual life reality. The most important condition for this approach is to ensure a positive individual's interaction with the material and social environment and to develop support for personal self-determination and self-empowerment efforts.

Exactly such tendencies are identified in this research. The obtained results in general confirm the achievements of language pragmatic competence that is needed for an active and meaningful social life. This statement applies both to the pupils who use expressive verbal speech as well as those who use alternative means of communication. Especially in the cases with limited ability to use verbal language, pupil's skills to listen carefully to the speaker, respond adequately to simple questions and to express the emotional attitude towards the communicative situation are regarded as an achievement.

In addition, the above-described model is designed for characterizing the verbal language competence. However, in its diverse component system it is possible also to include those specific elements that are characteristic to communication of children with severe mental disorders. By contrast, in this context the research aspect of children development of a particular marginal group is considered as the most problematic. In the research process presented in this publication, a number of professionals are involved, and the observation process is implemented over a long period of time in various educational situations. However, even in such circumstances one cannot avoid the subjective presentation of the research results. Therefore, it would be desirable to think about introducing an objective instrument for researching development of this children's group on the national level.

The methodological approach system and thematic planning developed during the research process currently meets the content of Social science syllabus. However, the perfection of communicative competence of pupils with MSMD is topical for all subjects in the context of the educational process. Therefore, consideration should be given to its real functionality is the current Latvian education system in accordance with the curriculum. Probably for ensuring the effective learning process for children with MSMD more appropriate would be on competence formation oriented inter-subject thematic plan.

During the research it was concluded that for development of communicative competence for pupils with MSMD the purposeful collaboration between the class teacher, subject teachers, interest education teachers, boarding school teachers, etc. is of great importance.The implementation of this aspect in qualitative and quantitative ways depends from organization of pedagogical process of each educational establishment.

Parents and if necessary – caregivers are also part of the social network of cooperation. Their awareness and practical contribution is important for further development of skills and abilities, which are acquired in educational process and are at the basis of language pragmatic competence also in after-school

environment. For this purpose the accordingly formulated recommendations and training programs should be developed and implemented.

The authors of the article have put forward the Following questions for the discussion and further research: 1) necessity for perfection of methods of diagnosing the special needs and educational process organization for children with MSMD, 2) perfection of cooperation strategies and the forms of work between professionals in educational institutions and extracurricular social environment of pupils for improvement of language pragmatic competence.

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THE CRITERIA OF EVALUATING THE ABILITY TO SPEAK FOR CHILDREN OF PRESCHOOL AGE

Irina Cupere

Abstract. Human interaction is possible with the help of communication. With the communication activity realization we need to develop our communication competence. Narrative skills development level is human's individual skill, consequently and coherently transmitting his thoughts, knowledge and experience for interlocutor choosing right language tools and grammatical construction. This skills child learns in preschool age and has to develop in throughout life.
Speech disorders, particularly insufficient development of the language system, have important influence on narrative skills development. Further this problem could badly affect the communicative activity realization. For this problem minimization should be help to children to develop their narrative skills. Before starting corrective developing work for children with insufficient development of language system, it is required to assess child narrative skills development level. This is an analysis of children narrative skills development opportunity and practical recommendations.

Keywords: narrative skills, narrative skills development level, communication competence, insufficient development of the language system.

Introduction

The basic function of speech is to serve as a communication tool, which aims are to keep the human social contact and exchange information. With the help of positive interaction with adults, a child develops emotionally and intellectually. Children learn about the world around them, acquire new knowledge and develop existing ones through communicating with others. In order to fully realize the communication activities with others, the child must have well-developed coherent speech, including the ability to speak, because that level of speech development becomes a main component of socialization. To children with language disorders, especially in children with language system underdevelopment, coherent speech is impaired, so communicative activity realization is harmed.

Languages underdevelopment is a systemic disorder where are affected all the components of language - phonetics, phonemic processes, vocabulary, grammar, if the child has normal eyesight, hearing and intellectual level of development (Tūbele, 2002). Children with language system underdevelopment have the malfunction of the monologue speech as a result of coherent speech disorders, which causes difficulty to make a communicative activity. They rarely become communication initiators, comment on their games, it is difficult to

understand these children for others. Providing assistance of speech therapy to the child timely, this problem can be overcome before school age.

Starting the corrective activity, it is important to evaluate child's development of ability to speak. In this article it is theoretically studied communicative competence of the ability to speak development, criteria for evaluating the level of development and are developed practical recommendations for the evaluation.

Methods: analysis of scientific literature

Communication competence

Human interaction is possible with the help of verbal communication. To fully realize this interaction with others, humans need to develop their communicative competence. Communicative competence of a person realizes in communication.

Communication process is characterized by a conscious goal setting; developing the realization plan and behavioral program execution in communicative activity that takes place between at least two conversation partners. This process uses a language and a common set encoding system that is understood by all communication partners. The communication process is intended to obtain or transmit information to influence the conversation partner (Ušča, Ļubkina, 2013). It is a two way process and without feedback it is not possible.

The quality of this process is provided by:

- Interaction between communication partners, this process is based on the use of one language;
- Communication partner's individual features: cooperation skills, knowledge of the information structure and form of transfer;
- The quality information channel that defines the human individual psychological characteristics;
- Amount of experience;
- Communication result, which is determined by obtaining information, influence on communication partner and self-fulfillment (Ušča, Ļubkina, 2013).

Each person's communicative competence, which is different for each person, has influence on the quality of communication. This development of person sets their experience in communicative activity, development of the ability to speak, psychological characteristics and self-esteem.

Communicative competence is the ability to effectively carry out an effective speech act and speech behavior that promotes social interaction norms inherent in certain ethnic groups (Седов, 2008).

The components of communicative competence are the ability to build a dialogue and monologue, the ability to use different techniques of speech under

the current situation, using a variety of models in speech (Dzintere, Stangaine, Augstkalne, 2014). Communicative competence is the expression of a particular speech act that provides an effective human communication and interaction with others. E. Apsalons (Apsalons, 2011) stresses that using language publicly, humans pay attention to the selected language resources that should be understandable to conversation partner, which is the main conversing feasibility condition.

The components of communicative competence are speech acquisition system and the consciousness of the speaker's speech operating models and the ability to use dialogue and monologue (Dzintere, Stangaine, Augstkalne, 2014, 116-117).

For children with language system underdevelopment public use of language is more difficult: for the communication partner it is difficult to transmit the information to be decoded. The child's speech is difficult to understand, so conversing is complicated. Ability to perform a monologue for children with underdevelopment language system is poor - they cannot create their own narrative plan and fully realize it. The child's narrative ceases to make sense and chronology of events, he can pay great attention to small details, not describing the key. Stories told by children with language system underdevelopment are uniformly more schematically, mostly consisting of simple sentences that do not expand.

To provide children with experiences of making communicative action it is necessary to organize a variety of special situations in which he can develop a communicative competence and ability to speak.

Narrative skills of preschool children

Communicative action takes place with the help of speech, which is the human material, transforming historically specific type of communication process, implemented through language (Luse, Miltiņa, Tūbele, 2012). Speech is divided into two types of external and internal speech. To external speech belong oral (monological and dialogic speech) and written language.

Conversational or dialogical speech is a kind of speech made in the form of a dialogue, which is characterized by brief remarks, deviations from regulatory syntactic structures, a wide range of non-verbal resources and gestures. (Luse, Miltiņa, Tūbele, 2012).

Dialogical speech is the most basic form of speech, which is formed in communication with one or a few conversation partners, and mainly consists of the questions guiding sentences syntactically undisclosed constructions. According to Čirkina (Чиркина, 2002), dialogical speech, unlike other negotiating partners there are emotional contact, their exposure to one another with facial expressions, gestures, intonation and voice timbre, and the situation is: the subject of consultation or theme exists only between the activity or

indirectly perceptible. Dialogue is maintained by leading questions, the change of situation and intentions of the speaker.

Monological speech is a monologue form built speech, which is characterized by trying to massively expand certain theme narration grammatical structures drawn-up by the plot line insertions, etc. (Luse, Miltiņa, Tūbele, 2012). After Čirkina (Чиркина, 2002), monological speech is characterized by continuity which is providing cohesiveness grammatically correct presentation, expressive voice means. During monological speech listeners transfer their knowledge or system events through language. In content and language use of resources it is more complex than in a dialogue speech and the narrator provides a higher communicative competence. After Priščepova (Прищепова, 2005), monological the speech skills and skills development are the characteristics for speech development as wholeness and coherence. They are closely related to each other, corresponding to communication purposes and characterized by a communicative focus, sets out the logic, structure, determine the means of language organization.

There are three types of monological speech: channelings, description and reasoning.

Language system underdevelopment affects most directly the monological speech, because it is related to coherent speech.

Coherent speech:
- Is long and consists of several sentences;
- Is sequential, logical;
- is programmed as a whole;
- Is a subject to certain regularities (Tūbele, Luse, 2004, 121).

Children with language system underdevelopment speech coherence can be executed only on the basis of an idea of the structure of the expression and characteristics of each stage of the narrative, as well as the internal narrative in its ways. Speech and intellectual development of a high level of first graders with the language system provides insufficient development of language regularities of the high level of awareness, the ability to secrete presented in verb forms as a speech unit (Прищепова, 2005). Therefore it is important to start working on the ability to speak development of pre-school age to school until the child is already learning languages regularities.

Creating a communicative situation where a child can build stories, express thoughts and judgments, it is important to pay attention to the difficulties that appear in the narrative creation of a child and give him support for its realization. The child's stories may be different by content: about toys, recent events, nature, and so on. It is important for a child to talk about certain things known to him, and then speech becomes more cohesive and relaxed.

For preschool children it is easier to learn proper sentence structure, than a variety of links for ways to link the narrative part among them. For children it is easier to portray their stories spatial and temporal sequence of events into a

single phrase saying, than to reflect the narrative of different types of linkages, secrete a variety of facts, phenomena and explain them. The transition to the associated speech and narration is only possible when the child with language system underdevelopment already knows how to build extended phrases, however, related to the acquisition of the speech need not only to set the linguistic level of development, but also the ability to plan expressible thoughts. Narrative planning and creation of the surrounding is facilitated in case of a narrative line subject matter aspects reflect real events, the sequence of those. In any case, before making a narrative storyline it is necessary to work on planning and selecting of linguistic means. Promoting the ability to speak, it is necessary to develop the lexical and grammatical speech related part. By dialogical and monological speech development needs to organize a variety of communicative situations. In order to promote the child's speech activity it is necessary to discuss different situations more often, to respect the child's views (Люблинская, 1959).

Developing the coherent speech, the child must learn to choose the most appropriate words and word connections, start and build sentences so as to form a flowing narrative and without unnecessary repetitions, acquire the ability to build a compositionally correct narration, which the listener would have done.

Narrative skills species

The ability to speak is a kind of coherent speech, which needs to be developed as soon as possible, in pre-school age. It is a short or long monological speech with the use of dialogical speech. Monological speech shows its importance of a child's life of 6-7 years. Piaget (Piaget, 1955) notes that in this age group for child the monological speech is leading, when he starts talking about himself and listens to his communication partners. Monological speech is mainly referred to himself, but through communicative action, it may be referred to others. Golubina (Golubina, 2007) on monological speech development criteria defines skill to focus thinking on the main narrative, the ability to speak eloquently and emotionally, the amount of memory, the ability to focus on the speech content and form. To speak eloquently and emotionally, it is necessary to be able to choose appropriate words and other language characterizing expression.

Unlike monological speech, dialogical speech provides two or more conversation partners. Golubina (Golubina, 2007) on the dialogical speech development criteria defines skill to formulate and ask questions of conversation partner, the ability to properly answers the questions, expand partner's thoughts in the conversation, and correct it according to their age to defend their thoughts and opinions.

There are three types of the ability to speak:

Retelling - the ability to build retellings of what had been read and seen sticking to lexical, grammatical and syntactical area.

Gluhov (Глухов, 2004) and Korotkova (Короткова, 1982) note that retelling develops the child's vocabulary, perception, memory and attention, improves the structure of speech and expressiveness. The child's sentence structure and word structure has evolved, he acquired the skills to assess the accuracy of the expression of language norms perspective.

Describing is the ability to create stories - descriptions. The communicative task of description is to create conversation partner's image of the object using only the language assistance which characteristics and properties are required to provide a certain order. Ability to describe is also closely linked to mental processes - the imagination, way of thinking; thinking operations - analysis and synthesis. Description is to some extent a static object, „photo" phenomenon. In order to successfully create a narrative of the required algorithm it is necessary to teach the child to develop a description of a specific sequence. Algorithm can give a child a picture or symbols (Kaņepēja, 2003).

Narrating with the creative elements of the action is the ability to create stories with creative action elements: languages resources are transferred to interlocutor with own fictional narrative with independently selected content and logically created scenes. According to Zhukova, Mastjukova and Filičeva (Жукова, Мастюкова, Филичева, 1990), the ability to narrate is a way to develop a child's verbal logical thinking, allowing children to express their own thoughts, expressions of personal perception of the links between the different objects and the relationship between them, their ambient perception of the world, promoting the child's knowledge and perceptions of it. Ability to develop creative stories brings the child to that monological speech level of development that will allow him to move from game to teaching.

There are common evaluation criteria for all kinds of the ability to speak: coherence, vividness, independence, the size of the vocabulary and grammatical structure of sentences. Work on the development of the child's ability to speak helps to improve all part of speech: phonetic, lexical and grammatical, as it functions as whole system.

When evaluating child's level of the ability to speak development, it should be considered the child's age group, because the narrative qualitative and quantitative indicators for each age group are different. In order to determine the child's narrative qualitative and quantitative indicators as criteria are used narrative content, the amount of vocabulary and sentence structure. The independence of composed by the child narration can be evaluated by the amount of questions that were asked for understanding the narrative plot line.

The level of development of the ability to speak the child can be determined by how much help from adults it is required to start child's own story. Often leading questions only serve as psychological support to child to start to build his own narration.

Narrative skills development evaluation

Evaluating the development of the ability to speak Gluhov (Глухов, 2004) proposes to use the evaluation of five levels. The five-level system makes the ability to speak development evaluation pictorial and practically useable. As the criteria for narrative independence there are used language resources of grammatical part, and a coherency of the narrative flow.

Based on Gluhov's (Глухов, 2004) recommendations for the evaluation of children ability to speak development, these are the best tasks:

- Text retelling;
- Story after topic - a series of pictures (ability to plan narrative, linguistic level of development);
- Narration - description.

Narration is evaluated by narrative integrity, flow and completeness, continuity of accuracy, comprehension and grammatical correctness of the task.

Children's ability to speak is evaluated on the 5 levels:

Level 1: the task is not done. There is no coherency of speech, or of its development level is very low.

Level 2: the task is accomplished with the help of questioning. The child's narrative sequence is harmed. Narration is composed of events, phenomena and operation naming. The literal side of the speech is observably disrupted. The use of language resources is poor and uninformative.

Level 3: during the task the leading questions are re-used. Child may skip certain moments, the whole passage, repeat what already was said. Narrative has noticeable grammatical and lexical gaps. The communication narrative wholeness is reduced.

Level 4: during the task it is required adult's assistance or questioning. Child makes informative and logical narrative. There are difficulties in the realization of ideas, the expression in presentation, making phrases and sentence structure.

Level 5: mission accomplished independently, narration is sequential and coherent. During the telling child selects a large variety of language tools, it is grammatically correct.

Conclusion

Communicative competence includes the ability to build a dialogue and monologue speech to use different techniques according to current situation, using a variety of speech activity patterns. Communicative competence is the expression of a particular speech act that provides an effective human communication and interaction.

In order to communicate properly, people need well-developed ability to speak which are used in conversation to achieve a positive result. Using different kinds of the ability to speak people transfer to conversation partners

information which can be received in a number of ways with a help of describing and recounting.

Summarizing and analyzing evaluation criteria of the ability to speak development for children of pre-school age of the mentioned authors can be considered:

- Ability to independently build a sequential, logical, flowing narrative;
- Ability to focus the mind on the main narrative, sticking to the selected plot and narrative perspective;
- Ability to formulate and ask questions of conversation partner;
- Ability to carry out the content of the answers questions;
- Ability to speak imaginatively and emotionally expressive, then selecting the correct language resources;
- Ability to focus on the content and form of speech;
- Ability to find a way of presenting their thoughts to conversation partner, according to their age to defend their ideas and opinions;
- Ability to distinguish verb forms as speech units;
- Ability to supplement what the conversation partner has said and correct it;
- The size of the vocabulary and grammatical structure of sentences.

With the development of the child's ability to speak also develops his communicative competence, which significantly affects a social life. Further it will help him to find his place in the peer group, to establish friendly relations and to reach a chosen profession. For the ability to speak development determination it is recommended to use a five-level system, which makes the results demonstrable. This will help further corrective and developing activity to be more efficient, reflect the child's individual dynamics of development to follow his personal qualities. The five-level system is applicable in practice.

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CHILDREN WITH SPECIAL NEEDS IN LATVIA. LEGISLATIVE FRAME

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Abstract. *The analysis of the legislative regulation which determines the rights of children with special needs and regulates their guarantee leads to the conclusion that, on the one hand, defining equal rights to all children to receive education but failing to ensure these rights to children with special needs in a place that is as much as possible close to their dwelling place, their rights to live in the family, to choose education that corresponds to their desire as well as the possibility to socialize with children who have no special needs are violated. Why such statements? They are based on the analysis of the legislative acts of the Republic of Latvia and the education possibilities offered by the municipalities.*

Keywords: children with special needs, education, equal rights.

Equal rights to all people! Equal rights to all children! These are key values accepted by Latvia both by joining different international declarations and adopting the normative regulation in Latvia; however, there are still groups of people that can be considered marginal and subjected to social exclusion risk. One of such groups is children with special needs. Inclusive society and inclusive education should be an aim to be achieved.

The subject of inclusive education is every child but the object of inclusive education- the educational institution. According to UNESCO definition inclusive education is a process which ensures the satisfaction of the respective diverse needs of all learners increasing everybody's possibilities of participation in the teaching/learning process, culture and different communities and decreasing the exclusion possibilities from education and the process of acquiring education (UNESCO, 2004).The understanding of the given thought is based on the idea that regardless the ethnic origin, cultural or linguistic heritage, religion, social status, learning difficulties, behaviour problems, disabilities a. o. issues connected with the diversity it is necessary to ensure full-fledged education involving learners physically, cognitively and emotionally.

As the problem of decreasing the social exclusion is a complex phenomenon, its solution requires a complex and all-embracing approach. The authors of the conception "Development of the support system for young people subjected to social exclusion risk and inclusive education and training of the necessary staff for its implementation and improvement of quality" consider that social exclusion is a social multi-dimensional marginalization process which embodies the economic, social, cultural and political aspects and which is characterized by the inability of the individuals or groups of people fully or partly join the society when they have no or have a burdened access to such

resources, services and activities that are vitally important for the development of the person and ensure full-bodied functioning of the person in the society. This is connected with insufficient social participation, insufficient social integration and inability to participate in the processes taking place in the society (Nimante, Daniela, et.al., 2009). According to this conception children with special needs can be considered to be directly subjected to the social exclusion risk.

The general Declaration on human rights states that every person as the member of the society has rights to social provision and the implementation of rights needed for maintaining the personal self-esteem and free development in the economic, social and cultural field with the help of national events and through international cooperation and in accordance with the structure and resources of each country (General Declaration on human rights).

In accordance with the *Constitution* (Satversme) of the Republic of Latvia the key human rights are presented in Chapter VIII stating that all people in Latvia are equal in front of law and court. Human rights are implemented without any discrimination (Article 91, Satversme of the Republic of Latvia, 1922). The official web page of the Ombudsman of the Republic of Latvia has a section "Social, economic and culture rights" which among others also point out the rights to education (Ombudsman of the Republic of Latvia, 2012).

According to European legal norms, which Latvia has joined, children is the category of people who are considered physically and intellectually immature persons who need special protection and care, which is determined by the Law on protecting children's rights that also states that a family is a natural environment for the child's development and that every child enjoys inalienable right to grow up in the family (Article 26, Law on protecting children's rights, 1998).Special article in the Law on protecting children's rights defines the child's rights to education and declares that the state ensures equal rights to education to all children (Article 11). The "Law on social security" (Article 4, 1995), in its turn, indicates rights to education as the social rights. The Law on social services and social assistance defines the human key needs- food, clothing, home, health care, compulsory education (Article 1, 2002).

Rights to education

Article 26 of the General Declaration on human rights states that every person has rights to education. Education, at least basic and general education should be free of charge. The basic education should be compulsory. Technical and vocational education should be accessible to all according to everyone's abilities (1948). Article 13 of the International covenant of the UNO on economic, social and cultural rights declares that the participating countries recognize every person's rights to education and basic education should be compulsory and free of charge to everybody. Article 2 of Protocol 1 of European Convention on protection of human rights and key freedoms establishes that no person should be denied the rights to education. The state performing any

function in relation to education and learning observes the parents' rights to ensure such education and learning to their children that corresponds to their religion conviction and philosophical views (1966). It agrees with the law adopted in Latvia - "On revised European social charter" where Article 17 declares that the contracting parties undertake to ensure the possibility for children to grow in a safe and favourable environment stating in Chapter 2 that it should be done by providing free basic and secondary education to children and young people as well as promoting regular attendance of school (2013). The law on protecting children's rights points out a group of children defined as "children with special needs", which allows concluding that besides the fact that children are a group of people who deserve special care, there are children whose needs are a priority. Article 53, Chapter VIII of this law specifies that child with special needs is "a child who due to illness, trauma or disturbances of functioning of the body systems caused by an inborn defect needs additional medical, pedagogical and social help regardless whether the incapacity is defined in order stipulated by the law" (1998).The term "special needs" in the Law on general education, in its turn, is defined as the necessity to receive such support and rehabilitation that creates the possibility for learners acquire the educational curriculum taking into consideration their health conditions, abilities and development level (Article 1, 1999).

So far it is clear that the state undertakes to ensure equal rights to all children and take special care about children with special needs because also Article 12 of the Law on disability states that the disability consequences of people with disablement are decreased: 4) ensuring rights in preschool education, general basic education, vocational basic education, vocational education, general secondary education and vocational education institutions (except special education institutions that receive maintenance funding from the state budget for the learners – people with disabilities) to receive from the state paid services of the assistant for supporting moving and self-care; 5) ensuring rights to receive from the state budget the services of a paidsurdo-interpreter for the acquisition of the educational curriculum; 10) implementing other support activities defined in legislative documents.

It agrees with the ideas emphasized in part 3, Article 15 of the "Revised European social charter" that in order to ensure the rights of disabled people and mentally retarded people and to ensure their full integration and participation in public life, mainly carrying out activities, including activities in technical field, purposefully overcoming the barriers in the field of communication and movement creating access to transport vehicles, dwelling places, cultural events and free time activities (2013). The Law on education defines that people with special needs receive special education (special education- general and vocational education adapted for people with special needs and health disturbances or special needs, or health disturbances) (Article 1, Para. 24, 1998). Chapter VIII of the Law on general education enumerates all kinds of special

education and states that special education programs ensure a possibility for learners with acquired or inborn functional disturbances to acquire general education according to their special needs (1998). The above mentioned legislative documents serve as a confirmation that Latvia has envisaged a definite order how to ensure the rights and needs of children, including children with special needs, to receive education and has delegated the organizational function to municipalities.

Article 15 of the Law "On municipalities" about the autonomous functions of the municipality mentions "to care for the inhabitants' education (ensuring the rights to basic education and general secondary education established for the inhabitants, ensuring a place in the educational institution for preschool and school age children, organizational and financial assistance to out-of-school educational institutions and education support institutions, etc.) (1994) as one of them, which agrees with the responsibility of the municipalities defined in the Law on education to ensure children with special needs (according to their health condition that influences the kind of acquiring education) in special education institutions, preschool education groups for children with special needs, special education classes as well as in boarding schools in order and scope defined by the Council of Ministers". It means that municipalities have the main responsibility about ensuring education for children with special needs. Thus it is possible to conclude that the municipality organizes education envisaging that everyone can receive education corresponding to his individual needs.

And here complications emerge because the duty of the municipality is to take care of all children and if a child living in the administrative territory of the municipality is diagnosed special needs but the educational institutions of the municipality does not have a licensed educational program corresponding to the specifics of these needs then the solutions often do not serve the child's interest to grow up in the family and receive all the necessary support that the state guarantees. The traditional practice is that children with special needs are sent to attend educational institutions which implement such programs thus formally these needs are met but at the same time if, for example, the child with behavioural disturbances lives in the territory of the municipality which does not have such an educational institution that has licensed the educational program for children with behavioural disturbances then the traditional solution is to send the child to another place of Latvia in order to ensure the child corresponding education. Children with behavioural disturbances according to the regulations of the Council of Ministers Nr. 710(Regulations on provisions of general basic education and secondary education institutions according to learners' special needs, 2012) have the respective program for "learners with health disturbances" and in Latvia there are 15 such programs available (National data base of Learning opportunities). In Latvia there are 109 municipalities so we can conclude that in case the child with such disturbances lives in the administrative

territory of the municipality where there is no such program then the municipality performing its duty and trying to ensure the child's rights to education according to his special needs violates the principle which is established in the Law on protecting children's rights and the Law on social security that the child has the rights to grow in the family and these rights should be supported. This separation from the family creates additional emotional strain to the child which influences his intellectual achievements. This means that the child who has serious health problems is torn away from his family, his environment and he spends most of the time in an unfamiliar place, with unknown people who are not his relatives. This allows concluding that this system contradicts the principles of the inclusive society. Children with special needs live in segregated environments, failing to learn from the childhood to live in the society and also to learn cooperating with people who have different special needs.

Parents who are not ready for such a solution that the child has to spend time outside the family for a long time search for other different solutions – they organize home teaching that is envisaged by the regulations of the Council of Ministers Nr. 253 „Order in which to organize education of continuously ill learners outside the educational institution" (2006). However, these regulations envisage that such education at home is possible for 6 months which can be prolonged checking the child's health repeatedly, but it can be only short time solution. These regulations anticipate that the child who is learning at home needs the individual learning plan and it is provided that a teacher visits the child at home but it still means that the child does not socialize.

Or, for example, sometimes children with severe visual problems continue attending the mainstream educational institutions which do not have corresponding learning support materials (materials with larger letters, touchable materials, etc.), no licensed educational programs and teachers who have been specifically trained thus the child's intellectual development is not facilitated. This allows concluding that none of the traditional solutions offered by the municipality is favourable for the child's full-fledged development.

The same problems are topical also for children with different other diagnoses, all in all 10 different groups of diagnoses that have been enlisted in the regulations of pedagogically medical commissions (Regulations of the Council of Ministers Nr.709 „On pedagogically medical commissions, 2012). The Law on general education states that the head of the educational institution is responsible for gathering information about the special needs of the learners and their education according to the special education programs (Para.3, Part 2, Article 11). Some municipalities have already started solving this problem licensing the educational programs that are implemented by the educational institutions under their supervision corresponding to the special needs of children living in the municipality because when implementing the principle "money follows the child" municipalities have started to calculate also the

financial expenses about sending the child to schools registered in other municipalities. Regulations of the Council of Ministers Nr. 710 define the provisions needed to integrate children with special needs in mainstream educational institutions (Regulations on provisions of general basic education and secondary education institutions according to learners' special needs, 2012).

If we analyse these legislative documents then we get the impression that there should be no problems connected with the accessibility to education; however, also here there are contradictions with what has been defined by the Law on disability for people with hearing disorders, namely, that a person who acquires the educational program in a vocational basic education institution, vocational secondary education or higher education institution has the right to receive the services of the surdo-interpreter if his hearing disturbances cannot be compensated with technical remedy aids (Article 13, Law on disability, 2010). This could mean that children who want to integrate in general comprehensive schools have no access to such services. To be more precise, this is not guaranteed by the state. Regulations of the Council of Ministers Nr. 942 on the order about conditions for providing the assistant, Appendix 1 about the criteria for ensuring the services of the assistant mentions cases when the assistant's services are available and states that one can claim such services if he attends general education or vocational education institution or studies in a higher education institution. But in this case the assistant's duty is to help to get to and to return from the educational institution and not exceeding 10 hours per week. Thus, we can conclude that the assistant is envisaged for getting to the educational institution but his service is not envisaged for helping the child while at the school (Order in which assistant's services are assigned and funded in the municipality, 2012). The assistant's service in the educational institution is regulated by other regulations of the Council of Ministers Nr. 695 (Order in which assistant's services are assigned and funded in the educational institution, 2012) but also they are based on the Law on disability which define that visually impaired people can be provided with an assistant if they acquire the educational program in vocational basic education, vocational secondary education or higher education institution (Part 1, Article 13). Summarizing all the above said it is possible to conclude that the assistant's services in preschools and general comprehensive basic schools are accessible to children with different functional disorders that influence their moving from place to place, to children with mental disorders but they are not accessible to visually impaired children as well as the services of the surdo-interpreter are not available to children with hearing disorders. Thus we can conclude that also the social rights of children with sight and hearing disorders to receive education closer to their living place and grow in the family are, to a certain extent, limited.

Another problem group is the preschool children who have special needs. Law on general education states that the municipality can establish a special preschool if there are no less than 8 children with special needs if it is demanded

by parents (Article 25, Law on general education). This creates a number of new problems because not always there are 8 children of the particular special needs group and if they are children with different special needs then it complicates the possibilities of the staff to provide the respective support in the pedagogical process. These problems indicate the necessity for municipalities to seek solutions for licensing integrated educational problems also for preschool children.

According to regulations of the Council of Ministers Nr. 709 about the pedagogical commissions one of their responsibilities is to promote the integration of children with special needs living in the administrative territory of the municipality in the general comprehensive educational institutions situated in the administrative territory of the municipality. As it has been mentioned above, the legislative documents of the Republic of Latvia state that it is possible to license 10 different special education programs that correspond to children's special needs. Analysing the publicly accessible information about the licensed educational programs in Latvia (National data base of Learning opportunities) it is possible to make a summary which indicates that the most programs are available to children with mental developmental disturbances and children with learning disorders. The educational programs corresponding to other groups of special needs are licensed considerably less than there are municipalities in Latvia which allows concluding that the above given statements that all children in Latvia are not provided equal rights are true and there is still a long way to go in order to ensure fully the implementation of the principles of inclusive education in the education system of Latvia (see Table 1).

Table 1. Special basic education programs in Latvia (based on data from National data base of Learning opportunities)

Special basic education programs	number
Visually impaired learners	7
Hearing impaired learners	9
Learners with disturbances of physical development	19
Learners with somatic diseases	14
Learners with language disturbances	20
Learners with learning difficulties	224
Learners with mental health disturbances	15
Learners with mental developmental disturbances	302
Learners with serious mental developmental disturbances or several serious developmental disturbances	69

Four different municipalities of Latvia were chosen for a more profound analysis – a regional municipality (1) that is situated rather far from the capital of Latvia. It includes 25 rural regions which means that this municipality is one of the largest in Latvia as to the territory and the largest number of rural regions that are included in this municipality. The second is the regional municipality (2) that is situated in the opposite part of Latvia and is approximately as large as the previous one included in the analysis though it has only 14 rural regions; the third chosen is the municipality (3) that is comparatively smaller but is situated rather close to Riga which could mean that the services are more accessible than in the municipalities that are further away. The fourth chosen is the municipality (4) of a large town. All these municipalities are different and the obtained results are summarized in Table 2. The findings allow concluding that there are municipalities which ensure the respective educational programs to only some groups of children with special needs in the administrative territory of the municipality and this confirms the above expressed assumption that the rights of all children are not satisfied equally.

Table 2. Comparison of provided special basic education program sinanlysed municipalities

Special basic education programs		1	2	3	4
1.	Visually impaired learners				
2.	Hearing impaired learners				
3.	Learners with disturbances of physical development	1			
4.	Learners with somatic diseases				
5.	Learners with language disturbances	1	1		
6.	Learners with learning difficulties	11	1	5	3
7.	Learners with mental health disturbances	4			
8.	Learners with mental developmental disturbances	16	1	3	2
9.	Learners with serious mental developmental disturbances or several serious developmental disturbances	1	1	1	3

Possible solutions:
- To license special education programs in the municipalities for children living in these municipalities who have some special needs and to organize an integrated teaching/learning process (children with special needs learn together with other children). This possibility is envisaged by the Law on general education 1) paragraph of Article 53 – Learners with special needs can be integrated in general basic

education and secondary education institutions that have the corresponding provisions (Article 53).

- To prepare teachers of general comprehensive schools and preschools for work with children with special needs concentrating on those needs that are topical for children living in the municipality. This is envisaged by the regulations of the Council of Ministers on pedagogically medical commissions – to consult teachers, parents and other people on the issues of special education (Regulations of the Council of Ministers No 709, Regulations on pedagogically medical commissions), which means that such kind of organisation of educational process is possible.

- To organize a possibility for the municipality educational institutions to hire learning support materials (computers with special programs, magnifying glasses, slate pencils, etc.) that correspond to the diagnosis for the period of time while the child is attending the particular educational institution. This should be well-considered because these support materials are very expensive and it would be irrational for schools to purchase them because as the child with special needs grows up the school will no longer need these materials. According to 2) paragraph of Article 53 of the Law on general education the availability of corresponding support activities for learners with special needs who are integrated in the general comprehensive school are provided by the educational institution. The educational institution develops an individual plan for acquiring the educational program for each integrated learner with special needs (Article 53).

Conclusions

The current order in Latvia does not ensure equal rights to every child:

1. *The rights to grow up in the family,* which are violated because failing to provide the acquisition of education that corresponds to the child's special needs in the educational institution where the child has to stay for a long period of time violates the child's rights to grow up in the family that the state undertakes to ensure as a priority. Article 26 of the Law on protecting children's rights defines that family is a natural environment for the child's development and growing, and that every child has inalienable rights to grow up in the family. The Law on municipalities establishes that the responsibility of the municipality is also to implement the protection of children's rights in the respective administrative territory which indicates also the necessity not only to organize the acquisition of education but to organize it so that the

child's key rights are respected and he is not discriminated due to his special needs.

2. *The rights to socialize*– they are defined in the law "On revised European social charter" where Article 17 of Part I states that children and young people have rights to respective social, legal and economic protection but these rights of children with special needs are ensured only in segregated environment, it means, together with other children with special needs.

3. *The rights to social equality,* which are defined in the law "On revised European social charter" where Article 30 of Part II states that in order to ensure effective use of the rights to protection against deficiency and social inequality it is necessary to implement general and coordinated measures within the system in order to ensure persons and their families that live or are subjected to the risk of living in deficiency or in the conditions of social inequality with employment, dwelling place, training, education, culture and social and medical care that is not ensured if children with special needs are placed in the educational institutions that are not situated close to their living place.

4. *Prohibition of discrimination* that is established in Article 3 of the Law on protecting children's rights establishing that the state ensures all children the child's rights and freedoms without any discrimination, including the health conditions and Article 91 of Constitution (Satversme) of the Republic of Latvia states that the rights of all people are implemented without any discrimination which is not ensured in all cases in Latvia.

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ŽĒLSIRDĪGO MĀSU SAGATAVOŠANA LATVIJAS TERITORIJĀ 19. GS.

Sisters of Charity Training on the Latvian Territory in the 19th Century

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Abstract. *In 1772 Daugavpils (Dyneburg) was incorporated into the Russian Empire and remained the main city of the province of Daugavpils. In 1796 it was incorporated into Belarus province and later in 1802 into Vitebsk province. In 1864 16 countries joined officially the First Geneva Convention "For the Amelioration of the Condition of the Wounded and Sick in Armed Forces in the Field". In 1867 Russia including Latvia also joined the Geneva Convention. That year the Russian association for wounded and sick soldiers care was established. Over time the Russian association for wounded and sick soldiers care changed its original name. In 1879 it was given the new official name, "the Russian Red Cross Society". The Committees of the Russian Red Cross were established in all the provinces of Russian gubernias, so in Vidzeme and Kurzeme they were in Riga and Jelgava, but Latgale was under the control of the Committee of Vitebsk gubernia. The communities of the Red Cross charity of Mercy were founded to prepare the female sanitary staff for the medical care of the sick and the wounded during the war and to provide nursing care in hospitals, military hospitals and private homes during peacetime. The Vitebsk local committee of the Russian Red Cross supported the activities of Charity Nurses Community in Vitebsk.*

Keywords: *Charity Nurses, the Russian Red Cross, training.*

Ievads
Introduction

Ar Polijas sadalīšanu 1772. gadā, Latgale nonāca zem Krievijas valdības līdz 1918. gadam. Administratīvā ziņā Latgale bija sadalīta trijos apriņķos: Daugavpils (senākais nosaukums Dinaburgs), Rēzeknes (Režica) un Ludzas (Ļucina). 1772. gadā Daugavpili pievienoja pie Krievijas un tā kļuva par galveno pilsētu šajā provincē. Vēlāk, 1777. gadā, šī province bija nosaukta par Polockas guberņas apriņķo pilsētu. 1796. gadā šo teritoriju pievienoja Baltkrievijas guberņai un vēlāk, 1802. gadā, Vitebskas guberņai (Soikāns, 1924).

Dažādu valstu starptautiskā sadarbība palīdzības sniegšanā slimiem un ievainotiem pirmo reizi realizējās 1862. gadā (Сорокина, 1994). 1864. gadā Ženēvas konvencijai „Par ievainoto un slimo karavīru stāvokļa uzlabošanu" oficiāli pievienojas 16 valstis. 1867. gadā Ženēvas konvencijai pievienojās arī Krievija, kuras sastāvā tolaik atradās Latvija. Sarkanā Krusta kustības intensitāte lielākoties saistīta ar kariem (Nagobads, 2003). Pirmo reizi Krievijas biedrības aktivitāte starptautiskā līmenī izpaudās 1870. gadā, kad Krievija sniedza palīdzību ievainotiem franču–prūšu karā (1870–1871). Pēc laika Krievijas ievainoto un slimo karavīru gādības biedrība nomainīja savu sākotnējo nosaukumu. Jauno oficiālo nosaukumu „Krievijas Sarkanā Krusta biedrība" tai piešķīra 1879. gadā (Грибанов, 1990). Krievijas Sarkanais Krusts savas komitejas bija izveidojis visās plašās impērijas guberņās, tātad Vidzemei un Kurzemei tās atradās Rīgā un Jelgavā, bet Latgale bija pakļauta Vitebskas guberņas komitejai. Guberņas Sarkanā Krusta komitejas priekšgalā formāli atradās gubernators, bet komitejas vadībā ietilpa prominentākie sabiedrības pārstāvji – muižnieki, mācītāji, rūpnieki, baņķieri, tirgotāji, arī advokāti, ārsti un skolotāji (Nagobads, 2003).

Krievijas Sarkanā Krusta Biedrības mērķis bija sniegt kara administrācijai palīdzību ievainoto un slimo karavīru kopšanā kara laikā, nodrošinot tiem ārstniecisko un cita veida palīdzību. Miera laikā Biedrības iestādes nodrošināja palīdzību sakropļotiem kara dalībniekiem, izmantojot šim mērķim ziedotās summas. 1893. gada 18. aprīlī apstiprināja Krievijas Sarkanā Krusta Biedrības Statūtus. Tajos noteica biedrības sastāvu un galvenos darbības virzienus. Pamatojoties uz Krievijas Sarkanā Krusta Statūtiem, Biedrības sastāvs veidojās no Biedrības locekļiem (godājamiem, labdarīgiem un faktiskiem) un no sacenšanās locekļiem. Krievijas Sarkanā Krusta nodaļās pastāvēja vietējās Valdības un Biedrības komitejas ievainoto un slimo karavīru kopšanai un tās atradās īpašas Labdarības biedrības pakļautībā. Sarkanā Krusta nodaļās bija zīmogs ar Grieķu krusta zīmējumu un uzrakstu, kur tika uzrādīts nodaļas nosaukums (LVVA, 102.f., 1.apr., 111.l., 2., 4.–5. lpp).

Lielāko karu atbalsis Latvijas teritorijā līdz Kurzemes guberņai nonāca krievu - turku kara laikā (1877–1878). Tieši tad Krievijas Sarkanais Krusts savas komitejas izveidoja visās plašās impērijas guberņās. Latvijā tās darbojās Vidzemes un Kurzemes guberņās (Rīgā un Jelgavā). Krievu–turku kara laikā tās vadīja žurnālists un sabiedriskais darbinieks Aleksandrs Vēbers (1848–1910), kuram par palīdzības sniegšanu slimiem un ievainotiem karavīriem Krievijas Sarkanā Krusta galvenā valde piešķīra divas Sarkanā Krusta goda balvas. 1884. gadā Jelgavas Sarkanā Krusta nodaļas vadību no A.Vēbera pārņēma ārsts Jēkabs Bullis (1852–1887). Pēc viņa nāves šo Jelgavas organizāciju vadīja Jānis Čakste (1859–1927) (Nagobads, 2003). Latgalē Sarkanā Krusta aktivitātes ir saistītas ar Daugavpils Sarkanā Krusta nodaļu (LVA, 2176.f., 1-v apr., 32. l., 6, 28, 32.–34. lpp.).

Viens no Krievijas Sarkanā Krusta uzdevumiem bija nodrošināt slimnieku aprūpi hospitāļos, slimnīcās un privātmājās miera laikā. Līdz ar to šī raksta mērķis bija veikt vēsturisko pārskatu par žēlsirdīgo māsu sagatavošanu Latvijas teritorijā 19. gs., pievēršot uzmanību Daugavpils provincei (ņemot vērā to ģeogrāfisko attālumu no galvaspilsētas), to nodrošināšanu ar māsām. Šīs raksts papildināja pētījumu par žēlsirdīgo māsu sagatavošanu Latvijas teritorijā Krievijas Sarkanā Krusta pastāvēšanas laikā (Odiņa O., Salaks J., (2011), kurā apskatīta māsu sagatavošana Latvijas teritorijā kopumā. Pēc laika uzbūves šīs raksts ir retrospektīvs. Rezultātu iegūšanai, izņemot literatūru, bija izmantoti Daugavpils novadpētniecības un mākslas muzeja materiāli, Baltkrievu Nacionālā vēstures arhīva 2529. fonda lietas, Latvijas Valsts arhīva 2176. fonda un Latvijas Valsts Vēstures arhīva 102. fonda lietas. Darbā izmantotas tradicionālās vēstures izpētes metodes - dokumentu hronoloģiskā sistematizācija un vēsturiski salīdzinošā metode.

Veselības aizsardzības sistēmas stāvoklis Daugavpils provincē
Health care system condition in Daugavpils Province

Līdz 19. gs. civilslimnīcas Daugavpilī nebija (Шипулина, 1960). Tomēr pilsētā darbojās privātas slimnīcas. Katrā slimnīcā bija 5 - 10 gultas vietas. Ārstēšanas maksa šajās klīnikās par vienu dienu bija ap 9 latiem un bija līdzīga viena strādnieka nedēļas algai (Наумова, 1983). Visā pilsētā strādāja viens sanitārais ārsts. Daugavpilī nebija vienotas veselības aizsardzības sistēmas un medicīniskā palīdzība lielākai daļai pilsētas iedzīvotāju nebija pieejama (Шипулина, 1960). 1810. gadā sākās Daugavpils cietokšņa būvniecība. Šajā laikā pilsētā dislocējās hospitālis uz 300 vietām. 1812. gada Tēvijas karš parādīja, ka Dinaburga cietoksnis atrodas izdevīgā kara stratēģiskā vietā, tāpēc pēc kara turpinās cietokšņa būvniecība. 1820. gadā pēc arhitekta A. Štauberta projekta tika uzsākta un 1827. gadā bija pabeigta hospitāļa būvniecība. Šajā gadā hospitālī sāka ārstēt pirmos karavīrus. Hospitālis bija paredzēts 500 gultas vietām. Pirmais galvenais ārsts bija Jefrems Adamovičs. 1837. gadā hospitālis tika paplašināts līdz 900 vietām un kā 4. klases hospitālis, viņš bija viens no nozīmīgākajām Krievijas kara medicīnas iestādēm. Bet jau 1841. gadā šī medicīnas iestāde pārgāja uz 3. kl. 1852. gadā Dinaburga cietoksnī dienēja 15 oficieru, 600 karavīru un 40 sievietes. Hospitālis bija paredzēts 600 vietām. Zūdot Daugavpils cietokšņa stratēģiskajai nozīmei, Pirmā pasaules kara priekšvakarā hospitāli pārveidoja par Daugavpils vietējo kara lazareti (Vīksna, 1983). Pēc laika hospitālis bija vēl reizi pazemināts līdz 2. kl. Sākot no hospitāļa nodibināšanas laikā tur darbojās aptieka (Смертьева, 1990).

Kādu laiku pilsētā darbojās kara dienesta slimnīca. 1863. gadā tajā bija 26 gultas vietas, no kurām 5 bija paredzētas civilam resoram. Pēc diviem gadiem slimnīca nodega (Шипулина, 1960). 1874. gadā hospitālī nodibināja Krievijas

Sarkanā Krusta biedrības Daugavpils komiteju un uzsāka žēlsirdīgo māsu sagatavošanu (Vīksna, 1983).

1878. gadā Daugavpilī darbojās Krievijas Sarkanā Krusta lazarete ar 25 gultas vietām (НГАБ, 2529. ф, 1. оп, 4 д ., 7 л.).1881. gada 6. martā atvērās pilsētas slimnīca ar 40 gultas vietām. Ikmēneša maksa par ārstēšanu tajos laikos bija ļoti augsta: oficieriem – 30 rubļu, parastiem cilvēkiem – 10 rubļu. Slimnīcas medicīnas personāls bija sekojošais: ārsts, Dr. med. I. Šidlovska, uzraugs V. Lesnevska. Vēlāk štata sarakstā ieviesa feldšera amatu. 1884. gadā par slimnīcas galveno ārstu nozīmēja A. Paļmovu, kurš nostrādāja šajā slimnīca vairākus gadus. 1884. gadā pilsētas dome atļāva pilsētas valdei paņemt no sabiedriskās bankas 10-12 tūkstošs rubļus atsevišķas slimnīcas ēkas būvei Sadovaja ielā. Sakarā ar slimnīcas uzbūvi, palielinājās gultas vietu skaits – 73 (Шипулина, 1960).

Žēlsirdīgo māsu sagatavošana Latvijas teritorijā
Charity Nurses training on the Latvian territory

Lai sagatavotu sieviešu sanitāro personālu medicīniskās palīdzības sniegšanai slimiem un ievainotiem kara laikā un nodrošinātu slimnieku aprūpi hospitāļos, slimnīcās un privātmājās miera laikā, nodibināja Krievijas Sarkanā Krusta žēlsirdīgo māsu kopienas (НГАБ, 2529. ф., 1. оп., 65. д., 58- ж. 263, 239–240 л.). Latvijā pirmās Sarkanā Krusta žēlsirdīgās māsas kopienas izveidoja 1867. gadā Rīgā. Sarkano Krustu reprezentēja galvenokārt filantropisku motīvu mudinātas augstākās sabiedrības dāmas – krievu un vācbaltiešu muižnieku kundzes un meitas, pietiekami turīgu aprindu pārstāves. Vienkārša darba cilvēkiem – zemkopjiem, strādniekiem, arī Baltijas pamatiedzīvotājiem – šis cēlais un cildenais darbs bija liegts (Грибанов, 1990). Saskaņā ar Kara Padomes 1879. gada 13. janvāra nolikumu un pamatojoties uz Krievijas Sarkanā Krusta biedrības Statūtiem, lielu uzmanību pievērsa māsu izglītošanai. Māsu sagatavošanai bija izstrādāta apmācības programma, kura paredzēja gan teorētisko gan praktisko kursu (LVVA, 102.f., 1.apr., 16.l., 1.–2.lpp).

Teorētisko daļu audzēknēm lasīja kopienas galvenais ārsts, uzaicināja arī citus ārstus. Skolniecēm mācīja Dieva likumu. Lekcijās viņām stāstīja par cilvēka organisma funkcijām, mācīja anatomiju (par cilvēka kaulu uzbūvi, par organisma galvenajiem asinsvadiem). Mācību laikā skolniecēm sniedza informāciju par ārstniecisko zāļu nosaukumiem un to veidiem. Tāpat māsām sniedza priekšstatu par ķirurģiju un ķirurģiskiem instrumentiem. Topošām māsām stāstīja par medicīnisko aprīkojumu – termometriem, medicīniskajiem un aptiekas svariem. Lekciju laikā pasniedzēji stāstīja par tīru gaisu, ūdeni un pārtikas produktu kvalitāti un to uzglabāšanu. Atsevišķas lekcijas lasīja par Sarkanā Krusta māsu pienākumiem un tiesībām.

Skolnieces apmācīja ievērot nepieciešamo kārtību, uzraugot apkuri un apgaismojumu, un jo īpaši slimnieku kopšanu palātās. Mācību laikā māsām mācīja slimnieku kopšanu un gultas sagatavošanu.

Praktiskās nodarbības notika kopienai paredzētajās ārstniecības iestādēs pie slimnieka gultas ārsta vadībā, vai aptiekās farmaceita uzraudzībā. Ja kopienai tādu telpu nebija, nodarbības notika ārstniecības iestādēs, kuras sadarbojās ar kopienu. Praktisko nodarbību laikā skolnieces apmācīja profesionāli tehniskām iemaņām: kā slimnieku kopšanā lietot saites, kompreses, šinas, sinepju plāksterus un citus līdzekļus. Topošās māsas mācījās uzlikt pārsējus, apturēt asiņošanu, mērīt ķermeņa temperatūru. Mācību laikā pievērsa uzmanību ēdiena gatavošanai un diētas veidiem. Nodarbību laikā skolnieces apmeklēja veļas mazgātavu un iepazinās ar veļas pieņemšanas un izdošanas kārtību slimniekiem. Skolnieces strādāja rokdarbus – laboja slimnieku drēbes un veļu (kreklus ar izgrieztām piedurknēm u. c.), gatavoja un laboja pārsienamo materiālu. Topošām māsām mācīja tīrīšanas un mazgāšanas veidus, apģērba un saišu dezinficēšanu. Skolnieces iepazīstināja ar biežāk sastopamām slimībām (piemēram, ar plaušu karsoni, drudzi, lipīgām slimībām), ar slimnieku kopšanas īpatnībām lipīgo slimību gadījumā. Skolnieces iepazinās ar pārsiešanas paņēmieniem un ar slimnieku pārnešanu. Studējošie vēroja operācijas. Viņus pielaida pie pārsiešanas un slimnieku kopšanas pēc operācijām, mācīja sniegt atskaiti ārstiem par pacienta veselības stāvokli. Praktisko nodarbību laikā slimnīcās skolniecēm ļāva dežurēt naktīs. Nodarbību laikā studējošie piedalījās ārstu apgaitās, mācījās mērīt ķermeņa temperatūru, pārbaudīt pacienta pulsu un elpošanas biežumu (LVVA, 102.f., 1.apr., 16.l., 1.–2., 4, 7.–9, 38, 49, 316, 319, 321 .lpp.).

Aprūpējot trūcīgos pacientus, māsām mācību laikā bez maksas bija jānostrādā 86 dienas (LVVA, 102.f., 1. apr., 99. l., 1, 4.–5,11. lpp.).

Topošās māsas mācījās arī aptiekās un apguva recepšu lasīšanas un rakstīšanas prasmi, iepazinās ar biežāk receptūrā lietotajiem latīņu terminiem. Studēšanas laikā māsām mācīja, kā pareizi rīkoties saindēšanās gadījumos, ģīboņa un dzīvībai bīstamās situācijās. Saskaņā ar vietējiem hospitāļa vai slimnīcas noteikumiem un pēc mācību daļas vadības uzskatiem bija pieļaujamas (gan teorētiskā, gan praktiskā) mācību plāna izmaiņas.

Pēc teorētiskas un praktiskas daļas apguves, saskaņā ar Galvenās valdes apstiprināto programmu, notika zināšanu pārbaude. Audzēknes eksaminēja speciāla komisija, kas sastāvēja no to ārstniecības iestāžu ārstiem, kurās strādāja Kopienas žēlsirdīgās māsas; vecākās māsas; aizgādnieces; padomes locekļi un vietējie vai apgabalu Valdes locekļi.

Pēc mācībām studējošie kārtoja eksāmenu šādos priekšmetos: Dieva Likums; cilvēka organisma uzbūve un artērijas; tīrs gaiss, ūdens un pārtikas produktu kvalitāte; sautējošo komprešu, sinepju plāksteru, dēļu likšana, iešļircināšana, sildīto komprešu sagatavošana; pārsēju sagatavošana un uzlikšana; pirmās palīdzības sniegšana; zāļu līdzekļu veidi un to pielietošana;

ķirurģiskie instrumenti; higiēnas ievērošanas kārtība palātās, veļa un saimniecības piederumi; termometra pielietošana un vannas sagatavošana; pacienta veselības stāvokļa novērtēšanu (apetīte, izdalījumi, elpošanas biežums, miegs, pulss, ādas krāsa, brūces dzīšana un izsitumi); ēdiena gatavošana slimajiem; recepšu lasīšana un rakstīšana pēc diktāta; dažu zāļu sagatavošana; asiņošanas apturēšanas paņēmieni; neatliekamās palīdzības sniegšanas kārtība saindēšanās un ģīboņa gadījumos; māsu pienākumi un tiesības. Sarkanā Krusta biedrības un nodaļas, norīkojot māsas slimnieku kopšanai, ziņoja priekšniecībai par māsas atestāciju (LVVA, 102.f., 1.apr., 16.l., 1.–2., 4, 7.–9, 38, 49, 316, 319, 321. lpp.). Katru gadu pieauga žēlsirdīgo māsu skaits, kuras apguva apmācības programmu. Tā, 1883. gadā mācības beidza sešas audzēknes, 1884. gadā – 24 audzēknes (LVVA, 102.f., 1. apr., 99. l., 1, 4.–5,11. lpp.).

Žēlsirdīgo māsu sagatavošana Vitebskas guberņā
Charity Nurses training in Vitebsk province

1879. gadā Krievijas Sarkanā Krusta kopienas Galvenā Valde izstrādāja nolikumu par Sarkanā Krusta māsu nodaļām, lai organizētu tās teritorijas, kur bija vērojams žēlsirdīgo māsu trūkums (LVVA, 102.f., 1.apr., 16.l., 1.–2., 4, 7.–9, 38, 49, 316, 319, 321 .lpp.). Ņemot vērā tādu situāciju, galvenais Kara Medicīnas inspektors 1891. gada novembrī griežas pie Vitebskas gubernatora ar lūgumu atbalstīt žēlsirdīgo māsu sagatavošanu šajā teritorijā (НГАБ, 2529. ф, 1. оп, 91. д., 1 л.). Pēc gada, 1892. gada 30. decembrī, Vitebskā bija nodibināta vietējas pārvaldes Krievijas Sarkanā Krusta žēlsirdīgo māsu kopiena (НГАБ, 2529. ф, 1. оп, 65 д., 58 и л.). Šo iestādi izveidoja ar mērķi sagatavot sieviešu sanitāro personālu, lai sniegtu medicīnisko palīdzību slimiem kara un miera laikā (НГАБ, 2529. ф, 1. оп, 65- д., 58 л.).

Žēlsirdīgo māsu kopienas darbību Vitebskā atbalstīja Krievijas Sarkanā Krusta Vitebskas vietēja komiteja (НГАБ, 2529. ф, 1. оп, 65 д., 58 а л.). Kopienas sastāvā tika iekļauts aizbildnis un locekļi, ievēlētie ar Vietējo Valdi, uz diviem gadiem (НГАБ, 2529. ф, 1. оп, 65 д., 58 - з л.). Par Krievijas Sarkanā Krusta Vitebskas vietējas valdes priekšsēdētāju 1892. gadā bija ievēlēts padomnieks Rodions Depreradovičs (Родион Васильевич Депрерадович). Bija apstiprināts arī sekojošais valdes locekļu sastāvs: Polockas un Vitebskas bīskaps Antonins (Антонин); padomnieks Mihais Voščinins (Михаил Сергеевич Вощинин); kolēģijas padomnieks Aleksandrs Polesskijs-Sčipillo (Александр Ефимович Полесский-Щипилло); padomnieks Andrejs Djakovs (Андрей Сергеевич Дъяков); padomnieks Pāvels Ossovskijs (Павел Симонович Оссовский); padomnieks Antons Stirikovičs (Антон Фадеевич Стырикович); lietvedis Jakovs Gaļkovskis (Яков Михайлович Гальковский). Par Godāto locekli tika ievēlēts kņazs Vasilijs Dolgorukovs (Василий Михайлович Долгоруков) (НГАБ, 2529 ф, 1. оп, 65 д., 58 а л.).

Vitebskas vietējās Sarkanā Krusta kopienas sapulcē nolēma apstiprināt štata sarakstā 12 žēlsirdīgās māsas (НГАБ, 2529 ф, 1 оп, 65 д., 58 - ж л.). Kopienas nodibināšanas laikā vecākās žēlsirdīgās māsas pienākumus izpildīja Natalja Klementjeva (Наталия Николаевна Клементьева). 1892. gadā kopienā bija reģistrētas 8 topošās žēlsirdīgās māsas (НГАБ, 2529 ф, 1. оп, 65 д., 222 л.). Kopienas māja atrodas Vitebskā, Nikoļska (Никольская) ielā. Tā bija akmeņu vienstāvu māja ar pagrabu (НГАБ, 2529 ф, 1. оп, 65 д., 58 - k л.). Žēlsirdīgo māsu kopiena uzsāka savu darbību 1893. gada 1. janvārī ar 11 pārbaudāmām māsām.

Krievijas Sarkanā Krusta Vitebskas kopienas nolikumu apstiprināja Krievijas Sarkanā Krusta Galvenā Valde 1892. gada 22. augustā. Pēc nolikuma žēlsirdīgo māsu apmācības ilgums bija gads un seši mēneši pēc programmas, kuru apstiprināja Galvenā Valde 1882. gada 19. februārī (НГАБ, 2529 ф, 1. оп, 65 д., 3 л.). Nodarbības sākās kopienas telpās no 1893. gada 7. janvāra un notika katru dienu no plkst. 9.00. (НГАБ, 2529 ф, 1. оп, 65 д., 144 д л.). Katrai topošai māsai (pārbaudāmai) katru mēnesī mācību laikā maksāja 2 rbļ. (НГАБ, 2529 ф, 1. оп, 65 д., 4 л.). Pēc iespējas visas nodarbības notika praktiski. Par mācību līdzekļiem izmantoja skeletu (to piegādāja Kara Medicīnas akadēmijas anatomijas institūts), doktora Fidlera anatomisko karti, doktora Ternera kartes ar instrukcijām par pirmās medicīnas palīdzības sniegšanas paņēmieniem. Topošās žēlsirdīgās māsas nevarēja pilnīgi uztvert materiālu anatomijā, fizioloģijā un higiēnā nepietiekoša izglītības līmeņa dēļ (no visām 11 topošām māsām tikai viena pabeidza skolu). Līdz ar to bija ieviesta šo priekšmetu konspektēšana. Konspektu sastādīšanai bija vēl viens mērķis – apmācīt māsas gramatikai (НГАБ, 2529 ф, 1. оп, 65 д., 144 д л.).

Pirmā mācību kursa ilgums bija pus gads (НГАБ, 2529 ф, 1. оп, 33 д., 2 л.). Šajā kursā divas stundas nedēļā tika mācīts Dieva Likums. Dieva likuma mācības, reliģiozo grāmatu lasīšana un pārrunas notika mācītāja Aleksandra vadībā un bija organizētas trīs reizes nedēļā: pirmdien, trešdien un piektdien (НГАБ, 2529 ф, 1. оп, 65 д., 144 е л.). Elementārās higiēnas kurss, kura laikā māsām sniedza informāciju par slimniekiem piemēroto apkārtējo vidi un ārstnieciskām dietām, notika trīs reizes nedēļā. Tāpat šī kursa ietvaros topošās māsas izglītoja par slimnieka gultas veļas maiņas biežumu, to mazgāšanu un dezinfekciju. Ikdienā, pirmā kursa apmācības laikā, māsām tika mācītas pacientu pārnešanas metodes un ķermeņa pozicionēšanas veidi gultā dažādu ievainojumu gadījumos. Lielu uzmanību pirmajā kursā pievērsa arī palātas vēdināšanai un virsmas dezinfekcijai. Trīs reizes nedēļā māsām tika mācīta anatomija (cilvēka ķermeņa īss apraksts). Šī priekšmeta apguvei par demonstrācijas līdzekļiem, izņemot skeletu, izmantoja arī anatomiskus zīmējumus vai uzskates līdzekļus, izgatavotus no izkrāsota ģipša, lai novērstu māsu pieskaršanos pie līķiem. Tāpat trīs reizes nedēļā topošām māsām tika mācīta fizioloģija - mācība par galvenajām cilvēka ķermeņa funkcijām. Mācību laikā māsām sniedza priekšstatu par iekšķīgām un infekcijas slimībām un apmācīja, kā rīkoties šo

slimību gadījumos. Divas reizes nedēļā tika mācīts kā sniegt palīdzību grūtniecēm un kopt jaundzimušos. Par ādas slimībām sniedza informāciju trīs reizes nedēļā, par ķirurģiskām slimībām ar dismurģiju − divas reizes nedēļā (НГАБ, 2529 ф, 1. оп, 33 д., 2 л.).Tāpat māsas apmācīja mērīt ķermeņa temperatūru, noteikt pulsu un elpošanas biežumu, sekot slimnieka izdalījumiem (krēpu, sviedru, urīnu un asinīm). Mācību laikā uzmanība bija pievērsta arī farmakoloģijas pamatiem: zāļu sagatavošanai, izmantojot aptiekas svarus. Nodarbības notika hospitālī un aptiekās. Topošās māsas izglītoja par hospitāļu higiēnu, neatliekamās palīdzības principiem, sniedza priekšstatu par Hospitāļu Statūtiem (НГАБ, 2529 ф, 1. оп, 65 д., 144 е л.).

No 1893. gada 1. jūlijā sākās otrais mācību kurss – praktiskais. Sākot ar šo laiku nodarbības notika slimnīcā, slimnīcas virtuvē, aptiekā un veļas mazgātavās (НГАБ, 2529 ф, 1. оп, 65 д., 144 д л.). Šī kursa ilgums bija viens gads (НГАБ, 2529 ф, 1. оп, 33 д., 3 л.). Māsu praksi kontrolēja slimnīcas vecākais ārsts un ordinatori. Topošo māsu slimnieku kopšanā apmācīja slimnīcas vecākā māsa (НГАБ, 2529 ф, 1. оп, 65 д., 144 е л.). Tāpat praktiskās nodarbības laikā māsas nodarbojās ar rokdarbiem: izgatavoja un mazgāja marles saites, laboja gultas veļu un tml. Topošās māsas vairākas reizes dienā apmeklēja un novēroja slimniekus palātās, asistēja ārstiem operācijas laikā un izpildīja visus ārsta norādījumus. Topošas māsas atzīmēja slimnīcas žurnālā par slimnieku veselības stāvokļa izmaiņām: kontrolēja ķermeņa temperatūru, pulsa un elpošanas biežumu un ārstēšanas dinamiku (НГАБ, 2529 ф, 1. оп, 33 д., 3 л.).

1894. gadā kopienā bija viena žēlsirdīgā māsa un vienpadsmit topošās (pārbaudāmās) māsas. Visas bija pareizticīgas (НГАБ, 2529 ф, 1. оп, 65 д., 144 д л.). Pēc programmas apgūšanās, žēlsirdīgās māsas saņēma titulu „Sarkanā Krusta māsa” un strādāja kopienā. Žēlsirdīgās māsas nodrošināja ar dzīvokli un uzturēšanās līdzekļiem. Pamatojoties uz Vitebskas biedrības Sarkanā Krusta žēlsirdīgās māsas kopienas nolikumu (Vitebskas vietējas valdes Krievijas Sarkanā Krusta kopienas protokols no 25.02.1893.), katru mēnesi māsām maksāja no 2 līdz 5 rubļiem. Vecākā māsa saņēma 16 rbļ. mēnesī (НГАБ, 2529 ф, 1. оп, 65 д., 3 л.).

Žēlsirdīgo māsu darbība
Activities of Charity Nurses

Krievijas Sarkanā Krusta Galvenā Valde pēc krievu – turku kara, saskaņā ar Biedrības Aizstāves, Valdnieces Ķeizarienes pavēli, nolēma nodrošināt kara hospitāļus ar žēlsirdīgām māsām. Šo lēmumu pieņēma tāpēc, ka Biedrībās bija pamanāms māsu trūkums, viņas varēja nodrošināt vienīgi galvaspilsētas hospitāļus un dažas guberņas. Kara Padome, saskaņā ar Galveno štābu Sanktpēterburgā 1879. gada 23. janvārī izdeva pavēli, lai nodrošinātu 4. un 3. klases hospitāļus ar žēlsirdīgām māsām. Vienai māsai bija jāaprūpē 50 pacienti. Hospitālī jābūt vienai vecākajai māsai, 2. un 1. klases hospitāļos (arī

pushospitāļos) bija nolemts palielināt esošo māsu skaitu vēl par vienu māsu katrā hospitālī (LVVA, 102.f., 1.apr., 111.l., 2., 4.–5. lpp.). Visas māsas darba vietās bija jāalgo saskaņā ar Kara resora 1873. gada pavēli Nr. 80 „Par štatu māsām". Visās kara ārstniecības iestādēs, kurās strādāja žēlsirdīgās māsas, par katru māsu bija veikta iemaksa vietējās Biedrības aizgādnībā par ievainotiem un slimiem karavīriem. Māsām, pildot savus pienākumus hospitāļos un saslimšanas gadījumā zaudējot darba spējas, piešķīra pensiju tajā pašā apmērā 15 gadus ātrāk. Žēlsirdīgām māsām, kuras dienesta laikā bija ievainotas vai kļuvušas invalīdes, bija tiesības saņemt Krievijas Sarkanā Krusta Komitejas aizsardzību (LVVA, 102.f., 1.apr., 16.l., 1.–2., 4, 7.–9, 38, 49, 316, 319, 321 .lpp.).

1894. gada 21. septembrī Apgabalu Štābs izsludināja paziņojumu ar Nr. 16342, kurā bija minēts, ka gadījumā, ja ārstniecības iestādēs Vitebska apriņķī rodas vakances žēlsirdīgo māsu darbam, jāgriežas Vitebskas vietējā valdē (НГАБ, 2529 ф, 1. оп, 65 д., 245 л.). Ņemot vērā Sabiedriskās Apgādības pavēli no 1894. gada 31.oktobra ar Nr. 2731., Galvenā Valde paziņoja, ka ir nepieciešams ieskaitīt žēlsirdīgās māsas štata sarakstā sekojošās pilsētas slimnīcās: Vitebskā – divas, Polockā un Daugavpilī pa vienai, ar uzturēšanas naudu 180,00 rbļ. gadā katrai. Tāpat šīs māsas nodrošināja ar dzīvokļiem slimnīcās, par ēdināšanu katrai maksāja 9 rbļ. mēnesī (НГАБ, 2529 ф, 1. оп, 65 д., 244 д. л.).

Sakarā ar holeras epidēmijas izplatīšanos 1894. gadā, cīņai ar to no Vitebskas māsas komandēja uz Rēzekni, Daugavpili un Krāslavu. Māsu uzturēšanu nodrošināja tās iestādes, kurās viņas strādāja. Māsām izdeva apliecības bezmaksas braukšanai komandējamās vietās (НГАБ, 2529 ф, 1. оп, 65 д., 239 л.). Slimnieku kopšanai Daugavpils apriņķī komandēja vairākas māsas. Marija Tjunina (Мария Тюнина) un Sofija Kušeļevskaja (София Кушелевская) strādāja Rēzeknē no 13.08.1894. līdz 12.09.1894. Par savu darbu katra saņēma atalgojumu 30 rbļ. apmērā. Marija Kovaļevskaja nostrādāja Daugavpilī no 26.09.1894. līdz 16.11.1894., saņemot par to atlīdzību 38 rbļ. apmērā. Sofija Kušeļevskaja (София Кушелевская) un Ļubova Lempickaja (Любовь Лемпицкая) bija nosūtītas uz Krāslavu. Sofija Kušeļevskaja (София Кушелевская) nostrādāja tur no 17.11.1894. līdz 6.12.1894. Ļubova Lempickaja (Любовь Лемпицкая) strādāja Krāslavā no 18.11.1894. līdz 22.12.1894. Par savu darbu katra saņēma atalgojumu 38 rbļ. apmērā (НГАБ, 2529 ф, 1. оп, 65 д., 240 л.). Runājot par Krāslavu, 1789. gadā grāfiene Auguste Plātere Oginskis (Augusta z Ogiński Broel Platerowa; 1724 – 1791) uzcēla tur pirmo slimnīcu, kur priestera Vincenta de Paula (Vincent de Paulo;1581–1660) apvienības 8 žēlsirdīgās māsas kalpoja nabagiem un slimajiem (Gedroyc, 1908). Šo māsu darbība bija pārtraukta 1864. gadā, jo māsas atbalstīja nemierniekus poļu sacelšanās laikā (Schletz, 1960).Māsu mītnē Krāslavā iekārtojās krievu policija, bet kapliča tika pārvērsta par pareizticīgo baznīcu (Zeile, 2006).

1895. gadā Sarkanā Krusta Galvenā Valde ieviesa ierosinājumu par žēlsirdīgo māsu sagatavošanu. Lai sagatavotu vairāk žēlsirdīgo māsu noteiktā teritorijā un neapgrūtinātu Sarkanā Krusta kopienu ar žēlsirdīgo māsu uzturēšanu tikai uz saviem līdzekļiem, bija rekomendēts apmācītas žēlsirdīgās māsas par atalgojumu sūtīt darbam uz pilsētas, privātām slimnīcām, kara hospitāļiem. Šajā gadījumā kopiena varēja paplašināt savu darbību, gatavojot jaunas žēlsirdīgās māsas. Savukārt, māsas, kuras kādu laiku nostrādāja ārstniecības iestādēs, var būt atsauktas atpakaļ kopienā, aizvietojot viņas ar jaunām māsām, lai apmācītu tās slimnieku kopšanā. (НГАБ, 2529 ф, 1. оп, 65 д., 238 л.)

1895. gada 1. janvārī Vitebskas kopienā bija 9 žēlsirdīgās māsas (tajā skaitā arī vecākā māsa), pārbaudāmās – 6, rezervē – 2. (НГАБ, 2529 ф, 1. оп, 65 д., 237 л.). 1895. gadā ar ķeizarienes Marijas atļauju, visās Sarkanā Krusta kopienās bija organizēta naudas vākšana, lai organizētu fondu un nodibinātu patvērumu vecām un slimām žēlsirdīgām māsām (НГАБ, 2529 ф, 1. оп, 65 д., 263 л.).

Diskusija
Discussion

Pateicoties Sarkanā Krusta organizācijas darbībai, kuru 19. gs. aktīvi atbalstīja arī Krievija (Latvija bija Krievijas impērijas sastāvā), liela uzmanība bija pievērsta žēlsirdīgo māsu sagatavošanai. Kā jau zināms, Latvijas teritorijā māsu apmācību organizēja Rīgā, žēlsirdīgo māsu kopienās, sākot no 1879. gadā. Līdz ar to māsu sagatavošanai bija izstrādāta apmācības programma. Diemžēl, neizdevās atrast informāciju par māsu apmācības programmas ilgumu.

Savukārt, šīs raksts tika veltīts žēlsirdīgo māsu sagatavošanai Latvijas teritorijā 19. gs., akcentējot uzmanību Latgalei, tieši – Daugavpils provincei, jo šis reģions atradās diezgan tālu no galvaspilsētas. Ir zināms, ka Daugavpilī 1874. gadā hospitālī nodibināja Krievijas Sarkanā Krusta biedrības Daugavpils komiteju un uzsāka žēlsirdīgo māsu sagatavošanu. Tomēr neizdevās atrast dokumentus, cik ilgi notika māsu sagatavošana, par apmācīto māsu skaitu, kāds bija apmācības programmas saturs (vai bija vispār) un ilgums. Māsu apmācībai bija nepieciešama mācību bāze – slimnīcas. 1878. gadā Daugavpilī darbojās Krievijas Sarkanā Krusta lazarete ar 25 gultas vietām. Vēlāk, sakarā ar slimnīcas uzbūvi, palielinājās gultas vietu skaits – 73. Pēc tā var spriest, ka bāze māsu apmācībai Daugavpilī tomēr eksistēja. Tomēr trūkst arī informācijas par māsu skaitu Daugavpils provincē. Epidēmijas laikā žēlsirdīgās māsas no Vitebska komandēja uz Daugavpils provinci. Tas liecina, ka šajā teritorijā bija pamanāms māsu trūkums. Acīmredzot, Vitebskā notika aktīva māsu sagatavošana un nepieciešamības gadījumos arī Daugavpils province bija nodrošināta ar māsām, pateicoties savai teritoriālai izvietošanai. Analizējot Baltkrievu Nacionālā vēstures arhīva dokumentus, ir noskaidrota māsu apmācības programma un

studiju ilgums (gads un seši mēneši) Vitebskā. Pēc sava saturā tā bija līdzīga māsu apmācības programmai Rīgā. Pēc tā var spriest, ka māsu apmācības ilgums arī bija līdzīgs.

Secinājumi
Conclusions

Krievijas Sarkanā Krusta darbības laikā Daugavpils province bija iekļauta Vitebskas guberņā. Viens no Krievijas Sarkanā Krusta mērķiem bija žēlsirdīgo māsu sagatavošana un apmācība. Ņemot vērā, ka šajā laikā māsu apmācībai bija izstrādāta un apstiprināta programma, var teikt, ka šajā laikā sākās māsu profesionāla sagatavošana.

Analizējot žēlsirdīgo māsu apmācības programmas saturu Latvijas teritorijā 19. gadsimtā, var secināt, ka programmas bija līdzīgas gan Rīgā, gan Vitebskā (mūsdienās Baltkrievijā). To var paskaidrot ar to, ka Latvijas teritorija bija iekļauta Krievijas Impērijā. Līdz ar to, runājot par māsu sagatavošanas ilgumu, balstoties uz arhīva materiāliem, var pieļaut, ka tas bija vienāds (gads un seši mēnesi) visā Latvijas teritorijā.

Žēlsirdīgo māsu profesionālā apmācība pēc izstrādātas programmas notika arī žēlsirdīgo māsu kopienā Vitebskā (mūsdienās Baltkrievijā). Šajā laikā Latgalē bija pamanāms žēlsirdīgo māsu trūkums. Pateicoties šai māsu kopienai, arī Latgale nepieciešamības gadījumos (piem., holeras epidēmijas laikā) bija nodrošināta ar žēlsirdīgo māsu palīdzību.

Summary

In 1772 Daugavpils was incorporated into the Russian Empire and remained the capital city of Daugavpils province. In 1796 this province was incorporated into Belarus province and later in 1802 into Vitebsk province.

16 countries joined officially the First Geneva Convention „For the Amelioration of the Condition of the Wounded and Sick in Armed Forces in the Field" in 1864. In 1867 Russia, having Latvia as a part of it, also joined the Geneva Convention. That year the Russian society for wounded and sick soldiers care was established. Over time the original name of the Russian society for wounded and sick soldiers care was changed. In 1879 it was given the new official name - „the Russian Red Cross Society". The Committees of the Russian Red Cross were established in all the provinces of Russian gubernias, so in Vidzeme and Kurzeme they were in Riga and Jelgava, but Daugavpils province was under the control of the Committee of Vitebsk gubernia.

The communities of the Red Cross Sisters of Charity were founded to prepare female sanitary staff for medical care of the sick and wounded during the war and to provide nursing care in hospitals, military hospitals and private homes during peacetime. The Vitebsk local committee of the Russian Red Cross supported the activities of Sisters of Charity Community in Vitebsk.

Taking into account the fact that this time nursing training programme was developed and approved, it can be said that it was the beginning of nursing professional training. Analyzing the sisters` of Charity training programme content on the Latvian territory and Vitebsk province, it can be concluded that the programmes were similar. This can be

explained by the fact that the Latvian territory was incorporated into the Russian Empire. Speaking about the nursing training time, based on the archival material, it can be supposed that it was the same (one year and six months) across the Latvian territory. Sisters of Charity professional training according to the developed and approved programme was held in the sisters of mercy community in Vitebsk (now Belarus), too. During this time there was an apparent lack of sisters of mercy in Latgale. Thanks to this community even in Latgale in emergency cases (e.g. cholera epidemic) care was provided with the help of sisters of Charity.

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SYMPTOMATIC SPEECH DISORDERS - THEORETICAL BASIS AND PRACTICAL APPLICATIONS

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Abstract. *Area of symptomatic speech disorders in person with sensory disabilities still stands on the edge of the interests of professionals. The article deals with the issue of speech therapy, special education of person with hearing impairment, and special education of person with visual impairment. Disruption of communication for people with sensory disabilities is one of the determinants of the quality of life. Within a broader theoretical framework symptomatic speech disorders in person with visual and hearing disability will be planted partial results of research with qualitative orientation. The exhibition will include in particular the issue of awareness, experience, access and awareness of speech therapists in the intentions of the issue.*

Keywords: symptomatic speech disorders; sensory impairment; communication disorder; speech therapists.

Introduction

From an infant's birth, parents and the infant begin an exchange of communication that lays the groundwork for their relationship. As children become older, they learn to understand more of what their parents are communicating and find ways to communicate consistently their need and want to their parents. Long before formal language emerges, children and parents are communicating through preverbal methods. The presence of a visual or hearing impairment intermits conventional preverbal communication and differences develop in the ways children communicate and the topics about which they communicate (Sapp, 2001). Nowadays for hearing and visual impaired children there are many opportunities that provide enhanced ways hearing and visual stimulation.

In the context of increasing incidence of multiple disabilities and also increasing demands on professionals who provide intervention, we focused on the current relatively marginalized issue – symptomatic speech disorders in people with sensory impairment. Our main goal was the exploration of current needs of special education practice.

The intention of presented research was exploration of the current state from the perspective of speech therapists and identification of specific and potentially problematic aspects. Due to this plan was designed mixed design research, this paper is focused on qualitative part of the research. Qualitative

data, obtained through semi-structured interview method, serve us as primary probe; strive for a deeper insight into the current state.

Children with hearing impairment

Authors (e.g. Estabrooks, 2006; Landolfi et al., 2011) believes, that the main tasks of the speech therapy in children with hearing loss are acoustic, visual and stereognostic attention, hearing perception, communication as principal requirement for verbal language in all its aspects (phono-articulation, lexicon, morphosyntax) and cognitive skills as well; it is always necessary referring to the mainstream development scales and considering the gap between impaired children and normal hearing peers. „Communication, cognition, language, and speech are interrelated and develop together. It should come as no surprise to us that the key to intervention with deaf children is to establish, as early as possible, a functional communication system for the child and the parents. Early intervention programs need to be multidisciplinary, technologically sound and most important; it should take cognizance of the specific context (community, country) in which the child and family function" (Daneshmandan et al. 2009, p. 363). The study of building the alphabetic principle (Bergeron et al., 2009) suggests that children who are deaf or hard of hearing, even those who have delays in language, are able to learn the foundation for the alphabetic principle during pre-kindergarten. Although the long-term consequences of early instruction on the alphabetic principle need to be explored, such a finding holds promise for improving literacy skills of children who are deaf or hard of hearing.

The field of hearing impairment has more correlations toward speech therapy and is typically in sphere of interest of experts in this area. It is the most debated topic in the area of symptomatic speech disorders, and also most well known among the speech therapists.

Children with visual impairment

In children with congenital blindness or profound visual impairment, several studies have found a developmental delay in first-order false belief performance compared to typically developing children (Pijnacker et al., 2012).

Researchers (Rowland, 1984; Sapp, 2001) have specifically investigated the development of preverbal communication in children with visual impairments. They found several similarities between preverbal communication in children with visual impairments and those with typical sight. Children with visual impairments produce typical quantities of vocalizations and engage in the same communicative functions and similar communicative routines (Chen, 1996). Additionally, if children have low vision, they use shared gaze and pointing as means of preverbal communication (Preisler, 1991). The findings of Pijnacker et al. showed: „when using appropriate, verbal tasks, children with a

variety of congenital visual impairments had no developmental delay in more advanced theory of mind understanding. Despite a limited access to visual information during interactions (e.g. joint attention, mutual gaze, facial expressions, and gestures), children with congenital visual impairment can develop an effective theory of mind" (2012, p. 2446).Currently, very little is known about the ability of people who are blind to interpret speech accompanied by nonverbal information. The findings lend support for the premise that people with visual impairments are able to make correct assumptions about intentions, feelings, and attitudes of other people on the basis of available information during communication. The results also suggest that the lack of direct access to gestures and facial expressions during communication does not tend to impair the understanding of utterances by people who are blind (Sak-Wernicka, 2014).

Study of Dickinson & Taylor (2011) shows that if hearing is compromised, then an observer's speech-reading ability is sensitive to changes in vision. It is likely that visual loss will have consequences for speech-reading ability. This will be particularly relevant to the elderly population who are often found to have a dual sensory loss that causes compromise to both visual and auditory sensory reception. Some of the difficulties in communication reported by the elderly with reduced hearing could be visual as opposed to auditory in origin. Research of Bruce (2002) shows, those children who are visually impaired and have additional disabilities may experience the greatest risk factors for developing ineffective communication skills.

Methodological aspects

Design of research combines quantitative and qualitative dimension. In this paper we focus only on the qualitative aspects of symptomatic speech disorders in people with sensory disabilities. The intention was exploration of the current state from the perspective of speech therapists and identification of specific and potentially problematic aspects. Due to this plan was designed mixed design research. Qualitative data serve us as primary probe; strive for a deeper insight into the current state. In this context, do not seek to generalize the results to the entire population of the speech therapists, but rather a description of the specific aspects and open space for applied research. Qualitative research usually emphasizes that the results have to be read locally in a certain context. We leave it to the reader to be learned from the results, to made subjective conclusions and reflect it further in theory and practice.

Data management, analysis and interpretation of data

Further to the principle of hermeneutical spiral took place a process of data management (i.e. the process of interaction between data acquisition, data reduction, data capturing and extrapolation of conclusions) cyclically. In this

concept, the implementation of research closely linked with data management and process of analysis and interpretation of findings.

An integral part of data management is the phase of systematization of data. Based on the expertise we have used technique of summarizing protocol with emphasis on the techniques of qualitative content analysis. The basic idea is to unify the level of generality of presented information and increasing proportion of abstraction (Hendl, 2008).

Several techniques was applied for reduction - deletion of repetitive testimony, generalization of testimony, the construction of several specific statements into a single global, integration of certain content testimony to another global group, leaving selection key bindings allow testimony and linking content-related statements from different „locations" of interview (Hendl, 2008). During data management, we tried to use a variety of these methods. This was followed by content analysis based on the identification of key categories and subcategories and description of representative statements (see Table 1.) of the respondents (see Table 2.). Key factors and their interaction are illustrated in Figure 1.

On qualitative analysis can be viewed differently. In keeping with selected problems we prefer descriptive approach to the analysis, which is based on the premise that the process of rationalization, classification and description are themselves the analytical procedure and deeper analysis outside of these processes is highly speculative. The basic elements of applied strategies in the evaluation of qualitative data are thematic analysis and the search for links between phenomena.

Table 1. Data management, analysis and interpretation of data

CATEGORY OF MEANING	THE OVERARCHING STATEMENT
„No-experience"	From the perspective of speech therapy practice is incidence of these cases „as saffron" (reduced possibility of obtaining personal experience). In the case of obtaining these clients the transfer of clients to „more competent" experts.
Resources of information	The primacy of the Internet; basis even from universities; specialized courses in preparation of attestation; mediated experience (experienced colleagues) versus „I'm not interested."
Stint knowledge about symptomatic speech disorders	Basis versus practically useful level of information
I do what I can do	„Send the client further „ - more experienced colleagues over gold.
„No-interest"	Are you interested in working with these clients? „Oh, God, no! "
Absence of specialized literature	„Due to modern trends some literature is lacking." versus „I need not solve this problem, I do not think it would be in short supply."

Information versus fear of used it	I want information, I have it, but I'm afraid to use it in practice.
Practice is the key	Practical experience above all else.
Delayed speech development	Delayed speech development as a charm - without practical experience but it is only a vague notion.
Own initiative	„I am asking colleagues to experience. "
Specialized institutions	Absence of specialized kindergartens.
Fear of nescience	I do not have enough information - I cannot work with clients; „The case with which I met, It was interesting for me, but I must admit that, if I worked with a similar clientele, I need to have special training. I myself feel that I'm not sure in the many things, and it would not happen to me. „
Individualization	„... by this time, I met with a similar case. I had myself interested in the boy's visual impairment so I techniques, with whom I also worked in the kindergartens, the most adapted himself. „
Team approach	„On the other procedures we have consulted with the director and the entire team in kindergarten ..."consultations with a wide range of experts - special needs teacher, phoniatrist, ENT doctor, psychologist, another speech therapist.
Social dimension	The biggest problem is not the primary disability and associated symptomatic speech disorders, but integration into the collective.
Orientation in available resources	Enough literature versus insufficient focus on it – „If person looked for, so finds!"
„No-necessity of" aids	„There are already many aids that are expensive, and some perhaps unnecessary." versus „... it was difficult, because our institution does not have many aids to work with these children." „... I tried on our own production of suitable aids"; Differences between hearing and visual impairment (lack of tools for clients with visual impairments).
Verbalism as reality	„It was an experience I tried using visual aids (items, toys) to the child to clarify the meaning of words." „Every child is completely different. The biggest problem I think is already being mentioned verbalisms, which brings them enormous difficulties in daily life and in school. „
Awareness versus experience	„I have awareness, but I have no experience."
Theory versus practice	„In theory, it is enough literature; it is difficult to find publications on the methodology of work with these children."
Lifelong learning	„Certainly some information I have, but I cannot definitely say that I am an expert. When I was working with such a child, I had a lot of information to study."
Co-verbal behaviour	„Of course, the problem is co-verbal disturbed behaviour. For some clients, it is such a serious problem that can be considered as persons with reduced intellect."

Communicative competences and their lack	Sign language and oral communication - their continuous support and development.
Disproportion of information (visual versus hearing impairment and its consequences)	„Now, yes. There was some information about children with visual impairment that I had to look. In children with hearing impairment, this information is more known and more studied."
Cochlear implant as frequent topic	„Yes, this is a much debated topic both at conferences and in the literature."
Expertise and its subjective perception	For clients with hearing impairment yes, for clients with visual impairment do not.

Table 2. Summary data for interviews

Research sample - the number of interviews	9
Structure of the sample by gender	Only female (100 %)
The average length of practice	16,6 years
Departmental affiliation	- Department of MLSA (Ministry of Labour and Social Affairs): 5 respondents - Department ofMEYS (Ministry of Education, Youth and Sports): 4 respondents

Figure 1. Determinative variables in field of symptomatic speech disorders in persons with sensory disabilities from the perspective of speech therapists

Conclusion

Theme symptomatic speech disorders in persons with sensory disabilities currently stands at the edge of theoretical interest of experts in the field, and on the basis of our investigation, experts from speech practice, despite the fact that it may be more or less essential to the development of the individual and his communication. Speech disorder in these individuals is a dominant problem in terms of primary disability, but may significantly affect the quality of life of individuals, especially its psychosocial dimension. The nature and specific features of symptomatic speech disorders in persons with sensory disabilities were outlined in the theoretical section of the article. We wondered what attitude to this issue have speech therapists in practice, what are their experiences and needs. In-depth analysis of qualitative data showed some minor questions that provide space for deeper reflection and further applied research.

The qualitative study was designed with the following research questions:

- Which experiences have speech therapists with clients with sensory disabilities and symptomatic speech disorders?
- Do they have enough competences to work with people with sensory disabilities?
- Do they have enough information about the symptomatic speech disorders and especially information about visual and hearing impairment?
- Is work in this field characterized by interdisciplinary cooperation?
- What are for speech therapists the biggest challenges?
- What aspects of symptomatic speech disorders solve speech therapists the most?

The data show that the majority of respondents (speech therapists) already had some experience with clients with sensory disabilities. But many of them, however, admits, that they felt not enough competences for working with these people, and therefore turned instead to other professionals - client was send to their care. In this context, speech therapists also admits, that they lack sources of information in the scientific literature. However, positively looks possibility of cooperation with other experts. The majority of respondents knows on where to turn for help and with other professionals actively cooperates. But only in a few cases we can describe this cooperation as interdisciplinary. From the testimony provided by the respondents, it is clear that the biggest challenge for speech therapists are clients with visual impairment, in which the most common problem is verbalism. Speech therapists suggest that compared to persons with hearing impairment have about clients with visual impairment less information, and they don´t know the specific methodology of work with these clients. Appropriate table illustrates their testimonies.

The collected data has surfaced several aspects which in our conditions determine the care of individuals with sensory disabilities from the perspective

of speech therapists. The positions listed in the above table, illustrate the current situation and provide insight into our initial relatively unexplored area of interest. At the same time point to some key problematic issues and shortcomings. Open questions were mainly available sources and literature, the use of tools, training opportunities and more. Accentuated, however, was mainly subjective plane in terms of personal motivation, experience, sense of competence, flexibility in approaches, personal interest, lifelong learning and interdisciplinary, or transdisciplinary approach. Mutual interaction determinant indicates the above diagram. As part of that investigation, we have not sought generalizations and draw valid conclusions in general; our aim has been the primary qualitative probe into a relatively neglected area. She will then provide space for a wider analysis through quantitative design. In keeping with qualitative analysis, we sought particular description of the current status and description of key characteristics. Other aspects already outline the quantitative part of the research.

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ĢIMENES UN PIRMSKOLAS SADARBĪBAS LOMA BĒRNU SAGATAVOŠANĀ SKOLAI

The Family and Pre-school Collaboration Role for the Child's Preparation to School

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Abstract. *The child's preparation for school is a period of laying the foundations for a child's future social inclusion. Children's preparation for school is as important a problem as the child's comprehensive development of pre-school age. Preparation for school is a continuous process that starts from the arrival of the child's pre-school and continues until the transition for school. Preparation for school is a socialization process that is child self-determination in the new social environment basis. Socialization, comprehensive child's preparation for school is a very important problem that exists preschools for students with visual impairments. Modern education is a main objective the child's individuality educational support. The child's personality development can be only in a family and pre-school collaboration.*

Keywords: *students with visual impairments, interaction, pre-school, preparation of school, environments, socialization, social preparadness.*

Ievads
Introduction

Nostādnes dokuments izglītībā izvirza prasības valdībām izglītības procesā iekļaut vecākus, jo tikai ar vecāku atbalstu, kur viņi tiks iekļauti izglītības procesā kā līdzvērtīgi partneri, izglītība būs sekmīgāka (Education for all. Diversity as an opportunity for school education, 2008). Mijdarbībai starp pieaugušajiem un bērniem, kurā ikviens tiek sadzirdēts un pamanīts, ir būtiska nozīme bērna attīstībā. Ir pierādīts, ka ģimenes mācīšanās vide ir kā pirmā sociālās un izglītojošās pieredzes gūšanas vieta, kas jau sākotnēji ir atstājusi manāmu ietekmi bērna attīstībā (Bronfenbrenner, 1979 u.c.), tāpēc pedagogam, veidojot saikni starp ģimeni un pirmskolu, ir iespēja veiksmīgi turpināt bērna attīstību. Pirmskolā notiek bērna sagatavošana skolai, kas ieliek pamatu bērna turpmākai iekļaušanai sabiedrībā citā izglītības pakāpē, citā institūcijā pilnīgi jaunajā sociālajā vidē, kas prasa no bērniem noteiktu zināšanu, prasmju un iemaņu kompleksu, pastiprināto ar personīgo pieredzi. Sagatavošana skolai ir nepārtraukts process, kas sākas no bērna ierašanās pirmskolā un turpinās līdz pārejai mācībām skolā.

Bērns ar speciālām vajadzībām, šī raksta kontekstā – bērns ar redzes traucējumiem, viena no mērķauditorijām, kas veiksmīgi iesāk mācības

vispārizglītojošajā skolā, bet kuru turpmāka socializācija pilnā mērā ir atkarīga no personīgās pieredzes no vienas puses un zināšanām un prasmēm no tuvākās vides, ko iepriekšējā izglītības pakāpē veido pirmsskolas iestāde un ģimene.

Pētījuma mērķis: balstoties uz teorētiskiem avotiem, akcentēt vides noteicošo lomu bērna ar redzes traucējumiem sagatavošanā skolai un izvērtēt pētījumā vecāku viedokli par bērna ar speciālām vajadzībām gatavību skolai.

Pētījuma metodes: zinātniskās literatūras, izglītību regulējošo normatīvo aktu un politikas plānošanas dokumentu analīze, anketēšana, datu attēlošanas metodes, izmantojot SPSS programmu.

Teorētiskās pamatnostādnes
Theoretical guidelines

Bērna sagatavošana skolai ir viens no svarīgākajiem uzdevumiem pirmsskolas posmā. LR Vispārējās izglītības likums nosaka, ka bērniem no piecu gadu vecuma sagatavošana pamatizglītības ieguvei ir obligāta (Vispārējās izglītības likums, 1999). Tikai tās risinājums vienotā veselumā ar citiem pirmsskolas izglītības uzdevumiem, spēj nodrošināt bērna vispusīgu harmonisko attīstību. Bērnu sagatavošana skolai ir tik pat svarīga problēma kā bērna vispusīga attīstība pirmsskolas vecumā.

Viens no svarīgākiem aspektiem, kas ietekmē sagatavošanas skolai pakāpi ir bērna attīstība, psihofizioloģiskais stāvoklis un mācību uzsākšanas laiks. Sagatavošana skolai sākas pirmskolā atbilstoši Valsts pirmsskolas izglītības vadlīnijām, kas nosaka pirmsskolas izglītības satura mērķus un uzdevumus, pedagoģiskā procesa organizācijas principus, pirmsskolas izglītības apguves plānotos rezultātus un vērtēšanas pamatprincipus (Noteikumi par valsts pirmsskolas izglītības vadlīnijām, 2012).

Skolas gaitu uzsākšana bērna dzīvē ir nozīmīgs notikums: viņam jāmācās iekļauties jaunā kolektīvā, ievērojot tā prasības un tradīcijas, jāmācās veidot savstarpējas attiecības ar vienaudžiem un pieaugušajiem, jāsāk veidot jaunas darba un sadarbības formas un to jānodrošina pirmsskolas izglītības programmai, aptverot:
1) individualitātes veidošanos;
2) garīgo, fizisko un sociālo attīstību;
3) iniciatīvas, zinātkāres, patstāvības un radošās darbības attīstību;
4) veselības nostiprināšanu;
5) psiholoģisko sagatavošanu pamatizglītības ieguves uzsākšanai;
6) valsts valodas lietošanas pamatiemaņu apguvi (Vispārējās izglītības likums, 1999).

Gatavošanās skolai ietver sevī vispusīgu bērna attīstību: veselības nostiprināšanu, darbaspēju palielināšanu, domāšanas attīstīšanu, zinātkāres, interešu un vajadzību veidošanu un apzināšanu, noteiktu rakstura īpašību veidošanu, gribasspēka attīstīšanu, priekšstatu veidošanu par skolu, skolas vidi,

mācību procesu skolā, rosināt vēlēšanos mācīties, tieksmi uz zināšanām, veicināt izziņas procesu veidošanos, mācīt plānot savu darbību un laiku, meklēt piemērotākos risinājumus mērķa sasniegšanai, spēju apzināties un kontrolēt savu rīcību un darbības, mācīt risināt uzdevumus, vadoties pēc pieaugušā norādījumiem.

Pirmsskolas pedagoģiskajā procesā bērnu sasniegumus vērtē atbilstoši vadlīnijās noteiktajiem pirmsskolas izglītības satura apguves plānotajiem rezultātiem, kuru apguve veicina bērna fizisko, psihisko un sociālo attīstību (Noteikumi par valsts pirmsskolas izglītības vadlīnijām, 2012). Katra no attīstības jomām sastāv no savstarpēji saistītām prasmēm, iemaņām un attieksmēm (skat. 1.tabula), kuras attīstās noteiktā pedagoģiskā ietekmē un nepārtrauktā procesā.

1.tabula. Attīstības jomu prasmju, zināšanu un attieksmju apkopojums
Table 1. Summary of attitudes, knowledges and skills of field of development

Attīstības joma	Prasmes, zināšanas, attieksmes
Fiziskā attīstība	• Kopējā motorika • Sīkā motorika • Drošības noteikumu ievērošana • Koordinācija • Rakstāmpiederuma lietošanas prasmes • Vārdisko instrukciju izpilde (augšā, lejā, pāri, zem)
Psihiskā attīstība	• Runas attīstība • Rakstīt, lasīt iemaņu veidošana • Matemātisko priekšsatu veidošana • Orientēšanas prasmes • Emocionālā attieksme • Radošās spējas • Konstruēšanas spējas • Loģiskā domāšana • Attieksme pret mācībām
Sociālā attīstība	• Sadarbība ar vienaudžiem • Sadarbība ar pieaugušajiem • Patstāvība • Pašapkalpošanas iemaņas • Attieksmes pret citiem padarīto • Drošības noteikumu pārzināšna • Paškontrole • Atbildība

Psiholoģiskā gatavība ir faktors, kurš nosaka, vai, bērns, kuram ir pietiekošas zināšanas un prasmes ir gatavs doties jaunajā vidē, patstāvīgi risināt sociālās situācijas un tā rezultātā veiksmīgi mācīties skolā. Tieši psiholoģiskai gatavībai ir milzīga loma pārejas posma grūtību pārvarēšanā, kurā bērnam

nepieciešams vecāku/ģimenes atbalsts. Psiholoģiskās gatavības aspekti ir kognitīvā, emocionālā (personības īpašību attīstības līmenis), sociālā gatavība (saskarsmes, komunikatīvā), kuras sevī ietver analītisko domāšanu, spēju koncentrēties, spēju kontrolēt savu uzvedību un rīcību, spēju pabeigt iesākto, komunikāciju ar vienaudžiem un pieaugušajiem.

Sociālā gatavība, kuras pamatā ir komunikatīvās prasmes – tā ir bērna prasme sadarboties, komunicēt, draudzēties un iekļauties kolektīvā, prasme veidot savstarpējas attiecības ar pieaugušajiem un vienaudžiem, ievērojot noteiktas uzvedības normas. Vecāku un pirmsskolas uzdevums ir veicināt jaunās attieksmes veidošanās – bērna attieksme pašu pret sevi ar jaunu sociālo statūtu, līdz ar ko sociālā gatavība paredz jaunu iemaņu uzkrāšanu saskarsmē kolektīvā, kas nodrošina adaptāciju skolā.

Bērni ar redzes traucējumiem mācību procesā uzskatāmi par izglītojamiem ar speciālām vajadzībām, kur redzes kompensācijas nodrošināšana ir gan izglītības iestādes, gan ģimenes uzdevums. Kaut gan tieša saistība starp redzes un mācīšanās traucējumiem Eiropā veiktajos pētījumos neatklājas, zinātniskajā literatūrā tiek uzsvērts, ka sensorās uztveres, arī redzes problēmas var veicināt mācīšanās traucējumu rašanos (Brodney, Kehoe, 2006; Rouse, Borsting, Klup 2009).

Redzes funkcijas iespējas, kas dot iespēju izzināt apkārtējo pasauli, sociālo vidi, ir atkarīgas no redzes traucējuma pakāpes, kas iespaido bērna psiholoģisko pašsajūtu, ietekmē bērna uzvedību, saskarsmes veidu un komunikācijas motivāciju. Redzes uztvere kontrolē orientēšanos apkārtnē, ķermeņa pozas regulāciju, līdzsvaru, kā arī uzvedību (Солнцева, 1997).

Pedagogiem mācību procesā jāņem vērā, ka bērnu motivē darbībai arī viņa dzīves pieredzē izveidotās attieksmes, vērtības, dzīves stila piemērs (Lieģeniece, 1999).

Pēc U. Bronfenbrennera cilvēka attīstības ekosistēma sastāv no četrām viena otrā ievietotām sistēmām, kuras var attēlot gredzenu veidā, kas savstarpēji viena otru ietekmē. Bērnam ar redzes traucējumiem piedzimstot, viņš nonāk **mikrosistēmas (iekšējās vides)** tuvākā vidē – ģimenes lokā. Pēc U. Bronfenbrennera dzīves situācijas ir gan neatkarīgas no bērna, gan viņa paša aktivitātes rezultāts, tas nozīmē, ka tās ietekmē bērnu un tās ietekmē bērns pats. Bērns vienlaikus var tikt iekļauts vairākās mikrosistēmās, kur viena no tām varētu būt arī pirmsskola. Šī mikrovide ir atbildīga par to, vai personas attīstība tiek kavēta vai sekmēta. Pēc ekosistēmas teorijas bērns ir gan ekoloģiskās sistēmas produkts, gan apkārtējās vides veidotājs. Kad bērni kļūst vecāki, viņi izmaina apkārtējo vidi un pārstrādā iegūto pieredzi. Bet arī šeit darbojas savstarpējās sakarības, tāpēc, ka bērna rīcību nosaka viņu fiziskās, intelektuālās un personības iezīmes, kā arī audzināšana, ko viņi ir ieguvuši no apkārtējās vides. Šīs mikrosistēmas savā starpā ir saistītas, veidojot mezosistēmu, kas ir otrais līmenis, un šeit ir rodamas saistības starp vairākām vidēm, kurās bērns darbojas, tādējādi vienā mikrosistēmā notiekošais ietekmē otru sistēmu. Ar to ir

pamatojams apgalvojums, ka bērniem ar redzes traucējumiem svarīgi, lai šo mikrosistēmu starpā pastāvētu sadarbība, kas veicinātu bērna attīstību. Pie **eksosistēmas (ārējās vides)**, kur „notiek dažādi procesi, kas ietekmē vai tie ietekmējas no notikumiem, no vides, kur notiek bērna aktīva attīstība" (Bronfenbrenner, 1979, 25). Eksosistēmas piemērs ir attiecības starp bērna vecāku māju un vecāku darbavietu ar tur izveidotajām vērtībām. Par ehosistēmu tiek saukti sociālie nosacījumi, kas bērnu ietekmē netieši, tāpēc šeit varētu pieskaitīt atbalsta personāla aktivitātes. **Makrosistēma** tiek definēta kā **visaptverošākā vide**, kas nosaka „formas un satura atbilstību zemākajām pakārtotajām sistēmām" (Bronfenbrenner, 1979, 26), tādējādi šeit varētu iekļaut koncepcijas, likumdošanu, sabiedrības vērtības.

U. Bronfenbrennera cilvēka attīstības modelis pēc G. Kraiga (Craig G.) šobrīd tiek uzskatīts par visietekmīgāko cilvēka attīstības modeli, jo teorētiski tiek aprakstīts kā dažādās sociālās vides ietekmē bērna attīstību (Craig, & Baucum, 2002), kā arī šo visu sistēmu savstarpējo saistību, kas apliecina vides noteicošo lomu bērna ar redzes traucējumiem gatavībai skolai.

Pēc L. Franka bioloģiskā nobriešana ir saistīta ar psiholoģisko pilnveidi, veidojot mijattiecības ar apkārtējo vidi (Frank, 1972). Viņš izdalīja sešus pamata procesus, lai *palīdzētu bērnam izdzīvot un divpusēji mijdarboties ar vidi*, kur vide tiek radīta saistībā ar indivīda specifiskām vajadzībām un spējām:

1) augšanas procesu;
2) bioloģisko pašorganizāciju, kas ir indivīda psiholoģiskās pašorganizācijas pamatā (Frank, 1972, 507);
3) komunikācijas procesiem, kas darbojas organisma līmenī ar iedzimto mehānismu palīdzību, kurus var izmainīt, pilnveidot mācīšanas rezultātā, palielinot to jūtīgumu (Frank, 1972, 505 - 510);
4) stabilizācijas procesiem, kas palīdz tikt galā ar mainīgo pieredzes plūsmu, kad indivīds mācās pārvaldīt savas organiskās funkcijas;
5) mērķtiecīgiem, no dabas dotiem procesiem, kas katrā indivīdā darbojas dažādi, atkarībā no tā, kas viņus piesaista vidē un no iepriekšējās pieredzes un, kas nodrošina nepārtrauktu mācīšanos pieredzes ceļā;
6) kreatīviem procesiem, kas katram bērnam ir atšķirīgi.

D. Lieģeniece runā par bērna personīgās jēgas ievērošanu divpusējā mijiedarbībā ar pieaugušo un citiem bērniem, atzīmējot, ka to ietekmē vecuma īpatnības, temperaments, kā arī mikrovide (iekšējā vide) un makrovide (ārējā vide) (Lieģeniece, 1999, 113), uzsverot šīs aktivitātes sociālo procesu. Bērnu motīvē darbībai viņa dzīves pieredzē izveidotās attieksmes, atbilstība starp bērnam piedāvātajām iespējām un viņa vajadzībām, prasībām, cerībām, gaidām no otra bērna vai pieaugušā.

Ģimene un bērni joprojām ir viena no centrālajām vērtībām Latvijā, tomēr ģimeņu un mājsaimniecību struktūras un dzīvesveida izmaiņas rada jaunu demogrāfisko situāciju arī mikro līmenī. Latvijā tiek šķirta gandrīz katra otrā

laulība, vidējais laulības ilgums līdz tās šķiršanai ir 11 gadu, neizbēgami palielinās otro un trešo partnerību skaits. Veidojas jaunas radnieciskas attiecības – uz mazāku bērnu skaitu būs lielāks vecvecāku skaits un arī lielāks paaudžu skaits radnieciskajās vienībās, kuras gan, visticamāk, nedzīvos vienuviet. Šajā kontekstā īpaši jādomā par bērnu drošību un viņu interesēm atbilstošu psiholoģisko klimatu ģimenē (Latvijas attīstības stratēģija līdz 2030.g.).

<h2 style="text-align:center">Pētījuma iegūtie rezultāti</h2>
<h2 style="text-align:center">Results of the reserch</h2>

Lai izvērtētu vecāku viedokli par bērna ar speciālām vajadzībām gatavību skolai, tika aptaujāti 16 bērnu ar redzes traucējumiem vecāki/likumīgie pārstāvji, kuru bērni apmeklē speciālo pirmsskolas izglītības iestādi un 2015./2016.m.g. uzsāks mācības Daugavpils vispārizglītojošajās skolās.

Pētījumā tika analizēts vecāku viedoklis par bērna ar speciālām vajadzībām sagatavošanas skolai kvalitāti fiziskajā, psihiskajā un sociālajā jomā.

Vecāku aptaujas pētījuma datu analīze liecina, ka bērnu sagatavošana skolai fiziskajā jomā ir atkarībā no bērnu vecuma, kurā viņš iesāks mācības skolā, ko apliecina 2.tabulā iegūtie aprakstošās statistikas dati par bērna fiziskās attīstības gatavību.

2.tabula. Bērna ar speciālām vajadzībām sagatavošana skolai atkarībā no vecuma
Table 2. Descriptive statistics of children with special needs in preparation for school depending on the age

Sagatavošana skolai		N			Mean Rank	Mann-Whitney U	Wilcoxon W	Z
		Jā	Nē	Daļēji				
Vai Jūsu bērns pietiekoši sagatavots skolai?	6.g.	0	0	2	7,50	0,000	105,000	-3,266
	7.g.	13	1	0	15,50			

Aprakstošās statistikas dati apliecina, ka bērni, kuri iesāks mācības skolā 6 gadu vecumā, sagatavoti skolai „daļēji" salīdzinājumā no bērniem, kuri iesāks mācības skolā 7 gadu vecumā (Asymp.Sig.= 0,001, p<0,05).

Vecāku aptaujas dati apliecina, ka bērna speciālās vajadzības ietekmēja bērna sagatavošanas skolai kvalitāti (Asymp.Sig.= 0,008, p<0,05), ko apliecina 3.tabulā apkopotie vecāku uzskati.

Aptaujas dati liecina, ka 6 gadīgo bērnu speciālās vajadzības negatīvi ietekmē sagatavošanas skolai kvalitāti, salīdzinājumā no bērniem, kuri iesāks mācības skolā 7 gadu vecumā, kas pētījumā parādījās korelācijas datos starp sociālo gatavību un runas attīstību (R=0,537, p=0,030).

3.tabula. Speciālo vajadzību ietekme uz sagatavošanas skolai kvalitāti atkarībā no vecuma
Table 3. Descriptive statistics of impact of special needs on the quality of the preparatory school, depending on their age

Sagatavošana skolai		N			Mean Rank	Mann-Whitney U	Wilcoxon W	Z
		Jā	Nē	Daļēji				
Pēc Jūsu uzskatiem, vai speciālās vajadzības ietekmēja bērna sagatavošanas skolai kvalitāti PII?	6.g.	1	1	0	5,00	7,000	10,000	-2,646
	7.g.	0	14	0	9,00			

Pētījuma vecāku aptaujas datu analīze 4.tabula apliecina, ka zēnu ar meiteņu sagatavošanas skolai līmenis ir dažāds, jo pēc vecāku uzskatiem meitenes ir 100% sagatavotas skolai, bet 40% zēnu ir sagatavoti skolai tikai „daļēji".

4.tabula. Sagatavošanas skolai līmenis atkarībā no dzimuma
Table 4. Descriptive statistics of the preparatory school level depending on gender

Sagatavošana skolai		N			Mean Rank	Mann-Whitney U	Wilcoxon W	Z
		Jā	Nē	Daļēji				
Pēc Jūsu uzskatiem, Jūsu bērns pietiekoši sagatavots skolai?	zēni	3	0	2	10,70	16,500	82,500	-2,171
	meitenes	11	0	0	7,50			

Vecāku apmierinātība ar sagatavošanas skolai kvalitāti un viņu uzskats, vai bērns ir pietiekoši sagatavots skolai, rāda, ka zēniem ar speciālām vajadzībām sagatavošanas līmenis ir zemāks nekā meitenēm (Asymp.Sig.= 0,030, p<0,05).

Apkopojot pētījuma rezultātus, var secināt, ka bērnu ar redzes traucējumiem vecāki/likumīgie pārstāvji ir ievērojuši savu bērnu specifiskās individuālās īpatnības gatavībā skolai un ir iespēja veiksmīgi turpināt bērna attīstību, veidojot stipras partnerattiecības starp pirmsskolas iestādes pedagogiem, atbalsta personālu un ģimenēm. Ievērojot bērnu specifiskās individuālās īpatnības, kurus apzina gan vecāki, gan pirmsskola, iespējams savlaicīgs atbalsts un korekcija attīstības procesā, kas ir pamatnosacījums veiksmīgai sagatavošanai skolai un turpmākai bērna socializācijai skolā.

Secinājumi

1. Sagatavošanā skolai atspoguļojas bērna vajadzības pēc sociāli nozīmīgām izmaiņām sevi pašā un apkārtnē, kas saistīts ar noteikto zināšanu, prasmju, iemaņu un personīgas pieredzes aktualizāciju.
2. Apkopojot pētījuma rezultātus par bērnu ar redzes traucējumiem sagatavotību skolai, var secināt, ka:
   * bērni, kuri uzsāks mācības skolā 6 gadu vecumā, sagatavoti skolai „daļēji" salīdzinājumā no bērniem, kuri iesāks mācības skolā 7 gadu vecumā;
   * 6 gadīgo bērnu speciālās vajadzības negatīvi ietekmē sagatavošanas skolai kvalitāti, salīdzinājumā no bērniem, kuri iesāks mācības skolā 7 gadu vecumā;
   * zēnu ar meiteņu sagatavošanas skolai līmenis ir dažāds, jo zēniem ar speciālām vajadzībām sagatavošanas skolai līmenis ir zemāks nekā meitenēm.
3. Ir būtiski uzlūkot pirmskolas vecuma bērnu ar redzes traucējumiem sabiedrības un sabiedrības kultūras kontekstā, apzinoties, ka viņa attīstību ietekmē dažādi faktori un ka tā ir uzlūkojama sistēmiski.

Summary

The preparatory the school is a very important step in a child's life. The preparatory school is a child's socialization process that affect a child's life in the future drafting of the social environment. Social preparedness is one of the most important factors that ensure child the preparatory school. Preschool age - this is the time when occurs the primary personality, individuality and self-esteem building. Pre-school stage, the child occurs an active introduction to the environment, which leads to the socialization process. The preparatory the school, the socialization process can be solved successfully only if it actively participates in all the parties. Based on Bronfenbrenner`s ecological theory of development, pre-school and family made up the micro and mezo fundamentals.

A child with special needs socialization is dependent on the child's specific characteristics, such as physical condition, visual disturbances and nervous system. For solving of socialization process, educators and parents must be necessary knowledge of the impact of visual impairment on a child's development. Preparation for school is a complex process with participation by all members, subject to the child's individual skills and abilities.

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THE FAMILIES OF STUDENTS WITH MULTIPLE DISABILITIES IN THE EDUCATIONAL PROCESS

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Abstract. *This paper focuses on several aspects of the relationship between families of students with multiple disabilities and the educational process. Quality-based methodology was used for the research due to a lack of sufficient theoretical background in this area. The objective of the paper was to elucidate the significance of education of students with multiple disabilities for their families and to describe the process of cooperation between these families and the teachers. This paper uses data and outputs from a qualitative analysis of education of students with severe multiple disabilities (semi-structured interviews with 45 teachers of students with multiple disabilities, observation of 4 students in the educational process and an analysis of 30 samples of educational documents using open, axial and selective coding). The resulting theory was combined with the results of a survey focused on the cooperation between the families and the teachers in order to gain a saturated data sample. This survey used semi-structured interviews with 5 teachers of students with multiple disabilities. The data from these interviews were analysed by means of open coding, compared with the outputs of the previous research and a theoretical model for educational intervention with the families of students with multiple disabilities was constructed and described. This model offers ideas for educational practice as well as further research.*

Keywords: *Educational process, family, multiple disabilities.*

Introduction

The paper deals with various topics connected with the families of students with multiple disabilities (SMD) and the educational process. The basic objective of the study was to identify family needs in the educational process, to map the impact of coping with children's disabilities on the education and to analyse the tasks and course of special educational intervention with families. We used data from quality-based analyses of the educational process in students with SMD (coding and categorisation of semi-structured interviews, analysis of educational documents and observation of student-teacher interaction), and a survey focused on the data concerning the family and education.

The family of a student with SMD has an essential position in the educational process. Education of this group of students requires close participation of their parents in the educational process with respect to the serious communication limitations of the students, limitation of their mental functions, requirement for nursing to ensure basic needs, etc. During the process of education it is also necessary to make sure that the educational intervention reflects the needs of the family and parents' work with the child in the home

setting. Empirical experience from practical environments suggests that the teacher-parent cooperation is influenced by a number of factors and is not always satisfactory regarding the educational needs of students with SMD. Therefore, an important topic of special education research is investigating the role of the family in educating these students.

Most publications focusing on the families of persons with SMD address the issue of the educational process in a limited extent. An analysis of professional literature and papers in international databases revealed that a frequent topic was the quality of life of the families with an individual suffering from SMD (Michalík, 2011; Carona et al., 2012; Vohra et al., 2014, etc.), and the economic position and support of the families with children with SMD (Kyzar et al., 2012; Tadema & Vlaskamp, 2009; Dobson et al., 2001; Whiting, 2014, etc.).

A significant topic in this area is coping with the child's disability (Bigge, Best, Heller, 2010), application of coping mechanisms in dealing with the child's disability (Štěrbová & Kudláček, 2014; Trute, Benzies, Worthington, 2011; Lin, 2000, etc.), significance of resilience of the families in this process (Greeff & Nolting, 2013) and similar topics.

In terms of early care, a well-documented topic is working with families with SMD at an early age. Numerous research studies focused on the communication between family members and children with SMD (Wilder & Granlund, 2003; Grove et al., 1999; Light, 1985, etc.) Available research studies also focus on the involvement of children with SMD in family activities (Axelsson, Granlund, Wilder, 2013; Axelsson, Imms, Wilder, 2014) as well as parents' participation in family and school-based activities (Fishman & Nickerson, 2014). A significant aspect of the family environment is the issue of siblings with SMD (Roper et al., 2014; Houssier & Vibert, 2013).

Specific topics of current research studies include mapping the perspectives of children with SMD as seen by their parents (Poon et al., 2013), areas of support where families with persons with SMD require help, and a family-oriented approach (Jansen, Putten, Vlaskamp, 2012; Jansen et al., 2014), sustainability of daily routines and social networks of families with severe multiple disabilities (Wilder & Granlund, 2015), effect of parenthood on adults with SMD (Evans, Darrah, Galambos, 2010) or parents' psychosocial status (Ulus et al., 2012).

Professional popularization literature addresses the life stories of families with persons with SMD (Chvátalová, 2012; Krejčová, Strnadová, Vágnerová, 2009).

Topics associated with the role of the family in educating students with SMD were included in our project "Research of the quality of life of selected groups of persons with special needs (IGA_PdF_2014008)".

Research methodology

To research the role of the family in educating students with SMD we used the data from a quality-based survey aimed at education of students with severe physical, mental and communication impairment in Czech schools. These data were complemented with data from a survey aimed exclusively at specific topics relating to the families of students with SMD in the educational process.

Research of the educational process in students with multiple disabilities

The methodology of this research was described in a different paper (Kantor et al., 2014); therefore, only basic research data will be summarized. The research study analysed the educational process according to a process scheme as described by Průcha (2009) arranged into input determinants, course and outcomes of the educational process. The objective of the research was to map various educational processes that affect students with SMD according to an analysis of social interaction as one of the fundamental educational phenomena. The research design was of a mixed type, primarily based on quality-oriented procedures and complemented with a questionnaire survey. Data collection was performed by means of semi-structured interviews with 45 teachers, content analysis of 30 individual educational plans, 30 verbal assessments and all-day observation of the teacher-student interaction in four students. The questionnaire survey included a total of 101 teachers. The aim of the questionnaire survey was to test certain topics, for which we had insufficient justification in the data set and which could not be triangulated with data from various sources.

For data analysis we used open, axial and selective coding. This procedure was used to develop models for educational processes in the area of adaptation, interaction and development of interpersonal relationships, stimulation, diagnostics and evaluation, self-attendance, saturation of cognitive and aesthetic abilities, processes aimed at the students' health-related needs, coping with risk behaviour and other difficulties, processes of personality development and processes of student-environment interactions.

This text includes unpublished results of the above mentioned research study, which relate to special education interventions at a family level. As far as open coding is concerned, family-related data were divided into the following groups:

- Family needs with respect to a special education intervention.
- Data relating to the process of the parents' coping with the child's disability and acceptance of the child's real possibilities.
- Course of a special education intervention in working with the child's family.

Follow-up survey aimed at the role of the families of students with severe multiple disabilities in the educational process

The data set from the above described research study did not show sufficient saturation in terms of family-oriented topics. Therefore, the follow-up survey focused solely on these topics. **The aim of the survey** was to complement the data of the above specified topics and use them to develop a model for the description of a special education intervention for working with the child's family. In the survey we used semi-structured interviews with the teachers of students with SMD. The following criteria were used to select the teachers:

- The teachers need to have a degree in special education; Bachelor's degree as a minimum.
- The teachers need to have at least five years of practical experience with educating students with severe multiple disabilities.

The survey included a total of 5 teachers. This **sample** was recruited by means of intentional selection using personal contacts in relevant institutes. Before the visits to individual classes were made the class teacher was informed and a consent to his/her participation in the survey was obtained. The course of the interview corresponded with usual interview stages, from preparatory and initial stage, through rise and contact reinforcement, core, to conclusion and termination. During the preparatory and initial stage the interviewee was motivated and familiarized with the purpose of the survey, methods of data recording and ethical principles, and guaranteeing anonymity. The interviews took approximately 30–45 minutes, in one case the total time exceeded 60 minutes.

The basic interview structure included establishing contact and conveying information about the purpose of the survey, investigating the needs of families in the context of special education intervention, mapping the way in which the process of coping with disability influences special education intervention and an analysis of tasks and course of special education intervention in working with the child's family.

During the course of the survey we also managed to carry out two short interviews with parents of students with SMD. However, due to their low response relevance these are only included as an additional source of information.

After all interviews we transcribed the data into a written form and prepared the text material for a quality-based analysis. The analysis used open coding including response quantification. We also searched for original and contradictory statements to be used for theory development. The data were classified into categories; these survey outcomes were compared with the data acquired through an analysis of the educational process of students with SMD. We completed and deepened the categories related to the topic of the survey.

During the next stage, i.e. axial coding, we searched for associations between individual categories and justification of these associations in the data material. The members of the research team discussed which categories and associations were relevant in terms of the issue in question. After that we performed a second order reduction and developed a visual scheme that represents the theoretical model for special education intervention at the level of the families of students with SMD. This model is shown in Fig. 1.

The development of this model reflected the classification of the process scheme of the educational process because monitoring education as a process and classification into input determinants, course and outputs of education enables to monitor the development of education in time and to identify substantial educational outputs. This concept is based on the current requirement for the identification and measurability of the outcomes of educational as well as therapeutic interventions. Regarding the fact that the scheme shown in Fig. 1 is a comprehensive theoretical construct, the following chapter includes a description of its basic categories and associations.
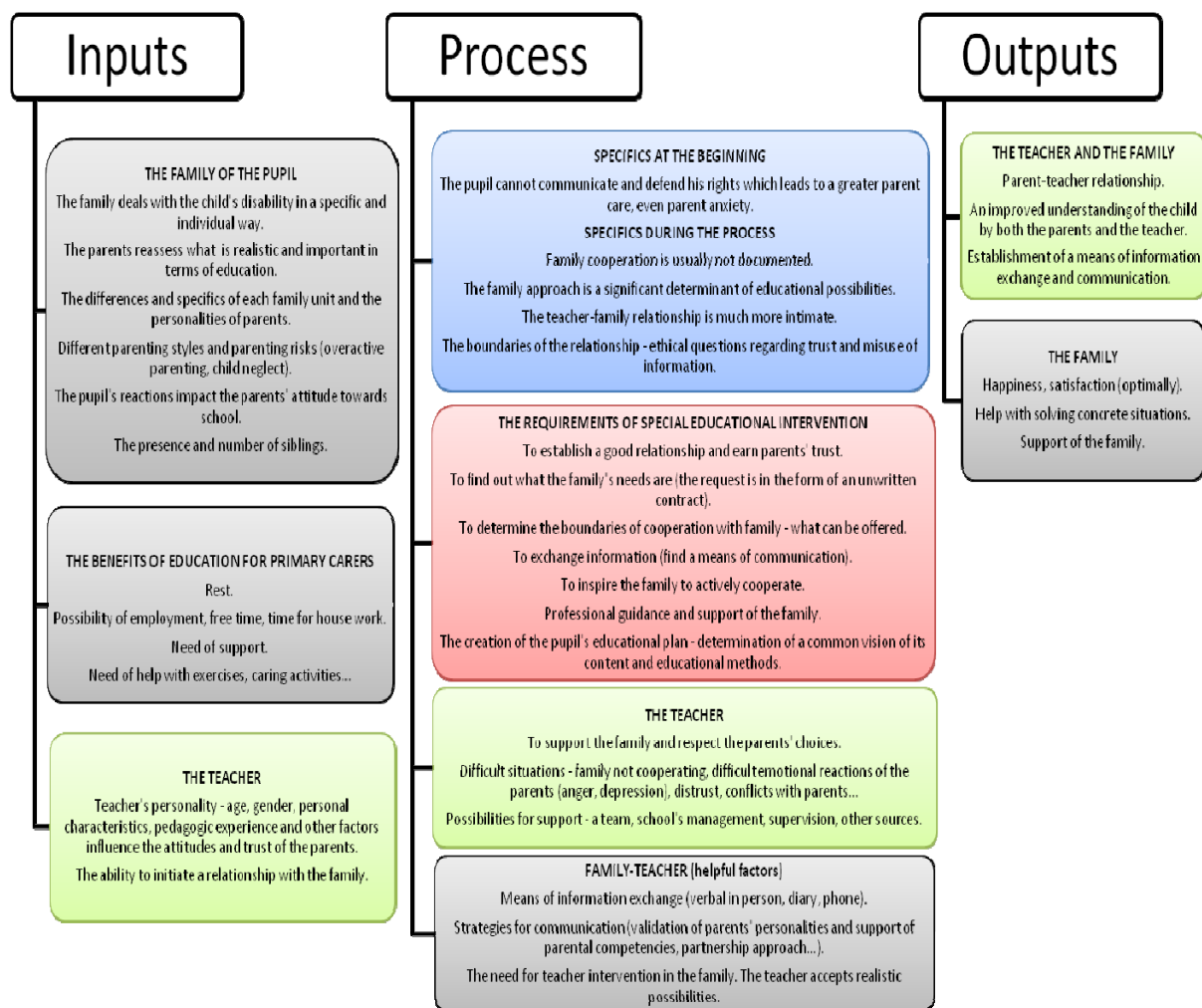
Figure 1. Special education intervention model at the level of the families of students with severe multiple disabilities

Description of the special education intervention model

The model shown in Fig. 1 includes categories classified into input determinants, course and outputs of the educational process. There are various associations and processes between the inputs, course and outputs of the educational process.

Needs and expectations of the student's family in the context of education

The first possible association relates to the expectation of the parents of a student with SMD concerning the educational content and its relevance to the student's family. An analysis of semi-structured interviews with 45 teachers resulted in a body of material shown in Table 1. This table describes the needs of the parents of students with SMD in relation to education, including response quantification (in the presence column).

Table 1. Family needs with respect to education

Subcategories	Presence
Parents' rest.	25
Parents want their children to go to school and enjoy themselves at school.	10
Parents have time to go to work or have time for themselves.	8
Helping parents with feeding children and other tasks.	4
Parents do not want their children to be excluded from social activities.	3
Parents expect that education will improve communication with their child.	2

During the first years of education the opinions and expectations of parents concerning the content of education provided to their children is formed (at the beginning of school attendance some parents of children with SMD expected that their children would learn the basic trivia skills although these skills significantly exceed the capabilities of these students). As revealed by an analysis of educational documents, **the needs and expectations of families are not documented in any way**, even though individual educational plans need to be approved by legal representatives. It is questionable which family expectations and needs could be explicitly defined in the students' educational documents. An analysis of the table above (Table 1) revealed the following conclusions:

- Some family needs relate exclusively to the school environment. For example the teachers stated that one of the objectives was to improve the students' communication abilities. At the same time however, the transfer of this ability and its use outside the school environment was not documented at all (generalization of acquired abilities outside the school environment should be a crucial part of training).

- The school takes over a part of nursing activities concerning basic physical needs of students with SMD. Ensuring the basic physical needs (feeding, lifting on the toilet, caring for incontinent students, etc.) represents a great time and personnel investment within the educational process. The need for saturation of the basic physical skills is specified in the educational document only if the presence of an assistant teacher is required in the class. We believe that the educational outcomes should be documented more thoroughly as well.
- All work with families (professional consultations, counselling and leadership) is not documented in any way even though this represents an inseparable and important part of special education intervention in students with SMD.
- Obviously, some education-related family needs are not and cannot be documented. For example when a child stays at school, his/her parents have time to fulfil their needs (this applies especially to primary carers).

Coping with the child's disability in the context of education

The data that we acquired during the research about the association between coping with the child's disability and education are as follows:
- Through school performance achieved by the child the parents are confronted with the real level of educational abilities and educational potential. This confrontation might result in temporary crises.
- Becoming aware of the real educational possibilities of the child might deepen depressions in the parents or promote aggressive confrontation with the environment.
- Also, the teachers pointed to the significance of a good teacher-parent relationship, which can support the parents in a difficult life situation.
- The process of the parents coping with their child's disability might be reflected in the communications with the teacher. An example is ventilation of accumulated tension and anger of the parents, frequently as a result if irrelevant stimuli that trigger these situations.
- In many cases the parent-teacher relationship is an intimate and friendly one, as a result of which the parents often share family and personal difficulties. As a consequence, some parents use the teacher as a confidant to share their own problems and difficulties. If the teachers are willing to take this role, they become burdened by a considerable mental load.
- One of the most serious fears on the part of the parents is the future of their child in adulthood. These concerns are caused by a low degree of self-determination and defence of the rights of their children. During the interviews one of the parents said that it was more difficult to

accept the idea of their child surviving into adulthood rather than dying during their life.

Tasks and course of special education intervention

An analysis of the semi-structured interviews was used to develop categories relating to special education intervention tasks with respect to the families of students with SMD. These categories are shown in Table 2.

Table 2. 3.3 Tasks of special education intervention

Category	P
Development of an effective communication method compensating for the students' inability to convey significant information to their parents (the teachers often meet the parents on a daily basis, apart from personal consultations they use the students' diaries, email and telephone communication in urgent cases).	14
Family leadership and counselling provided to parents following the students' education (e.g. in the area of self-attendance, behaviour issues, leisure activities, sibling relationships, etc.)	12
Promotion of the parents' participation and activity in the students' social occasions – community events exceeding the scope of the educational process (carnivals, extra-curricular performances, class visits to the child's home environment).	10
Winning the parents' trust (the parents have a strong need to test the teacher and make sure that they can rely on the teacher in terms of child care).	8
Explain to the parents the significance of the content of education for their child.	11
Winning the parents' collaboration in educating their child.	12
Development of a partnership and a respecting method of communication between the teachers and the parents.	5
Helping parents to understand the preferences, motivations and behaviours of their children.	2

Discussion

The conclusions presented are based on the description and analysis of the text material accumulated during the quality-oriented survey. It would be useful to complement these research conclusions with a more extensive **research survey carried out in the families**. From a methodological point of view, such research is much more difficult as the researcher disrupts the intimacy of the family environment, faces the parents' difficulties in reflecting on some topics (particularly those of a personal nature), concerns and a low degree of willingness to participate in research surveys. This especially applies to topics such as coping with the child's disability. However, some topics of this research survey could be investigated in a quantity-based way, e.g. expectations of the parents and significance of education for the parents.

In **assessing data validity** we need to take into account the fact that the data was acquired primarily from the teachers. Regarding the long-term experience and many years of relationships with the families, the teachers' reflections can be of high response relevance. On the other hand, lacking a comparison with data acquired directly from the families, these conclusions can be regarded a mere hypothetical construct that needs to be verified by further research.

We also need to be critical about the validity regarding **the used data sources**. In quality-based research one of the procedures ensuring data validity is triangulation and comparison of conclusion acquired from various data sources. This research study was primarily based on semi-structured interviews because other sources were unavailable (in the educational documents we found almost no data on family issues and education, this was also an issue in the case of other data collection methods). In such circumstances the only possibility is to work with available material, being aware that a sufficient degree of validity cannot be ensured.

Summary of recommendations

The summary of recommendations based on this paper is as follows:
- The educational documents need to include the objectives and outcomes relating to the student''s family environment (and/or extracurricular environment). For example, this includes professional guidance of the parents, transfer of skills acquired in an extracurricular environment, etc.
- Nursing activities should be used in the educational process. In some students these activities take more time than education.
- The teacher-parent communication represents a significant compensatory mechanism that offsets the students' communication deficiencies and helps both the teachers and families to better understand the students with SMD. Specific compensatory mechanisms described in this text are significant in order to deepen the knowledge about special education methods. This includes sharing of situations and experiences of the student from a school or home environment, studying of the personal history of the student by the teacher, visits to the student's home and learning about the immediate context of the student's life, etc.
- Process of coping with the student's disability by the parents strongly influences the confrontation with the student's real educational possibilities. The course of education is characterized by a shift from excessive (sometimes unrealistic expectations) at the beginning of school attendance to reasonable understanding of the student's educational possibilities. In relation to the process of coping with the

student's disability the teachers described a considerable parents' investment into their child's education at the beginning of school attendance, which in many cases results in exhaustion of the parents' mental resources (in some cases this exhaustion results in neglecting the child and a loss of belief in the significance of continuous work with the child). It might be beneficial for the teacher if he/she is able to realistically assess the parents' possibilities to invest in the care for their child and their child's school education.

Conclusion

The paper deals with the association between the family environment of students with multiple disabilities and the educational process. In spite of the discussed methodological limitations the paper presents a summary of conclusions with a sufficient data background. These conclusions relate to the description of family needs with respect to the educational process, tasks and course of a special education intervention and the way in which the process of coping with the child's disability influences student education.

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EXPERIENCES AND ATTITUDES OF YOUNG PEOPLE AND SENIORS IN RELATION TO PEOPLE WITH INTELLECTUAL DISABILITIES

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Abstract. *The contribution represents the selected summary of the results of research carried out through a questionnaire-based survey and a structured interview, the goal of which was to ascertain the experiences and attitudes of young people and seniorsin relation to mentally impaired individuals and define the spheres to which increased attention should be paid in the future. The examined group comprised 160 respondents. The contribution is introduced by information on the given issue and the definition of the basic terminology in relation to the examined sphere. Subsequently, it presents the methodological outcomes of the research and deals with specific results of the research and discussions. At the end, it summarizes the research conclusions in the context of various points of view of the current state of knowledge in theory and its application in practise.*

Keywords: mentally impaired individual, mental impairment, attitudes, integration, inclusion, structured interview, questionnaire

Introduction

People with intellectual disabilities are an integral part of the human society. The attitudes towards these individuals gradually developed and changed depending on the development of the entire human society and the acquisition of new information, experience and knowledge. The historical view of the changes in the attitudes towards mentally impaired individuals may help us understand the source of some current attitudes or prejudices persisting as common and evoking various feelings – ranging from embarrassment, admiration, sympathy to sadness – even today. Before 1989, the medical approach to the mentally impaired, institutional care and separation from the wider public prevailed. Society then had neither much experience with people with disabilities, nor sufficient information. At present, the situation is considerably different and individuals with any type of disability have become an integralpart of society. For this reason, we were interested to know whether these changes and experiences are reflected in the attitudes and the possible prejudices of young people and seniors in relation to the mentally impaired. The principal goal of the research was to ascertain and, subsequently, compare the attitudes of age groups of seniors and young people to mentally impaired individuals. For obtaining the relevant data, we applied a combined method comprising a questionnaire and a structured interview. The examined group was

comprised of seniors being 60 years old and more and of young people between 20 and 30 years of age.

Basic Terminological Definition

Mental Retardation: "Mental retardation can be defined as a mental development disorder accompanied by compromised intelligence reflected, in particular, in the compromised cognitive, speech, movement and social abilities with prenatal, perinatal and postnatal aetiology" (Valenta & Kozáková, 2006, p. 20). Mental retardation is usually defined as the inability of an individual to reach the respective level of intellectual development (that is, less than 70 % of the norm) although he/she has been appropriately stimulated in terms of education (Vágnerová, 2004 in Kozáková, 2013). In terms of the intelligence quotient, we can differentiate amongst slight retardation (IQ 50-69), moderate retardation (IQ 35-49), severe retardation (IQ 20-34) and deep retardation (IQ 20 and less) [Kozáková, 2005, p. 22]

Attitude: The Dictionary of Psychology (Hartl & Hartlová, 2009, p. 442) defines an attitude as a "tendency to react to objects, people, situations and oneself in an established manner. Knowledge, skills and attitudes are acquired during life, in particular, through education and wider social influences such as public opinion, social contacts, and others. They are part of a personality. Attitudes comprise the cognitive component, emotional component, and conative (behavioural) component". The cognitive component represents the level of knowledge of the subject of attitude, the emotional component the emotions in relation to the subject of attitude, and the behavioural component the behaviour towards the subject of attitude.

Prejudice: "Prejudice is a special type of an attitude. The word itself indicates that it is something pre-established, pre-assumed." (Nakonečný, 2009, p. 276) Nakonečný (2009) emphasises that this term has a pejorative meaning since it is usually, but wrongly, tied to undesirable and unjustified opinions, usually towards certain minorities. The fact that these attitudes are strongly emotionally accentuated and, as such, are highly resistant to changes is an essential element of prejudice.

Methodological Research Outcomes

The **principal goal** of the research was to ascertain and, subsequently, compare the attitudes of age groups of seniors and young people to mentally impaired individuals.

The **partial goal** was to ascertain:
- whether seniors and young people encountered mentally impaired individuals;
- whether the experience in encountering mentally impaired individuals influenced the respondents' attitudes towards these individuals;

- whether seniors and young people had some information on the issue of mental impairment and, if so, from what sources they obtained such information;
- what opinions and attitudes the respondents had with respect to the integration of mentally impaired individuals into society;
- how both age groups pictured a mentally impaired individual.

Applied Methods

For obtaining the relevant data, we applied a combined method comprising a questionnaire and a structured interview. The questionnaire contained 14 items, of which 13 were closed and 1 was open. Seniors usually made use of the structured interview where the questioner proceeded according to the questionnaire items and recorded the respondent's answers on a score sheet.

Characteristics of the examined sample and the course of research

The examined group was comprised of seniors being 60 years old and more and of young people between 20 and 30 years of age. Most seniors used the form of a structured interview. Most young people made use of the electronic questionnaire and that on the social networking site Facebook. The other questionnaires were handed over in person and reclaimed after some time.

The research was attended by 160 respondents in total. The specific numbers of male and female respondents are stated in the following Table 1:

Table 1. Respondents by Age and Gender

Age Group		Women	Men	Total
20-30 years	Frequency	45	35	80
60 years and more	Frequency	53	27	80
Total	Frequency	98	62	160

Research Results Presentation and Discussion

The intention of the research was to discover and, subsequently, compare the attitudes of seniors and young people towards mentally impaired individuals. At first, we were interested to know whether the age groups of seniors and young people **encountered mentally impaired individuals** and, if so, whether **such experience influenced their attitudes** towards these individuals.

Most respondents encountered mentally impaired individuals *occasionally* (52.50 % of young people and 60 % of seniors). A lower number of respondents *did not encounter* these individuals (22.50 % of young people and 18.80 % of seniors). Some respondents knew mentally impaired individuals *only from television* (10 % of young people and 15 % of seniors), and, conversely, some

respondents encountered these individuals *often* (15 % of young people and 6.20 % of seniors).

Table 2. Encountering Mentally Impaired Individuals

Age Group		No Encounter	Television Knowledge	Occasional Encounter	Frequent Encounter	Total
20-30 years	Frequency	18	8	42	12	80
	Frequency in %	22.50 %	10 %	52.50 %	15 %	100.00 %
60 years and more	Frequency	15	12	48	5	80
	Frequency in %	18.80 %	15 %	60 %	6.20 %	100.00 %

We also examined **whether the experience in encountering mentally impaired individuals influenced the respondents' attitudes towards these individuals.**

Table 3. Influence of Experience in Encountering Mentally Impaired Individuals

Age Group		Yes	No	Total
20-30 years	Frequency	25	55	80
	Frequency in %	31.30 %	68.70 %	100.00 %
60 years and more	Frequency	23	57	80
	Frequency in %	28.80 %	71.20 %	100.00 %

Most respondents (68.70 % of young people and 71.20 % of seniors) agreed that the encounter with mentally impaired individuals did not influence them at all.

The respondents could justify their answers:

- *"I am humble and appreciate these people. I treat them with respect."* (female, 20-30 years old)
- *"I have learnt to treat these people equally."* (male, 20-30 years old)
- *"You shouldn't laugh at them. You can never know how you will end up."* (female, 20-30 years old)
- *"They are people like us, but were not as lucky as we were. I appreciate them."* (male, 20-30 years old)
- *"It can be me who will end up like that."* (male, 60 years and more)
- *"A nice encounter with health impaired individuals, surpassing of restraints and embarrassment."* (female, 60 years and more)
- *"I am sorry for them."* (female, 60 years and more)
- *"A feeling of help and understanding."* (female, 60 years and more)

Furthermore, we focused on the **awareness of the age groups regarding mental impairment** and through **which sources they obtained this information.**

Table 4. Awareness of Age Groups of Mental Impairment

Age Group		Yes	No	Total
20-30 years	Frequency	70	10	80
	Frequency in %	87.50 %	12.50 %	100.00 %
60 years and more	Frequency	73	7	80
	Frequency in %	91.30 %	8.70 %	100.00 %

It was positive that nearly all respondents stated that they had information on mental impairment (87.50 % of young people and 91.30 % of seniors). In this respect, we were interested to know the **sources of this information on mental impairment.**

Table 5. Sources of Information on Mental Impairment

Age Group		Magazines, books	Television, radio, Internet	School	Friends and family	Total
20-30 years	Frequency	19	41	28	30	118
	Frequency in %	16 %	35 %	24 %	25 %	100.00 %
60 years and more	Frequency	33	63	4	7	107
	Frequency in %	31 %	59 %	4 %	6 %	100.00 %

The most respondents drew information from television, radio or Internet (35 % of young people and 59 % of seniors). The age group of young people also drew information from school (24 % of respondents) and from family and friends (25 % of respondents). Seniors drew information from magazines and books (31 % of respondents).

Moreover we examined the **respondents' attitudes towards the integration of mentally impaired individuals into every-day society.** As the question was asked, the term 'integration' was explained and the respondents were given the opportunity to express their consent or dissent (Yes/No). The obtained data is stated in the following Table 6:

Table 6. Attitudes to Integration of Mentally Impaired Individuals into Intact Society

Age Group		Yes	No	Total
20-30 years	Frequency	66	14	80
	Frequency in %	82.50 %	17.50 %	100.00 %
60 years and more	Frequency	73	7	80
	Frequency in %	91.30 %	8.70 %	100.00 %

The absolute majority of young people (82.50 %) and seniors (91.30 %) agreed with the integration of mentally impaired individuals into society. A lower number of respondents dissented (17.50 % of young people and 8.70 % of seniors).

Subsequently, we wanted to discover the **opinions of respondents about how mentally impaired individuals were accepted by the majority of society.** The obtained data is stated in the following Table 7:

Table 7. Opinion about Acceptance of Mentally Impaired Individuals by Majority Society

Age Group		Yes	Rather yes	Rather no	No	Total
20-30 years	Frequency	3	21	41	15	80
	Frequency in %	3.70%	26.30%	51.30%	17.70%	100.00 %
60 years and more	Frequency	8	23	38	11	80
	Frequency in %	10%	28.80%	47.70%	13.70%	100.00 %

It was interesting to find out that more than a half of young people (51.30 %) thought that mentally impaired individuals *were not* accepted by the majority of society. Nearly a half of the seniors (47.70 %) thought the same.

Finally, we wanted to know the **ideas of respondents regarding a mentally impaired individual**. Some of their ideas appeared repeatedly (see Table 8).

Table 8. Respondents' Ideas of a Mentally Impaired Individual

Age Group	Answers	Frequency	Frequency in %
20-30 years	They need supervision, help	20	17.20 %
	Depends on the type of impairment, various types	39	34%
	Speech disorders	15	10.80%
	Different behaviour	13	13 %
	Lower IQ	29	25 %
	Total	116	100 %
60 years and more	**Answers**	**Frequency**	**Frequency in %**
	Speech disorders	16	15 %
	Depends on the type of impairment	19	17.90 %
	They are noisy	15	14.20 %
	Some of them are aggressive	13	12.30 %
	Joy	21	19.80 %
	Lower IQ	12	11.30 %
	They live in their own world	10	9.50
	Total	106	100 %

With respect to the mentally impaired, both age groups consensually stated that *it depends on the type of impairment*. Many answers stated that mentally impaired people *have lower IQ* and *speech disorders*. The respondents-young people (between 20 and 30 years of age) also stated the *need for supervision and help*. The respondents-seniors (60 years of age and more) stated, alongside the foregoing, that *mentally impaired people are noisy, aggressive, express joy and live in their own world.*

The following text states some of the respondents' answers:

- *"It's an individual who is sincere and has a soul of a child. He/she takes things as they are. He/she can be happy and satisfied."* (female, 20-30 years old)
- *"He/she has difficulties in communication, is slow and thinks solely."* (male, 20-30 years old)
- *"It is an individual who is not able to live a full-fledged life."* (female, 20-30 years old)
- *"It is an individual who thinks too much about his/her acts, what he/she is doing, why and what are the conclusions, consequences and results of such action."* (male, 20-30 years old)
- *"These people are nice, like playing. They are like children. Although they are impaired, I respect them."* (male, 20-30 years old)
- *"They are nice most of the time, but sometimes aggressive, act like children. Some of them are able to live an independent life."* (female, 20-30 years)
- *"An independent individual…during the day, he/she spends time in the care centre and goes home (hostel, independent accommodation) in the evening. Most mentally impaired individuals spend their time in sanatoriums with permanent supervision."* (female, 20-30 years old)
- *"It depends on the degree of mental impairment. Some are able to function independently, with occasional supervision, and others cannot do without constant help."* (male, 20-30 years)
- *"It depends on the impairment. They have difficulties in expressing themselves, their IQ is lower, more things take them longer and they are slow."* (female, 20-30 years)
- *"I know mentally impaired individuals who attend a protected workshop every morning. These are self-sufficient, decent, greet everyone with a smile and are nice."* (female, 60 and more years old)
- *"It is an ill person dependent on healthy people."* (female, 60 and more years old)
- *"He/she expresses himself/herself badly, is sincere and nice."* (female, 60 and more years old)
- *"He/she lives in a different world. I have an autistic in my family and know what it is like."* (female, 60 and more years old)

- *"They forget a lot, everything must be repeated. They speak badly."* (male, 60 and more years)
- *"They are cheerful, like having fun. They speak a bit badly, but otherwise they're normal like us."* (female, 60 and more years old)
- *They are able to behave normally, do not speak much and prefer listening to others."* (male, 60 and more years old)
- *He/she often cries, is noisy, but does not realize it. He/she is able to produce something (ceramics), is skilful. Some of them are decent."* (male, 60 and more years old)
- *"They are nice, cheerful. Some of them are rather introverted, some have problems articulating."* (female, 60 and more years old)

We can see that the concepts regarding thementally impaired are manifold and diverse in both age groups and reflect on the personal experience and information of respondents.

Research Results and Discussion

There are not any significant differences in the sphere of encountering mentally impaired people. Both groups meet or not meet mentally impaired individuals with quite the same frequency. The respondent's place of living rather than his/her age is decisive, that is, whether he/she lives in the country, in the city or in a house for seniors, whether, for example, there is a house for health impaired individuals, a care centre, etc. in the vicinity to where the respondent lives. If there is a facility for mentally impaired individuals close to where the respondent lives, a higher level of experience and higher frequency of encountering these individuals are probable. Compared to this, a respondent living, for example, in a small village far from any such a facility, he/she may have less information and experience in this sphere.

Both groups of respondents consensually stated that they encountered mentally impaired individuals quite often, seeing them in the streets, in shops and cinemas and at the doctor's. Moreover, both groups of respondents also agreed that their encountering mentally impaired individuals did not influence their attitudes and opinions much. Encountering these individuals was a common matter for them. They perceived these individuals as anyone else and were not taken aback by their possible specific exhibitions.

We were also interested to know the level of the respondents' awareness of mental impairment and its causes, exhibitions and consequences. Both age groups obtain information on mental impairment from various sources, but mostly from the television, radio or Internet. Seniors also make use of information in magazines and books. Today's society offers many possibilities to obtain information on various types of impairment, the facilities for these people, etc. It rather depends on the abilities, opportunities and interests.

The age group of young people often uses modern technologies, mobile phones and the Internet. This way, they can easily get to plenty of information that is not available on the television or in magazines. However, it is also necessary to realize the possible risk of inaccuracy or distortion of the presented information. The attitudes of respondents between 20 and 30 years of age are also influenced by various institutions, in particular, education, and by various groups, such as family, friends, interest groupings, etc. A high number of young people study at university level familiarise themselves with basic information on individuals with disabilities within their various study fields.

We have obtained a lot of data and information from which it ensued that there were no considerable differences in the attitudes of the examined groups in terms of the respondents' age.

Conclusion

It can be stated that the research results did not confirm any significant differences in the attitudes of young people and seniors towards mentally impaired individuals.

The question relating to consent towards mentally impaired people being integrated was answered positively by most respondents from both categories. However, most of them also think that mentally impaired individuals are actually not accepted by society and are not involved much in social life activities, which should be improved.

Inclusion is a modern approach to integrating individuals with disabilities into society. The inclusive approach lies in the persuasion that all people are equal in their dignity and rights and enrich society. Inclusion can be understood as an approach of society which accepts divergence of all its members and within which it is absolutely common to be different. Thus, within the inclusive approach, individuals with disabilities are engaged in common life and in all common activities, similar to people without any disabilities.

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HEARING TEACHERS AT THE PRIMARY SCHOOLS FOR THE HEARING IMPAIRED IN THE CZECH REPUBLIC AND THE IN DEAF CULTURE KNOWLEDGE

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Abstract. When pupils with hearing impairment have hearing parents, the school for hearing impaired is usually the first institution where those students first encounter Czech sign language. That is why teachers should have information about Deaf culture, customs and history. Only then can a student with a hearing impairment become convinced that his language is full-fledged so he can be proud of it, as well as his Deaf culture. Teachers at Primary schools for the hearing impaired are supposed to be role models for pupils with hearing impairment and be one of the first people who are influencing them in this area. The aim of the research was to find out the level of Deaf cultural awareness of hearing teachers and whether they do know the customs and traditions of the Deaf. The research was conducted through the form of through structured interviews.

Keywords: Hearing teachers, Deaf culture, customs and traditions, sign language, specific needs of the deaf.

Introduction to the Issue

Deaf culture includes the Deaf with a capital „D" – the members of the cultural and linguistic minority of the Deaf. The basic characteristic of the Czech Deaf community is the communication in Czech sign language.

Members of the Deaf community are very appreciative of mutual contact and friendship. Bonds between deaf people are very strong. Deaf people love to spend time together and seek opportunities to communicate in their own language. The Deaf community forms its own little world, where people know each other, and communicate openly and directly. It has been known for deaf people to start talking to each other on the street, even if they have never met before or do not know each other – not only here in the Czech Republic but also abroad.

The development of Deaf culture occurs in the deaf clubs, where Deaf people meet at various events (such as balls, sport events, Witch burning, sign language production – Talking Hands, a charity concert Signed by Heart, benefit concert Twelfth Night, etc.). Deaf people have their art, which is primarily storytelling, funny stories, anecdotes and various games - humour is intended for entertainment within the community, where everyone share the same culture and language, theatrical performances of Deaf themselves (eg. theatre I Cannot Hear).

In the deaf community, there are behaviour or etiquette rules for how to get one's attention by touching, how to interrupt a conversation between two people, attracting attention with the help of lights in the room, saying goodbye and so on). In the Deaf culture, thereare also certain ways of saying „Bon appetit!", making a toast with the touching of hands, "universal" greeting, greeting with kisses on the cheek, clapping which deaf people do by raising their hands and flapping them. Deaf media plays a very important role in the Deaf community such as Deaf magazines, movies and TV programmes for the Deaf.

Deaf people present themselves as a cultural and linguistic minority who considers itself to be equal with the majority of the population. However, deaf people need to compensate for their loss of hearing. As members of the cultural and linguistic minority, they claim the right to use a **Czech Sign Language Interpreter**. Deaf people are very much aware of how interpreters are irreplaceable and as a result, there are now higher requirements for them than in the past. Deaf people expect Czech sign language interpreters to follow the Code of Ethics for the sign language interpreters and to be professional at all times.

The autor considers believe that teachers at primary schools for the hearing impaired are supposed to be positive role models for Deaf pupils and be one of the first people to influence them in this area. If pupils with hearing impairment have hearing parents, school is usually the first place where they first encounter Czech sign language. Therefore teachers should have information about deaf people's culture, customs and history. Only then can a student with a hearingimpairment become aware that his language is full-fledged so he can be proud of it, as well as of his Deaf culture.

Classification of communication systems for the Deaf

Promoting sign languages is associated with extensive linguistic researches, dating back to the last century. In 1960, a publication called Sign Language *Structure* was published by an American linguist W. Stokoe, who demonstrated that sign languages carry the essential characteristics of natural languages. This was the basis for sign language linguistics and since 1970s, the US has seen rapid sign language linguistics development. In 1971, Gallaudet University built Stokoe's Language Research Laboratory where a number of research projects began resulting in a number of publications on American Sign Language. (Macurová, 2008)

The officially recognised communication systems of the deaf in the Czech Republic are defined by the Act no. 423/2008 Coll., which is the full text of Act no. 155/1998 Coll., on sign speech and about amending other laws, as follows from changes made by Law no. 384/ 2008 Sb. on Communication Systems of Deaf and Deaf-Blind individuals. (Zákon č 384/2008 Sb.)

Czech Sign Language is a communication system of a visual-motor nature. „Czech Sign Language is a natural and fully-fledged communication system

formed by specific visual *movement-based means, that is, by the shapes of the hands*, their position and movements*, facial expressions*, *the* position of the head and upper part of the body. Czech Sign Language has the basic attributes of a language, that is sign-based communication, double structure, productivity, *distinctiveness* and historical dimension*,* and is stable from both lexical and grammatical perspectives. *"* (Zákon č 384/2008 Sb.)

Communication systems in the educational process

Communication systems used in the educational process of pupils at the schools for the hearing impaired at individual schools varies. We can say that during the educational period of individuals with hearing impairment, two basic communication streams were developed - audio oral and visual motoric (Horáková, 2012). Communication systems based on these two streams are used at particular schools, depends on the preferred approach to pupils with hearing impairment.There is the oral method approach, the total communication method approach and in recent years, also the bilingual approach.

Cultural and linguistic context of hearing impairment

The term deaf culture was established in the 1970s but of course, it was in existence much earlier. Deaf culture is maintained within the Deaf community. Its transmission is unique in the fact, that only 5 – 10 % of the transmission is possible from generation to generation in the deaf family, because 90 – 95 % of deaf childrenare born to hearing parents. Sharing mutual culture and transfer is later taking place at deaf schools, at boarding houses, in deaf organisations. (Kosinová, 2008)

Communication is the essence of existence of the deaf community and their culture. Among themselves, through their language, Deaf people can communicate fully, pass on their experience, humour, telling stories and legends to each other. Kannapell (in Wilcox, 1989) describes a very strong feeling of self-confidence and equivalence thanks to the smooth and easy communication with other Deaf people. Members of the Deaf community recognise sign language as their primary communication code. There are typical rules of deaf communication and certain specifications, which emerges from the visual motoric nature of the language. Eye contact, facial expressions and body posture all have a very important role to play. Communication is very direct and can differ greatly in the rules of behaviour, when greeting, wishing Bon Apetit, attracting attention and so on.

The identity of the deaf adult is understood as a consistent sense of self, „finding yourself", an awareness of „where I belong", like the social aspect of identity and „who I am", as the personal aspect of identity. It is a developmental process that an individual's identity is formed gradually which depends on many factors - attitude towards the child's hearing impairment, communication at

home and later in school, relationships with classmates and peers and also depends on whether there was identification deaf adult role model present during deaf pupil's development.

Part of Deaf culture is the Deaf art. Kosinová (2008) divides the Deaf art to folk art – telling fictional tales, short stories based on sign language - including ABC stories and stories with classifiers, **humour** – telling jokes or stories based on language, anecdotes - deaf people share their experiences on relationships with hearing people such as communication issues and classic misunderstandings, **games** - based on visual perception where deaf people welcome movement, logistic, visual or games based on sign laguage, **visual arts** - this can include painting, sculpture, architecture etc. containing information that is essential for deaf people; there are mostly deaf amateur artists, whose work has contributed to the cultural heritage of the Deaf, **theatre** - theatre performances for deaf viewers are a great experience when translated into Czech sign language. Respectively Deaf actors have one of the main means for how they can implement themselves (the only professional deaf theatre company is Theatre I Cannot Hear); this includes pantomime (known czech deaf company Pantomima S.I.), Czech sign language poetry, interpretation of the songs in sign language.

Deaf media

Deaf media in the deaf culture not only adds magazines for the Deaf - called Gong, Info-Zpravodaj. Some schools for the hearing impaired also publish their school magazines, as well as various DVD-ROMs, CD-ROMs related to deaf issues, their language and culture. Many makers of deaf related DVD-ROMs and CD-ROMs are themselves Deaf. Deaf people are also represented in the film sector - AWI film, fairy tales in Czech sign language on DVD-ROM and CD-ROMs; in television broadcasting, there are spaces for deaf people such as news in Czech sign language and Czech TV Deaf Club (both broadcasted by ČT2). There are also programmes supplied with closed captioning (which you can find on teletext page no. 888). A very important part of life today for Deaf people is information technology via the Internet (internet portals for the Deaf and about the Deaf). For example, in communication technology, there are systems for instant messaging (ICQ, Skype, MSN) and the use of SMS messages via the use of a mobile phone.

The main aim of the research

The aim of the research is to find out the level of Deaf culture awareness amonghearing teachers of the Deaf and whether they are aware of the customs and traditions of the Deaf.

Partial aims of the research
- Find out the current situation regarding awareness and knowledge of Deaf culture in hearing teachers working at primary schools for hearing impaired in the Czech Republic.
- Focus on the relationship between hearing teachers and Czech sign language
- Determine whether hearing teachers know the rules of intercultural communication with Deaf people.

The methodology and the research sample

The method used was qualitative research, where data were obtained through a structured interview, which lasted 10 – 20 minutes.

Questions used in the structured interview were based on information about Deaf culture, own experience and consultations with experts in the field.

The research was conducted from January 2014 to February 2015 with 8 from 13 primary schools for hearing impaired in the Czech Republic. I met with the hearing teachers in person, we discussed the questions and sometimes I added extra explanatory information.

The respondents to the research were hearing teachers working on a secondary level of primary schools for hearing impaired in the Czech Republic with the bilingual approach and the approach of philosophy of total communication.

The research involved 82 teachers (100 %), of which 68 (83 %) were female and 14 male (17 %). The age of most of the respondents was 34-45, of which there were 39 in this group. In the age group between 21 – 33 years, there were 13 teachers and in the age group of 46 – 55, there were 22 teachers and over 51 years, 8 teachers.

Interpretation of the research results

There were 62 (72 %) respondents studying courses in Higher education, with the remaining respondents still at university alongside his/her current job. We can conclude that the majority of the teachers satisfy the statutory requirements stated by law for elementary education. In the schools, 17 (20,7 %) teachers taught humanities, 58 (70,7 %) teachers taught sciences and 7 (8,5 %) taught technical or vocational subjects. When investigating how long the teachers were practising at primary schools for the hearing impaired, it is evident that the majority of teachers 39 (47,6 %) are amongthose with long years of experience, having worked for more than 18 years with pupils with hearing impairment. 19 (23,2 %) teachers worked for 11 – 18 years in these schools. 15 (18,3 %) teachers had the shortest practice, from 1 – 5 years. 9 (11 %) of the teachers worked in the education of hearing impaired pupils for 6 – 10 years.

From a total of 82 teachers, there were 8 (9,8 %) who used Czech sign language in the education of students with hearing impairment. 45 (54,9 %) respondents can partially communicate with deaf people whereas 29 (35,4 %) do not use Czech sign language at all. As follows from the survey, 7 (8,5 %) respondents with more than 10 years' teaching experience does not master the use of natural language of the Deaf.

On the question based on the knowledge of the difference between the use of Czech sign language and signed Czech answered correctly 67 (81,7 %) respondents, 3 (3,7 %) did not answer at all and 12 (14,6 %) did not know the difference between Czech sign language and signed Czech.

Deaf with a capital „D", 28 (34,1 %) respondents answered correctly. The other 31 (37,8 %) respondents did not answer correctly. 23 (28 %) respondents did not even know there was a difference between the use of the small "d" and large „D".

On the question of whether the deaf are a cultural and linguistic minority, 39 (47,6 %) respondents answered positively, 43 (52,4 %) negatively. It is surprising that more than half of the teachers do not agree with the fact that Deaf people are seen as a cultural and linguistic minority. However, when asked about why they do not view Deaf people as a cultural and linguistic minority, the respondents describe them as a specific group,which has its own distinctive culture and language. They add that it's different in language because the Czech language belongs to the majority whereas sign language is a minority language. The respondents mention that there are differences in the culture, that deaf people declare values, customs, traditions which are different from the hearing world, and they are proud of their Deaf identity. Amongst the respondents, there were hearing teachers who also disagreed with the statement that Deaf people are a linguistic and cultural minority. On this issue, they still see the constant controversy as they do not perceive Deaf people as a minority but as disabled citizens. Although they admit that Deaf people have their own history, customs and specific behaviour, and communicate only by hands.

On the question of what is included in Deaf culture, 23 respondents said Czech sign language, 21 said signed Czech, 38 said Czech sign language simultaneously with spoken Czech language, 41 said specific standards of Deaf people's behaviour, 6 said that Deaf use to be late, 74 said deaf institutions/deaf clubs etc. and 47 said social events for the Deaf.

On the question whether Czech Sign Language is a fully-fledged language with natural language attributes, 32 (39 %) responded positively and the remaining 47 (57,3 %) respondents replied that it is not. 3 (3,7 %) of the respondents did not know that the Czech sign language is the natural language of the Deaf. Of the 32 (39 %) respondents who said that sign language is a full-fledged language with natural language attributes, I asked for an explanation. Only 11 (13,4 %) answered correctly, saying that the Czech sign language is like any other language in that it has its own rules, grammar, the basic attributes of a

language, that issign-based communication, double structure, productivity, distinctiveness and historical dimension, specific signs, and is stable from bothlexical and grammatical perspectives. They also said that Czech Sign Language is accompanied by facial expression and non-manual means and cannot be written down.

On the question of whether Czech sign language is an international sign language, 77 (93,9 %) answered correctly with 5 (6,1 %) reporting an incorrect answer.

On the knowledge of the customs and traditions of the Deaf, 11 (13,4 %) respondents answered postively with the remaining 71 (86,6 %) not knowing the Deaf customs and traditions. Hearing teachers have very little knowledge of the customs and traditions of the Deaf and can only provide basic information. For example, Deaf events such as sport and cultural events like balls, their own humour, clapping the deaf way by the fluttering of hands, or greeting someone the deaf way by touching the faces.)

On the question of knowing famous people from the Deaf world, only 37 (45,1 %) knew someone, with the remaining respondents having no knowedge at all. When answering the question, many mentioned more names of the famous or well known deaf persons in the Czech Republic or abroad. The respondents stated these names – numbers in brackets states how many times these names were said: Petr Vysuček (29x), Věra Strnadová (25x), Helen Keller (18x), Josef Brožík (15x), Charles Michel de l'Epée (11x), Bedřich Smetana (9x), Zuzana Hájková (8x), Marie Basovníková (6x).

Magazines for the Deaf 69 (84,1 %) interviewees knew some, 13 (15,9 %) had no knowledge of magazines for the Deaf. All 69 respondents are aware of the magazine GONG, 17 respondents added magazine UNIE, 4 of them knew INFO-ZPRAVODAJ.

When asked about the number for the teletext page where Deaf people can turn captioned subtitles on, 64 (78 %) respondents gave the correct answer. Other respondents answered incorrectly and some could not remember.

Interviewees had to name a Deaf related documentary and 56 (68,3 %) respondents correctly indicated TV Deaf Club. The remaining respondents answered incorrectly and gave wrong programme names.

When asked about Institutions where Deaf native signers teach Czech sign language to the hearing public, 43 (52,4 %) respondents correctly stated a number of organisations (Pevnost, 3Dimenze, Trojrozměr, Czech Union of the Deaf). 3 (3,7 %) respondents incorrectly stated Language Centre Ulita (Ulicentrum), 7 (8,5 %) respondents classified incorrectly Czech Chamber of Sign Language Interpreters and the remaining respondents did not know or did not remember.

When questioned about websites for/about the Deaf, 58 (70,7 %) respondents were able to answer while 24 (29,3 %) did not know. Among the web addresses that were reported less frequently or occasionally, were included:

www.helpnet.cz, www.neslysici.cz,www.ruce.cz, www.ticho.cz, www.asnep.cz, www.cktzj.com, www.frpsp.cz,www.csns.cz, www.cun.cz, www.appn.cz, www.snncr.cz, www.gong.cz, www.pevnost.com, www.spreadthesign.comand other websites like Deaf school websites.

When asked about which mistakes to avoid when communicating with Deaf people, 73 (89 %) teachers knew and 9 (11 %) did not know. Most of them were familiar with communication rules for the Deaf, the most considered were the most common and typical mistakes such as poor articulation, covering one's mouth when talking, turning their backs on Deaf people, rapid talking, sloppy pronunciation (which Deaf cannot lip read well), lack of eye contact and inappropriate or poor use of lighting – for example, dark room or bright light behind the person who is speaking which will make it very difficult for the deaf person to be able to lip-read.

Of the 82 (100 %) respondents to the question whether they felt it is important to have a Czech sign language interpreter for the Deaf, 77 (93,9 %) respondents answered positively, 2 (2,4 %) negatively and 3 (3,7 %) respondents did not give an answer. When asked why they felt it is important to have an interpreter, the vast majority of the respondents said it is essential for the Deaf person especially when communicating at the doctors, at council, in the court, in educational establishment, at social events and the theatre. When asked if they knew how they can book Czech sign language interpreter for the Deaf person, 26 (31,7 %) respondents answered correctly but 56 (68,3 %) did not know. They mentioned that the interpreter can be booked via the Czech Chamber of Sign Language Interpreters, or by phone (sending an SMS/text message to the phone number 776 701 502) or e-mail via ASNEP. Respondents also had information about the possibility to book interpreter via the Centre providing Czech sign language interpreters for the Deaf, or know marginally that there is a possibility for an interpreter to be booked through the Czech Union of the Deaf or Association for the Deaf and Hard of Hearing in the Czech Republic.

Conclusion and Solutions

The research has shown how hearing teachers of the Deaf have very little information about Deaf people, their culture including their language, customs and history. Hearing teachers should not only have information about the mother tongue of deaf people but should also know about their culture, customs and history. Only then can a student with hearing loss be aware that sign language is full-fledged and he can be proud of it, as well as on his Deaf culture. It is very disturbing to think that hearing teachers do not realise that for a Deaf person, education in Czech sign language is absolutely vital. Only 8 of the teachers (9.75 %) who were interviewed, mastered Czech sign language. This number is alarming. Headmasters should consider including this fact into the acceptance criteria for a teacher of the Deaf - to have not only theoretical but also practical

knowledge of Czech sign language as a means of communication of the Deaf. I am aware of the fact that not all pupils at schools for the hearing impaired are deaf and that there are also hard of hearing students including those with cochlear implants as well as others with multiple disabilities.

In education, the role of a teacher is irreplaceable. The teacher should not only have adequate educational knowledge, but also motivational and organisational skills to educate and generate new information, and should be responsible, reliable and have a positive attitude in his approach to work and towards to his students, natural authority and ability to get students' trust and so on. Courses for Special Education at the time of study at university should demonstrate how to communicate with Deaf pupils and students and approach them. The future teachers of the Deaf should not be missing information also on the social needs of people with hearing impairments, assistive technical aids as well as basic knowledge of Czech sign language and Deaf culture. They should be fully aware of the Deaf world, their history, their culture, how they live, communicate as well as to know about their customs, traditions and values.

Hearing teachers should be constantly educated both in their field of teaching as well as the field of Deaf people. They should bear in mind that through the natural language of the Deaf, hearing teachers are able to teach Deaf everything. Of course, we should keep in mind the importance of a positive role model, there should be employed also large number of hearing impaired teachers themselves so they can be cultural and identificational role models for Deaf pupils and students at the schools for the hearing impaired.

A surely good thing would be ifDeaf people themselves could create a Deaf manual as basic informative tool, from which the hearing teachers of the Deaf could refer to and use it as a basic course of information when referring to Deaf culture with specifics on rules of communication, customs and traditions as well as contacts with local Deaf associations, clubs and websites. Thanks to this manual, hearing teachers would be able to pass on those information to their hearing impaired pupils.

Most children with hearing impairment are born to hearing parents, so they would miss the chance of passing the Deaf culture from generation to generation (from parents to their children). But Deaf culture is able to pass on in Deaf schools and boarding schools among other deaf peers as well as in various organisations for the Deaf including Deaf clubs. Social values, customs, rules of conduct, awareness of the history and even language among themselves do not pass only from parents to children, but mostly fellow students at schools for the hearing impaired.

If there are hearing impaired teachers available at the school, it is very important role in the educational process. This way, Deaf children of Deaf parents are language role model or also those deaf adults which has positive effect on one's personality and creates the deaf identity. For the deaf child to develop and thrive, it is very important for him/her to experience and be exposed

to native users of sign language and deaf culture bearers - deaf adults who are proud of their language and culture and who lead happy lives. The deaf child will then become confident in the knowledge that he/she can also grow to be someone who is successful and happy, despite being deaf. The small deaf child will then not be under the misunderstanding that he/she will become hearing once they have grown up.

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KOORDINĀCIJAS ATTĪSTĪBAS TRAUCĒJUMI, PĒTNIECĪBAS VĒSTURISKIE PIRMSĀKUMI UN ATTĪSTĪBA

Developmental Coordination Disorder, Historical Beginnings and Development

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Abstract. *This article contains theoretical analysis about Developmental Coordination Disorder historical evolution. Studies include a wide variation in terminology and criteria to describe . Developmental Coordination Disorder. Developmental Coordination Disorder is a complex neurological condition, which affects muscle coordination and perception.*

Keywords: *developmental coordination disorder, dispraxia, clumsy child, minimal brain dysfunction.*

Ievads
Introduction

Pasaulē tiek daudz diskutēta, pētīta un analizēta izglītības būtība, tās ietekme uz cilvēku un sabiedrību kopumā. Mūsdienās uzsvars tiek likts uz izglītības kvalitāti, pieejamību un piemērotību katra indivīda vajadzībām.

Zinātniekiem, izglītības politikas veidotājiem, praktiķiem un ekspertiem ir jādomā, kā nodrošināt atbilstošu vidi, metodes un saturu, lai veicinātu izglītības pieejamību visiem, uzlabotu un nodrošinātu tās atbilstību ikviena vajadzībām.

Zinātnieki pēta izglītības saturu un tās procesus, izstrādā jaunas mācīšanās metodes, sniedz rekomendācijas izglītības nozarē strādājošiem. Lai katram nodrošinātu individuālu pieeju mācīšanās procesā, ir nepieciešami starpdisciplinārie pētījumi. Izglītības nodrošināšana visiem ietver sevī arī bērnus ar mācīšanās traucējumiem. Ja izglītības iestādē ir bērns ar mācīšanās traucējumiem, tad ir būtiski noskaidrot mācīšanās traucējumu cēloņus (neiroloģiski, psiholoģiski, klīniski), un izpausmes, tādējādi palīdzot izglītības darbiniekiem nodrošināt šādiem bērniem atbilstošu mācību procesu – (Losse at al, 1991).

1990. gadā UNESCO uzsāka globālo kustību "Izglītība visiem" (http://www.unesco.lv/). Kustības mērķis ir nodrošināt izglītības pamatvajadzības ikvienam, tai skaitā bērniem ar koordinācijas attīstības traucējumiem. Sabiedrībā mainījās attieksme pret dažādību, tika pievērsta uzmanība bērniem ar traucējumiem, meklētas jaunas metodes, kā veiksmīgāk iekļaut bērnus ar traucējumiem vispārizglītojošās izglītības iestādēs. Izglītībā sāka pievērst uzmanību bērnu dažādībai, tajā skaitā neveiklajiem bērniem skolās.

Arī Latvijā pēdējos gados daudz diskutē par iekļaujošo izglītību, tomēr bērni ar koordinācijas attīstības traucējumiem izglītības iestādēs nesaņem vajadzīgo atbalstu, jo daudzos gadījumos attiecīgais traucējums Latvijā netiek diagnosticēts. Tāpēc ir nozīmīgi ir apskatīt pasaules pieredzi un skatījumu uz šo problēmu vēsturiskajā kontekstā.

Raksta mērķis ir apskatīt un analizēt koordinācijas attīstības traucējumu pētniecības vēsturisko attīstību, jo ir būtiski skatīt to vēsturiskajā kontekstā, lai varētu konkrētāk izprast traucējuma raksturu un veiksmīgāk palīdzēt bērniem ar koordinācijas attīstības traucējumiem izglītības iestādēs.

Rakstā tiks aprakstīta un analizēta koordinācijas attīstības traucējumu pētniecības vēsturiskā attīstība, lai apkopotu atziņas par bērniem ar koordinācijas traucējumiem izglītības nodrošināšanai. Pasaulē pēdējos 100 gados pētnieki (vairāk gan psihologi, psihiatri, neirologi nevis pedagogi) analizējuši dažādus terminus un meklējuši visprecīzāko apzīmējumu šiem traucējumiem. No neveiklā bērna, neveiklā bērna sindroma, smadzeņu minimālās disfunkcijas līdz koordinācijas attīstības traucējumam vai/un dispraksijai.

Koordinācijas attīstības traucējumu pētniecības vēsturiskā attīstība
Research of Developmental Coordination Disorder the Historical Development

Diskusijas par koordinācijas attīstības traucējumiem (vēsturiski šim traucējumam ir bijuši dažādi apzīmējumi)pētnieciskajā telpā ilgst vairāk kā 100 gadus un turpinās arī mūsdienās (Barnhart et al, 2003). Pirmsākumos, tāpat kā visi specifiskie mācīšanās traucējumi – disleksija, disgrāfija, diskalkulija, uzmanības deficīta hiperaktivitātes sindroms, arī koordinācijas attīstības traucējums tika uzskatīts par garīgās attīstības traucējumu. Taču bija otra bērnu grupa, kurus uzskatīja par neveikliem un viņiem nepievērsa nekādu uzmanību. Bērni, kuriem bija problēmas ar motoriku (šņoru siešana, fiziskās aktivitātes, sīku priekšmetu turēšana, plānošana, sevis organizēšana)tika uzskatīti par slinkiem, neveikliem un paviršiem. Tajā laikā valdīja uzskats, ka, ja būs lielāka disciplīna un sodi, tad viņi no tā „izaugs". Jāatzīmē, ka šāds uzskats, joprojām valda daļā sabiedrības, lai arī ir veikti daudzi pētījumi un ir pierādīts, ka no tā „neizaug" un ir nepieciešams atbalsts šo traucējumu mazināšanā, tādējādi veicinot veiksmīgu iekļaušanos sabiedrībā.

Koordinācijas attīstības traucējumi ilgu laiku tika pētīti kā sekundārie traucējumi cerebrālās triekas, muskuļu atrofijas, afāzijas un arī citu specifisku mācīšanās traucējumu gadījumos, bet 20. gadsimta 90. gados, kad pirmo reizi parādījās termins „koordinācijas attīstības traucējumi", pētnieki sāka apskatīt to arī kā primāro traucējumu. Primāra vai sekundāra traucējuma nošķiršana pētniekiem vienmēr ir bijis liels izaicinājums, jo analizējot specifiskos mācīšanās traucējumus, var secināt, ka simptomātika tiem ir ļoti līdzīga.

Zinātnieki atzīmē, ka koordinācijas attīstības traucējumiem primāri būs motorās problēmas un sekundāri – rakstīšanas, lasīšanas un uzvedības problēmas.

Pagājušajā gadsimtā profesionāļi (neirologi, ārsti, psihiatri un neirofiziologi) pētījuši „neveiklos" bērnus un mēģinājuši bērnu neveiklību definēt un aprakstīt. Medicīnas nozares pārstāvju pētījumu rezultāti ir veicinājuši arī izglītības nozares pārstāvju interesi par koordinācijas attīstības traucējumiem. Pētījumu nepieciešamību veicinājušas arī sociālās un ekonomiskās pārmaiņas pasaulē.

S. Kermarkas *(Cermark)* un D. Larkinas *(Larkin)* grāmatā „Koordinācijas attīstības traucējumi" minēts pirmais dokumentētais pētījums –L. Lipitas *(Lippitt)* „Motorikas koordinācijas vājums bērniem"(Poor muscular coordination in children) 1926.gadā (Cermak & Larkin, 2002). Lipita bija viena no pirmajām, kura uzskatīja, ka koordinācijas vājuma cēlonis ir centrālas nervu sistēmas (CNS) bojājums un atzīmēja sakarības starp smadzeņu bojājumiem un disfunkcionālu motoro uzvedību. Savā pētījumā Lipita uzsvēra, ka motorikas koordinācijas vājuma mazināšanai ir nepieciešama speciāla terapija.

20. gs. sākumā amerikāņu ārsts S. Ortons *(Orton),* kurš tiek uzskatīts par mācīšanās grūtību pētīšanas iesācēju, savos pētījumos, apskatot un analizējot lasīšanas traucējumus un disleksiju, pieskārās arī motorikas problēmām. Ortons aprakstīja bērnu grupu ar motorikas traucējumiem, kuriem ir arī lasīšanas un rakstīšanas grūtības. Viņa pievēršanās motorikas traucējumiem skaidrojama ar to, ka lasīšanas traucējumi un disleksija ir cieši saistīta arī ar koordinācijas traucējumiem. Pētījumā Ortons diskutē par attīstības dispraksiju kā iedzimtu neveiklību *(congenital maladroitness)*vai pataloģisku neveiklību (abnormal clumsiness) un uzskata, ka ne visiem bērniem neveiklības cēlonis ir medicīniska rakstura. Viņš savā pētījumā min arī to, ka šī iedzimtā bērna neveiklība ne visos gadījumos skar intelektu, bet vienmēr ietekmē mācīšanos. Ortons uzskatāms par vienu no pirmajiem pētniekiem, kurš saskatīja sakarības starp motorikas traucējumiem un mācīšanās grūtībām (Orton, 1937).

Balstoties uz iepriekšminētajiem pētījumiem A. Štrauss (Strauss) arī pievērsās bērniem ar neiroloģiskiem traucējumiem, kas ietekmē akadēmisko prasmju apguvi. Lai padziļināti izpētītu šos traucējumus, viņš devās uz Ameriku, kur satika L. Lehtinenu (Lehtinen). 1947. gadā viņi atvēra skolu bērniem ar dažādiem smadzeņu bojājumiem netālu no Mičigenas ezera. Viņiem bija pārliecība, ka pielāgojot atbilstošu vidi, pielietojot atbilstošas mācīšanās metodes un grāmatas traucējumus var mazināt. Štrauss, pētot bērnus, konstatēja, ka vairākiem ir mācīšanās traucējumi, bet intelekts atbilst normai. Gan Lehtinena, gan Štrauss uzskatīja, ka mācīšanās traucējumi būtu jānošķir no garīgās atpalicības. Zinātnieki izdalīja bērnus ar motorikas problēmām, kas ietekmē mācīšanos. Pateicoties šīs skolas izveidei, vairāki skolotāji tika apmācīti strādāt ar bērniem, kuriem ir motorikas problēmas (Strauss, Lehtinen, 1947).

Koordinācijas attīstības traucējumu kontekstā noteikti ir jāpiemin arī S. Kirks *(Kirk),* kuram ir liela nozīme speciālās pedagoģijas attīstībā. Viņš lielu

vērību pievērsa sadarbībai (starp medicīnas profesionāļiem, izglītības pārstāvjiem un bērnu ģimenēm). Viņš uzskatīja, ka viens no veiksmīgas mācīšanās stūrakmeņiem ir sadarbošanās. Kirks vairāk pievērsās rakstīšanas traucējumiem, tomēr savā ziņojumā 1963. gadā min arī bērnus ar koordinācijas traucējumiem. Šis ziņojums vēsturē iegājis kā pirmais, kurā definēts jēdziens „mācīšanās grūtības" (Kirk, 1963).

Pirms tam pētnieki saskatīja sakarības starpbērna neveiklību un nelieliem smadzeņu organiskiem bojājumiem, taču neviens nebija to konkrēti definējis.

1966. gadā Anglijas valsts darba grupa oficiāli definēja neveiklību kā *minimālo smadzeņu disfunkciju (minimal brain dysfunction)*. To dokumentēja un aprakstīja S. Klements *(Clements)*. Minimālā smadzeņu disfunkcija rodas smadzeņu organisko bojājumu dēļ. Šie organiskie traucējumi ir tik niecīgi, ka tas neskar intelektu, bet konkrētas, atsevišķas prasmes, darbības. Pirmo reizi zinātnieki skaidri definēja, ka bērniem ar minimālo smadzeņu disfunkciju nav skarts intelekts. Klements skaidrojot minimālo smadzeņu disfunkciju nodala tādus simptomus kā uzmanības deficīts un motoro funkciju nepilnības (Clements, 1966).Tādējādi var uzskatīt, ka tas ir pirmsākums motoro traucējumu atsevišķai izdalīšanai.

Nedaudz vēlāk, 1968. gadā R. Paine *(Paine)* atzīmē *minimālo cerebrālo disfunkciju.* Izpētes rezultātā tika novērots, ka bērniem, kuriem konstatēta minimālā cerebrālā disfunkcija primārais ir tieši sensomotorās koordinācijas traucējums (Paine, 1968).

Diagnoze – minimālā smadzeņu disfunkcija – ilgāku laika periodu bija vienīgā kas tika uzstādīta neveiklajiem bērniem. Lai aprakstītu neveiklos bērnus, mediķi savos pētījumos diagnosticēja tiem minimālo smadzeņu disfunkciju.

1972. gadā Dž. Eires *(Ayres)* raksturoja koordinācijas attīstības traucējumus kā sensorās integrācijas traucējumus *(disorder of sensory integration)* (Ayres, 2002). Viņa uzskatīja, ka labvēlīga vide palīdz un ietekmē motoros procesus un ka taktīla, vestibulārā simulēšana ietekmē smadzeņu darbības procesus, kas trenē uztveres un motorās prasmes.

1975. gadā S. Gubejs *(Gubbay)* lieto un definē neveiklā bērna sindromu *(clumsy child syndrome),* lai raksturotu bērnu ar normai atbilstošu attīstības intelektu, kuram nav uzstādīta klīniska diagnoze bet ir grūtības ar koordināciju, kas ietekmē mācīšanos un socializāciju (Gubbay, 1975). Gubejs neveiklo bērnu definēja kā mentāli normālu, bez redzamām anatomiskām novirzēm, fiziski spēcīgu, bet tādu, kuram grūtības sagādā darbība – zina kā jādara, bet nevar izdarīt (noķert bumbu, griezt ar šķērēm utt.). Viņš akcentēja, ka traucējums ietekmē bērna fiziskās aktivitātes, motorās prasmes, un rada problēmas ar rokrakstu. Gubejs vēlreiz atzīmē, ka neveiksmes mācību procesā ne vienmēr nozīmē garīgu atpalicību.

No 20. gadsimta sākuma līdz 90. gadiem koordinācijas attīstības traucējumi tika apzīmēti dažādiem nosaukumiem– attīstības traucējumi, minimāla motoro prasmju disfunkcija, motoro kustību kontrolēšanas traucējumi, minimālā

smadzeņu disfunkcija, minimālā cerebrālā disfunkcija, sensorās integrācijas traucējumus, neveiklā bērna sindroms u.c.

20. gadsimta 90. gadi bija pārmaiņu laiks. Starptautiskajos pētījumos 90. gados parādījās jauni termini – koordinācijas attīstības traucējumi un dispraksija, par kuriem tiek diskutēts joprojām – vai tie ir sinonīmi vai tomēr atšķirīgi termini. Mūsdienās autori nespēj nonākt pie vienotas terminoloģijas. Par koordinācijas attīstības traucējumiem diskutēja ne tikai psihologi, neirologi un neirofiziologi, bet arī pedagogi un bērnu ģimenes.

Upsalas Universitātē Zviedrijā M. Plesa *(Pless)* un M. Karlsone *(Carlsson)* savā pētījumā atzīmē, ka zinātniskajos rakstos koordinācijas attīstības traucējumi tiek definēti 1994. gadā (Pless, Carlsson, 2002). Kā redzams 1. tabulā pirms 1994. gada pētnieki savās publikācijās lieto apzīmējumu neveikls nevis koordinācija attīstības traucējumi.

1.tabula. Koordinācijas attīstības traucējumi pētniecībā
Developmental Coordination Disorder in publication
(by M. Plesas un M. Karlsones)

Pētnieks	Koordinācija attīstības traucējumi (DCD)	Neveikls (CLUMSY)
Allen 1971	X	P
Platzer 1976	X	P
Horvat, 1982	X	P
Bishop&Horvat 1984	X	P
Kemaham&Fillary 1986	X	P
Marchiori et al. 1987	X	P
Watter & Bullock 1987	X	P
Laszlo et al. 1988	X	P
Polatajko et al. 1991	X	P
Wilson et al. 1992	X	P
Revie &Larkin 1993	X	P
Davies&Gavin 1994	X	P
Lockhart&Low, 1994	X	P
Schoemaker et.al., 1994	**P**	P
Polatajko et al., 1995	**P**	X

X – nelieto publikācijās,P – lieto publikācijās

Tas izskaidrojams ar to, ka 1994. gadā Amerikas Psihiatru Asociācija (turpmāk APA) oficiāli nodefinēja koordinācijas attīstības traucējumus, ko pēc tam daudzi pētnieki, kuri bija rakstījuši par neveiklā bērna sindromu, apstiprināja. Amerikas Psihiatru Asociācija iesaka, ka koordinācijas attīstības traucējumi būtu jādiagnosticē šādos aspektus: motorās prasmes ir vājākas nekā konkrētā vecumā nepieciešams, kā motorās prasmes ietekmē akadēmisko mācīšanos, motoro prasmju traucējumi nav dēļ klīniskās diagnozes un nav konstatēti garīgās attīstības traucējumi. APA arī atzīmēja, ka koordinācijas attīstības traucējumu gadījumā, tas ir primārais traucējums nevis sekundārais,

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kā, piemēram, cerebrālās triekas gadījumā. Bērni ar koordinācijas attīstības traucējumiem vairs netiek uzskatīti par garīgi atpalikušiem. APA definē to, ka tas ir kustību koordinācijas traucējums, kas ietekmē mācību procesu un ikdienas dzīvi.

1996. gadā Pasaules veselības organizācija akceptēja terminu – koordinācijas attīstības traucējumi un iekļāva tos Starptautiskajā statistiskā slimību un veselības problēmu klasifikācijā (DSM-IV) (10. redakcija SSK-10) (http://www.who.int/classifications/icd/en/). Šī klasifikācija tiek lietota arī Latvijā (F82) – specifiski motoro kustību attīstības traucējumi *(specific developmental disorder of motor function),* kuros ietilpst arī neveiklā bērna sindroms, koordinācijas attīstības traucējumi un attīstības dispraksija.

Šobrīd viena no lielākajām organizācijām, kura aktīvi darbojas ir Lielbritānijas dispraksijas fonds (The Dyspraxia Foundation), kuru atzīst arī Pasaules veselības organizācija. Organizācija definē dispraksiju kā koordinācijas attīstības traucējuma formu, kas ietekme sīko un lielo motoriku gan bērniem, gan pieaugušajiem. Šie traucējumi ietekmē arī valodas attīstību.

Šādas organizācijas pievērsa speciālistu un sabiedrības uzmanību bērniem ar koordinācijas attīstības traucējumiem vispārizglītojošajās skolās.

Pēdējos gados pasaulē tiek daudz diskutēts par to vai dispraksija un koordinācijas attīstības traucējumi ir jālieto kā sinonīmi vai jānošķir.

Daži autori M. Miahara *(Miyahara)* I. Moba *(Möbs),* M. Portvuda *(Portwood)* uzskata, ka dispraksija būtu jānošķir no koordinācijas attīstības traucējumiem – minot, ka dispraksijai primāri ir problēmas armotoro darbību secību un atlasi, bet koordinācijas attīstības traucējumos ne visiem tas ir novērots. (Miyahara, Mobs, 1995; Portwood, 1999).

Pasaulē šobrīd zināmākā koordinācijas attīstības traucējumu un dispraksijas pētniece un praktiķe ir M. Portvuda, kura raksta, ka koordinācijas attīstības traucējumi nepāriet visa mūža garumā, bet ar atbalsta pasākumiem tos var mazināt. Savā pētījumā viņa min, ka joprojām skolās bērnus ar koordinācijas attīstības traucējumiem mēdz nepamanīt. Portvuda aktīvi sadarbojas ar dispraksijas fonda organizāciju un palīdz ģimenēm, pedagogiem un atbalsta personālam (logopēds, fizioterapeits, psihologs, speciālais pedagogs u.c.), kuri strādā ar šiem bērniem. Portvuda un M. Farels *(Farrell),* kuri pēta bērnus ar koordinācijas attīstības traucējumiem, apgalvo, ka gan dispraksija, gan koordinācijas traucējumi ir saistīti ar tādiem mācīšanās traucējumiem kā disleksija, uzmanības deficīta hiperaktivitātes sindroms, runas un valodas traucējumi (Farrell, 2006).

Mācīšanās traucējumus ir jāapskata starpdisciplināri (neiroloģija, psiholoģija, izglītība), jo koordinācijas attīstības traucējumiem ir medicīniska izcelsme, bet mācīšanās procesā tie kļūst arī par pedagoģisku jautājumu (Danforth, 2009).

Apzinoties traucējumus var mazināt problēmu, tādējādi uzlabojot sasniegumus mācībās.

Bērniem ar koordinācijas attīstības traucējumiem ir nepieciešams nodrošināt psiholoģisko, pedagoģisko atbalstu.

Secinājumi
Conclusions

Apskatot un analizējot pasaules pieredzi tika nonākts pie šādiem secinājumiem:

- Pētījumi dažādās zinātnes nozarēs ir ietekmējuši attieksmi izglītībā pret bērniem ar specifiskiem traucējumiem, tajā skaitā pret bērniem ar koordinācijas attīstības traucējumiem.
- Definējums – koordinācijas attīstības traucējumi ir radies salīdzinoši nesen tāpēc ir vairāk jautājumu kā atbilžu.
- Lai veiksmīgi iekļautu bērnu ar koordinācijas traucējumiem vispārizglītojošās iestādēs un sabiedrībā, nozīmīga loma ir starpdisciplinārajiem pētījumiem.
- Viens no svarīgiem priekšnosacījumiem koordinācijas attīstības traucējumu mazināšanā ir savlaicīga un precīza diagnostika.
- Koordinācijas attīstības traucējumi ir grūti pamanāmi un nosakāmi, jo bieži tie pārklājas ar citiem traucējumiem (disleksija, disgrāfija, diskalkulija, uzmanības deficīta hiperaktivitātes sindroms).
- Koordinācijas attīstības traucējumi Latvijā ir maz pētīti, lielākoties tikai kā sekundāri traucējumi klīniskiem traucējumiem.
- Latvijā ir nepieciešami pētījumi par bērniem ar koordinācijas attīstības traucējumiem vispārizglītojošās skolās.
- Speciālistiem būtu jāizstrādā kritērijus, kā atpazīt bērnus ar koordinācijas attīstības traucējumiem.

Summary

It must be admitted that the history of DCD can not be described as extensive.

Earlier researches, practitioners termed Developmental Coordination Disorder (DCD) also as poor muscular coordination in children (L. Lippitt, 1926), abnormal clumsiness (S.Orton, 1937), minimal brain dysfunction (Clements, 1966), minimal cerebal dysfunction (Paine, 1968), disorder of sensory integration (Ayres, 1972), clumsy child syndrome (Gubbay, 1975) and dyspraxia.

Developmental coordination disorder (DCD) is a complex disorder. Children with DCD disorder shoud be diagnosed as early as possible. Difficulties in the developmentalof motor skills are linked with problems of development in other areas. Children with DCD usually have other disorders such a Attention Deficit Hyperactivity Disorder (ADHD), speech and language problems and dyslexia.

Nowadays mostly use terms – dyspraxia or developmental disorder. In Latvia use International Statistical Classification of Diseases and Related Health Problems (ICD-100 and there are code F82 – Specific developmental disorder of motor function.

It is very important in Latvia to learn from the experience of other countries how to support children with DCD and adapt foreign experience in Latvian's schools. The school

should support children with DCD with the planning and organisation of their work and coordination problems. The researchers note that it is important to give support and benefits for children with DCD.

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FACTORS, INFLUENCING THE EMERGENCE OF CHILD SPEECH DISORDER

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Abstract. *Speech disorders can have various causes, expression of the pathological processes and severity. Studies in Latvia show that already in early childhood both language development deficiency and language development delay are evident.*
These phenomena continue also in the pre-school age where in 30 – 60% of cases show nonconformity of speech and language development to the set norms for the particular age.
The established facts illustrate the importance of learning about the causes of speech disorder, because the disorders in sound pronunciation and phonematic perception, as well as insufficient vocabulary affect both the acquisition of pupil's reading and writing skills and the understanding of verbal instructions.

Keywords: endogenous, exogenous factor, speech disorders.

Introduction

Speech disorders – deviations in speech development with various etiology (causes of illness or pathological condition), pathogenesis (mechanism of the illness development, pathological process of conditions), severity (Lūse, Miltiņa, Tūbele, 2012).

Factor – a condition that causally affects the process – causes, defines, facilitates or strengthens it (Svešvārdu vārdnīca, 1999).

Speech disorders can have physiological (connected with immaturity of the cerebral structure and the peripheral part of speech apparatus) and pathological (changes due to ilness) nature. Pathological speech disorders, depending on the location, are divided in central and peripheral, but by the character of the disorder – in organic and functional (Волкова, 2004; Парамонова, 1997; Трошин, Жулина, 2005).

Already in 2003 A.Irbe, S.Lindenberga and L.Miķelsone (2003) in the framework of the "Center for Healthy Development of Children" program inspected 37 children aged 2 to 3. The inspection established that only 8 children had mastered speech and language corresponding to the conventional age norms; 7 children showed insufficient development of language system, but 22 children – language development delay.

A.Falka (2012) notes that in Latvia 30 – 60% of children in preschool education institutions show insufficient speech and language development level.

G.Tomele, in turn, indicates that pupils, starting 1st grade, display disorders of sound pronunciation and phonematic perception, insufficient vocabulary and understanding of verbal instructions (Tomele, 2013).

The above mentioned facts illustrate the topicality of this issue. The speech and language disorders in age stages – early childhood → preschool → early school age – confirm the idea that a determined, planned and effective work on mastering the speech and language skills necessary for children can only be realized if the factors influencing the emerging of child's speech disorders are defined, if the adults are informed about the possible speech/ language disorders and if there is cooperation between a teacher-speech therapist ↔ specialists ↔ adults.

The aim of this article is to argument the possible causes for the emergence of child speech disorders.

Factors influencing the development of the child

The development of child's speech, as well as the development of the child as a whole is influenced by both endogenous (induced by internal causes) and exogenous (induced by external causes) factors (See Figure 1).
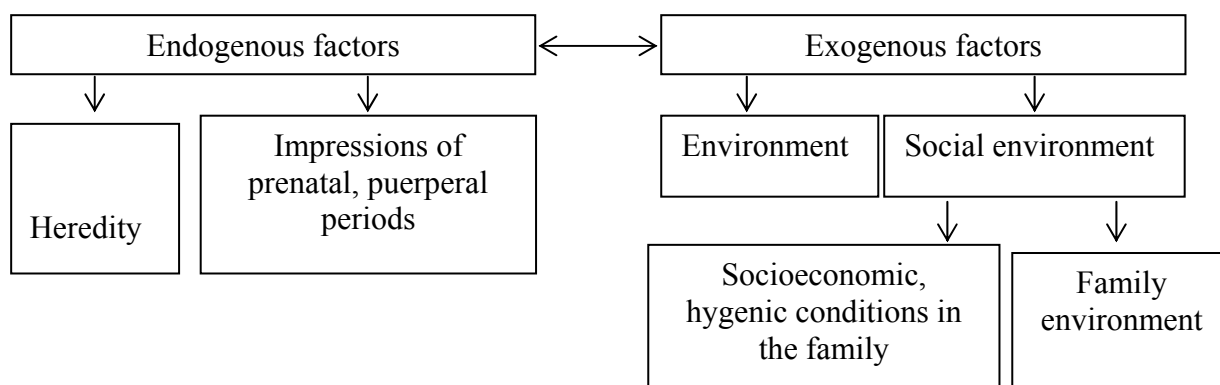
Figure 1. Factors influencing the development of the child (Geske, 2005; Puškarevs, 2001)

Endogenous factors

An important factor that affects the physical and psychic development is **heredity**. It is the ability of an organism to transfer its characteristics to coming generations. This factor largely determines not only the aggregate anatomic and physiological regularity of the organism, its functioning and reaction to environmental conditions, but also the character, intellectual abilities and the simplest functions of the psyche – senses.

The impact of heredity is observed when there is organic damage in the level of genes or chromosomes. Even though genetically hereditary disorders are not always dangerous for life (for example, as a consequence – shortsightedness or farsightedness), deviations in eyesight can make it harder for the child to

learn reading and writing skills. A widespread pathology of chromosomes is the Down's syndrome that is usually accompanied with disorders of mental development, speech/ language, aberrances in many organ systems.

When the child is born, not only the deviations connected with heredity appear, but also the changes obtained through the presence of unfavorable factors during prenatal period, i.e., from the splitting of the ovule until the full formation of the fetus.

Teratogenic (causing deformity) factors can be:

- physical (noise, mechanical damage, ionized irradiance etc.);
- chemical (medicaments, air pollution etc.);
- biological (viruses, bacteria, fungi).

E.Baladina (Баладина, 2010, 6), studied risk factors in children with cleft lip and palate (rhinolalia), noted the following teratogenesof disorder origin:

- harmful habits of parents (2,45%);
- gynecological and sexually transmitted diseases (STD) (3,4%; 0,98%);
- damages connected with occupation (3,1%);
- adverse mutual relationship in the family (2,97%).

Most often the influence comes from the set of harmful factors, because rhinolalia (the previously described case) is accounted as a multi-factorial hereditary disorder that is manifested in facial deformities, deviations of suction, breathing and speech/ language functions.

A report performed and published in 2009, "The Health of Mother and Child in the Prenatal Period" illustrates the substantial influence of mother's prenatal health and lifestyle habits on the child. The data of the newborn registry show that during pregnancy approximately 10% of the new mothers have smoked, 0.5% - used alcohol, and 0.1% - used drugs. The morbidity of the mother with various contagious diseases (STD, rubella, acute respiratory infection (ARI) etc.) has been the main etymological factor in 40% of premature deliveries.

Child's development is, undoubtedly, influenced by the conditions of the arrival of the child, i.e. how successful/ unsuccessful is the process of labor. Risk for difficult labor increases with the age of the mother (increased frequency of problems), as well as in cases of multi-fetal pregnancy and different infections. One of the main problems is premature delivery where the etiology is multi-factorial (Skrule, Štāle, Upmale, viewed on 12.12.2014).

From the moment of conception, through gestation period, and until the delivery, the new family has a particular responsibility for the physical and neuro-psychical health of the baby, therefore medical, psychological and pedagogic education of the new parents is very important.

Exogenous factors

One of the factors externally influencing human organism is the **environmental ecosystem** where child's development takes place. **Climate** as a part of the mentioned system influences the tendencies of growth, **cosmic component** (sun radiation, light, heat) depending on the dose influences organism both in a positive and negative manner, while the **biological component** (viruses, bacteria, pathogenic fungi) advance/ obstructs child's health and development in general (Puškarevs, 2001; Geske, 2005).

The most intensive facilitator/ disturber of child's development is the **first micro-social environment – family.**

The socio-economic situation in the country, society and family in general determines whether the provision of child's perceptive, domestic and hygienic arrangements corresponds/ does not correspond to the needs of the baby.

An essential factor that defines the dominant atmosphere between the adults in the family is the opinion of parents regarding the child as a value. This factor is closely related with love as an emotional phenomenon when the child is loved just as he is, regardless of whether the child lives up to the expectations of parents (Kempbels, 1998).

Child has his first emotional bonds with his mother. Child cannot yet express himself, but very early on he can recognize his mother's voice, intonation, obtaining information from her touches, facial expressions, and glances. Kind, emotionally generous interaction, child's sensitive experience, mother's comments, expressive environment of objects undeniably facilitates child's "languaging" – development of speech (Miltiņa, 2013). Mother is the first person that satisfies the physiological, love and security needs which creates the attachment phenomenon. Attachment as emotional bond where the relationship is based on evolution and survival, in the end creates a sense of security in the child – mutual trust, understanding and support between the child and the adult.

The author of the "Attachment theory" J. Bowlby notes that three models of attachment can develop between a child and an adult:
- secure attachment (child is certain that his parents will be available in situations unfavorable to him),
- anxious-resistant insecure attachment(child is not sure if his parents will be available, supportive and helpful when he needs them),
- anxious-avoidant insecure attachment (child is not sure that when he needs someone who could take care of him, there will be sympathy and help).

In continuation to the attachment models J. Bowlby notes on the direction of child development – children with sensitive and sympathetic parents will most likely develop successfully. However, those children whose parents are

insensitive, unsympathetic, inattentive or deprecatory are more likely to deviate towards direction conflicting with healthy development (Boulbijs, 1998).

Consequently, if the mutual parent ↔ child relationship are tended towards encouragement and support then the child obtains confidence of what he can and is able to do, he is not afraid of failures because he knows that everyone can make a mistake. The basic trust in world is secured in the child – he loves himself and people surrounding him, he is brave, active unafraid to express his thoughts verbally, choose his activities and finish the task in hand.

The significance of the interaction style between the mother and child in the facilitation/ obstruction of speech/ language development is greatly illustrated in the research made by A.Ivanova (Иванова, 2004) where she describes four mother ↔ child interaction styles:

1. **Optimum interaction style.**
2. Interaction style – **mother is silent, child speaks.**
3. Interaction style – **both are silent.**
4. Interaction style – **aggressive mother.**

The characteristic features of adult-child interaction styles are analyzed in Table 1.

Table 1. Characteristic features of mother ↔ childinter action styles (Иванова, 2004)

Styles	Characterization of interaction styles	Occurrence %
1.	**Optimum.** Mother and child have positive interaction: the child is listened to; mother↔ child actively engage in the conversation; child looks mother in the eye, perceive her verbal responses, nonverbal reactions. Child readily communicates with other adults.	47,7
2.	**Mother is silent, child speaks.** Mother does not like child's enthusiastic, emotional talking. The child is listened to in silence or by instructing: "Calm down!", "Be silent!" or "Tell me later!". Child tries to draw mother's attention by talking louder, more facial expressions and gestures. That in turn fortifies the negative reaction of mother – dislike of the child.	29,7
3.	**Both are silent.** Child accustomed to not talking and does not try to commence verbal communication with mother. When walking hand-in-hand, mother ↔ child looks different directions, they don't talk; both are characterized by emotionally blank facial expressions.	14,1
4.	**Aggressive mother.** Between mother ↔ child there is aggressive stance. Mother often yells, quarrels, shakes and sometimes even hits the child.	8,5

Research shows that positive conditions for speech/ language development are created in 47,7% of children, in 52,3% of cases there is varied dissatisfaction of child interaction needs, that appears when the child is rejected from the necessary source of security (mother) thus creating unpredictable consequences in his development.

Further in the research the author analyzes the link between child speech disorders and mother ↔ child interaction styles (see Table 2).

It should be noted that the **optimum interaction** style influences child's speech/ language development in a relatively positive way. Every expression of negative attitude from the mother 1, 5 to 2 times reduces the number of children whose speech development corresponds to the accepted language norm at the specific age.

Table 2. Overview of child disorders in the context of different interaction styles (Иванова, 2004)

Interaction style	Child speech disorder %		
	No speech disorder	Light speech disorder	Severe speech disorder
1. Optimum	48	39	13
2.Mother is silent, child speaks	30	53	17
3.Both are silent	27	43	30
4.Aggressive mother	33	40	27

If the **mother is silent but the child speaks** the number of children with light speech disorders increases 53%). Child is interested in verbal communication, bet there is a lack of the repeated correct pronunciation by adult. Thus, the speech apparatus of the child is naturally exercised in articulation; however, there is no parallel correctively developing activity and the light speech disorders do not disappear but become stronger.

A more serious situation is seen in the case of the third interaction style – **both are silent**, where the amount of severe speech disorders increases to 30%. This case verifies the theory that child's speech activity is created only in the interaction between child and adult. If no one listens to the child talking then it becomes unnecessary. Child is silent, his speech skills do not form and consequently the speed of speech development is delayed.

Even in cases where the speech of children corresponds to the norms in a rather large amount (33%), the attitude of an **aggressive mother** (fourth interaction style) greatly promotes not only severe speech disorders (30%), but also intensified facial expressions, gestures, reactions, unnatural volume of the speech and inadequate (not fitting to the situation) behavior.

The mentioned research can be concluded with a very significant conclusion that in the ages of early childhood and preschool, when the biological and psychological connection of child with his mother is not yet severed, the child tries to express his thought verbally first and foremost to her, and the mother herself has the greatest possibilities to encourage, support and active the verbal communication. For this reason other adults (teacher, speech therapist) only partially can correct child's speech, only partially they can compensate the "moral absence" of the mother, as the main responsibility for a

wholesome development of child's speech lies with the closest people – parents, mostly mother, who is irreplaceable.

Through analysis of the given situations we can conclude that the mutual mother ↔ child relations do not promote development of child's personality and speech in 52, 3% of cases which manifests in certain regularities:

- The tree main needs of a child – to belong and to be loved; need for self-esteem; need to acknowledge one – are not satisfied. It is known that parents love does not have to be deserved, it exists without any obligations. That means – to be with the child, help him be happy or sad, to work together (Kempbels, 1998);
- Child's attitude to himself, self-acceptance or non-acceptance, i.e., acknowledgment of self-esteem is created the evaluation of people around him. A child that receives few caresses feels the indifference or hostility of his parents, feels belittled. Self-esteem is taught and only a child with one can be brave independent, can realize himself in specific action, verbal communication included (Pučure, 2000);
- No emotions from mother during verbal communication that usually appear as glances, expressions, confirmation of child's thoughts. Child receives no answer when he asks questions and wants to satisfy his curiosity.
- There is a marked lack of active participation from mother's side in giving speech examples, no interest in interaction during child ↔ adult.

The positive result of the research should be noted: in 47,7% of cases mothers are endowed with a unique and natural intuition – direct sensitive and intellectual apprehension of what the child needs, thus becoming positive companions in the process of speech/ language acquisition.

The correlation of endogenous and exogenous factors in the speech/ language development

Considering the influence of exogenous and endogenous factors on the development of a child, speech disorders can be relatively divided in three groups.

The first group is composed of children that require help of specialists due to various pathological conditions and illnesses. Thus, in case of decreasing hearing a consultation with audiologist; changes in the anatomical formation of the articulation apparatus will be eradicated by a surgeon; pathologies in the set of teeth will be corrected be an orthodontist; otolaryngologist will help eliminating the respiratory insufficiency, nasal speech, that is caused by tonsillitis, adenoids, polyps etc.

Therefore, in the given cases the specialists eradicate the causes that may induce deviation of speech development from the corresponding norm.

However, in those cases when it is not possible to warn in time about the probability of a speech pathology, the effect of the harmful factor manifests itself already as a consequence to influence.

For instance, adenoidal formations complicate breathing through nose (child's mouth is always open), relax the tension of mouth muscles,tongue takes the wrong position (slides through teeth), creating sound pronunciation through teeth.Cooperation of at least two specialists is needed in this case – otolaryngologist and a speech therapist – with an active participation of parents (Маталыгина, 2012).

The second group includes children with overall bodily movement immaturity, which appears in difficulties with large movements, articulation organs, performing small finger movements and differentiating.As the organism functions as a while, a physical inability directly affects psychical aspects – perception, memory, attention, speech development (Miltiņa, 2005).

Speech problems are evident in **sensory (phonematic hearing) errors** – inability to perceive and differentiate slight, different nuances in sounds; **apperceptiveerrors** -the unsteady attention of the child does not provide equal perception attitude towards separate parts of the heard material; **movement errors** – functioning of the articulation organs has not yet fully matured to pronounce the sound and its combinations precisely; **reproduction errors** – child's memorization abilities do not correspond with the scope of perceptionthat determine the mistakes of words heard before (Тихеева, 1981).

For this reason these children require health strengthening activities, examples of correct pronunciation by adults, exercises of large (general) and small (hand) movements and the phonematic hearing. **If a speech imperfection (sound is not pronounced, deformed or replaced) remains consistent and for a long period of time, it is viewed as a speech disorder** and the child requires help of a specialist – teacher/ speech therapist. By not satisfying child's needs regarding speech development, the phonetically phonematic disorder of speech pronunciation as a consequence creates difficulties for child to perceive the spoken word; disorganizes the vocabulary; impedes the development of phonematic processes; complicates mastering reading and writing skills; negatively affects verbal communication with peers and adults, as well as child's self-assessment and self-esteem (Miltiņa, 2005).

The third group consists of children whose speech activity is reduced by the socially psychological factor (social environment) which determines the functional disorders of child's speech. The limited speech environment with insufficient imitation possibilities, as well as ignorance of pronunciation mistakes undoubtedly hinders speech development, creating and cementing lighter and more severe speech disorders. Already in the early childhood child himself expresses the initiative to communicate verbally and nonverbally with people around him – invites to play, tries to tell, ask things etc. The motivator of child's activity is needs, during interaction process these needs are conveyed in

speech that **develops through imitation** of adults, thus the family becomes the first speech example. Child repeats the speech tempo, rhythm, andintonation of the caretakers he lives amongst.

Often there are the "silent parents" who hardly ever speak with the child, the also speak little among themselves. In such situation the child comes into a collision with himself: he cannot express himself, as no one answers his questions or careless words are uttered.

An important factor in the family creating speech disorders in majority of children is the speech errors made by care-takers themselves. The incorrect speech of the adult forms an inappropriate example for speech imitation that the child follows as there are no other examples.

Considering that children often imitate not only their own parents but also the speech of other adults, it is important to understand what values of other children of adults he is imitating, because not always the child comprehends what he says. Then explanations of word meanings are necessary, however, they often do not take place due to inattentiveness of adults (Смирнова, 2014).

Another factor influencing speech development is **bilingualism** – child's speech development is decelerated, in specific cases iterations appear – "floundering" of non-spasmodic speech.When the family has a united approach towards language acquisition issues, the child can have a successive transition and consequently learn two or more language. The primary language the child acquires until the age of two is his mother's language, however, at the age of four the child starts to master the language of his father. Specific difficulties for a bilingual child can manifest in various manners: simultaneous use of words from both languages; due to mastering two languages formation of two different perception systems and generalization of each language takes place, which occurs in situations when both parents are equally involved in the learning process of both languages; difficulties arise with precise pronunciation of language sounds which in turn affects reading and writing skills; limitations of emotional vocabulary are observed, defined by the cultural and traditional features of the used language. It should be noted that speech errors (for instance, sound pronunciation disorders) that appear when learning the primary language, affect the clarity of sound pronunciation in the second language (Маталыгина, 2012, 8).

An example of speech disorder is the neurotic stammering (logoneurosis), which can appear in children with seemingly healthy central nervous system, that most often holds an enduring factor traumatizing the psyche (negative relationship between mother and father → divorce →   "dividing" of the child in two families → rapid change of the style of upbringing etc.). Reactions to psycho-trauma appear as sudden fatigue of the child, sleep disorders, pronounced fear, stammering that develops gradually and occurs in waves.

Arrangement and clarification of child's social environment will be the main factor that will stabilize his sense of security, facilitate the sense of familial belonging, strengthen his self-assurance, and promote his willingness to talk.

The speech activity is a socially defined process where a child uses names of objects, actions, characteristics in practical cooperation with an adult. Child receives the word from the outside, but it becomes his "property" through practical communication and speech utilization. Nowadays a child may have a minimal or maximal range of toys; however, there is often the lack of an adult as a mediator between the child and the new toy. Every new toy should be carefully looked at and its use accurately explained, that would facilitates child's orientation abilities in the world, accustoms the child to compare, contrast, and experiment, i.e., to think. Meeting everyinquiry need helps the child memorize the name of the object much faster than just by looking at the object.

Adult's speech during the cooperation process with child is important, it has commentary content. This speech possesses purposefulness, which is expressed in accompanying and promoting child's activities, evaluation of results, while the emotions of the adult attest the attitude towards child's achievements.

Feed-back (reflexive bond) has an essential significance in the child-adult relationship; positive bond affirms the child that his actions, statements, and questions are necessary, which in turn motivates the child for repeated activities and speech. Negative bond makes the child be aware of his inabilities, cease his activities, talking, and the adult, in child view, loses his status as adviser.

Therefore, everything stated before implies that in speech development and the eradication of speech disorders the parents – the adults closest to the child – have the most important role. By teaching the child to pronounce correctly, remember words, use various situations, a communicative approach is used, i.e., in the process of speech perfection adults use linguistic and interaction approach in its entirety. Thus, the child gains greatly if the adults have time, knowledge, and willingness to help the child develop his communication competency, namely, implement wholesome speech activity in different communication forms (Трошин, Жулина, 2005; Смирнова, 2014, Dzintere, Stangaine, Augstkalne, 2014).

Conclusions

Taking into account the stated ideas about the influence of endogenous and exogenous factors on the emergence of speech disorders, we can see the following regularities:

- appearance of disorders is determined by various internal and external causes;
- family is the main facilitator or obstructer of child's speech development, as it is the speech environment where the child learns

the appropriate verbal (language) and nonverbal (facial expressions, gestures, movements etc.) communication norms;

- the mother ↔ child interaction style greatly influences child's speech. If his social needs are not satisfied, no one listens to the child, there is no example of correct speech, and then the activity of speech becomes unnecessary. As a result the speed of speech development is delayed, speech disorders fortify themselves, and skills of correct speech are not created.

Summary

A child is born with a speech apparatus prepared for speaking, however, he learns to speak gradually. "Speaking can be compared to a performance on a very complicated musical instrument that a person learns in early childhood and plays for the rest of his life" (Kļaviņa, 1997). Speech development is influenced by heredity and prenatal conditions, as well as surrounding and social environments. Child's speech development will be problematic if there are hereditary anomalies and the social environment does not provide the necessary preconditions for speech activity, motivation and cooperation with an adult.

By ignoring the apparent imperfections in child's speech the adults promote the fortification of speech disorders, therefore it is necessary to:

- **in a timely manner**listen to the specific peculiarities in child's speech;
- **in timely manner** seek the help of specialists and a speech therapist;
- **in timely manner** begin prophylactic activities to prevent factors that advance the emergence of speech disorders;
- only by **working in a team**– specialists ↔ a speech therapist ↔ adults, it is possible to anticipate positive results in preventing child's speech disorders.

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QUALITY OF LIFE USING MUSIC THERAPY ELEMENTS FOR PEOPLE WITH INTELLECTUAL DISABILITIES

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Abstract. *Quality of life include all aspects of the way we live our lives. They allow us to fulfil our needs and aspirations. On the basis of results of the research possibile to make a confirmation that music, sociocultural activities using music therapy elements for people with intellectual disabilitiess influented expanding possibilities self-expression, activating self-action, stimulating self-conception. Said elements of socialization impowering those people self – realizing through cultural — artistic activities, sociocultural projects. That one componded efective „normal" and intellectually disabledcitizens communication and cooperation. Thus possible life quality optimization for people with mental deseases in abilities limited space.*

Keywords: *Quality of life, individuals with moderate to profound intellectual disability, music therapy, self-assessment, self-esteem and self- realization, independent, safe environment, social exclusion.*

Introduction

It is necessary to ensure equal opportunities for everyone to achieve a higher quality of life. Quality of Life - a term, covering various aspects of life and in the various fields of science: geography, philosophy, medicine, social sciences, health promotion and advertising (Oort, Visser and Sprangers, 2005). The model which presents Lindströ (Lindströ, 1994) the quality of life includes four areas of life: global, external, interpersonal and personal sphere. The last part of model symbolize the physical, mental and spiritual dimensions of quality of life. Rakauskienė and Servetkevičienė (Rakauskienė, Servetkevičienė, 2011) presented concept is multidimensional and integrates ecological, economic, material and spiritual and moral health development of society.

World Health Organization, in defining the concept of quality of life, finds that it is a wide concept that complexly exposed by a person physical health, psychological state, level of independence, social communication and relationships with the environment (WHOQOL, 1997). It is a subjective concept, showing the relationship between health and quality of life.

Health is an important element of quality of life, but there is not the only determinant of the quality of life. Everyone realizes the quality of life distinctively, depending of age, social status, education, traditions and personal values. Not all people are able to adapt equally to the social, economic, environmental and other continuous operations and factors, changes, so of that

increasing the gap between the different options and social status groups. And this has an impact on both: health and quality of life.

Quality of life - important whole health system area which requiring substantial adjustment of priorities and reallocation esources in health care. It is necessary to allow welfare for recipients with disabilities or chronic diseases to improve their quality of life too. Even the person who is disabled quality of life can be good.

The quality of life determines social disparities too. This problem exists not only between countries but also within the country, thus the social exclusion is becoming an important in shaping the country's policy. People of lower socio-economic groups are more exposed to risk factors. To these groups belongs disabled people, especially should be addressed to the mind and mental disabilities and their families.

Of analysis of materials above and the numerous assumptions, the main aim of the possible research and discussions – to find an answer to the arrises question: the path - integration and social status improvement in the society through music therapy - leads to quality of life related values - human dignity, self-esteem and self- realization promotion for adult persons with mental disabilities and how it works?

Object of research - individuals with moderate to profound intellectual disability optimization of the quality of life through music / art therapy techniques.

The aim of the research is to investigate adults with intellectual disabilities life quality optimization in the context of music therapy methods and techniques.

Research methods: 1) theoretical: analysis of scientific literature; 2) empirical: questionnaire, interviews with persons with disabilities, comparative analysis.

Theoretical guidelines

Precise definition of the term „quality of life" is not easy, because the each person is unique, with a distinctive system of values, needs and opportunities. To select the measure of the quality of life most versatile factors, but the main factors are: individual personal health (physical and mental, and social), the need to communicate and realize their potential in the surrounding environment. Satisfaction of both the disabled and the 'healthy' shows and describes the quality of living. C. Sutton (Sutton, 1999), A. Bakk and K. Grunewald (Baka, Grunevalds, 1998), I. Prudnikova (Prudņikova, 2012) and other scientists recognize and affirms in the researches that people with intellectual disabilities need to realize specific needs , then their quality of life would be optimal in the scop of their abilities.

These persons who have some form of disability and do not meet the community's standards of communication are still not acceptable. This is especially for people with moderate to profound intellectual disability. This setting determines from the Soviet era shaped public opinion about the fact that all the inhabitants in SU are healthy people. People with intellectual disabilities have been isolated from the society in special closed institutions (pensions), and their existence was known only for short cirle of people /specialists. This occurence J. Ruškus (Ruškus, 2001) is called as „social capsulization phenomenon". Attitude change has been observed towards people with intellectual disabilities that initially from medical problem turn into pedagogic and psychological problem *(Prudnikova, 2012)*. From nowadays was done a lot of changes in laws and real life situations but we have situation that the public does not know how to deal with people with such kind disabilities. Citizens are afraid of them, ignored or even openly mocking. However, the approach to disability and disabled people must change, the expansion of democracy and tolerance ideas in the world are acceptable in Lithuania too what we can find in The Act Equal Opportunity (2005). Socialization problems are solving in G.Kvieskienė (Kvieskienė, 2003), C. Cymru (Cymru, 2000), J. Ruškus (Ruškus, 2002) researches.

For optimization quality of life of people with disabilities are three very important indicators to personal self-concept, self-development and self-expression which develops other indicators: integration into society, socialization and self-realization.

J. Ruškus (Ruškus, 2002, p. 123) provides such indicators pertaining quality of life of persons with disabilities:

- health: physical and mental health status;
- mental condition, mental disorder;
- the financial situation of the individual;
- living conditions: environmental characteristics, suitability for the individual;
- family: family influence on the individual;
- social relations: social support (emotional and material) status, social - emotional experience, the interpersonal relationship quality in the institution;
- recreation, creativity: the quantity and way of leisure activities or creative activity;
- participation in community activities, quantity of participation, method, or professional / employment activities in the institution or outside institution;
- religion: formal (required) or the free practicing or spiritual activities;
- self-assessment / subjective sense of personal well-being: mental, subjective state of the individual, comprising a common self-

assessment, satisfaction of the being; optimism and approach to the life;

- individual needs assessment.

Therefore, society should offer appropriate services to people with mental disabilities to optimize quality of life.

Impact of music on human health, activities, and social interaction studied a number of foreign experts as O.Bonde (Bonde, 2001), D.Campbell (Campbell, 2005, 2006), L.O'Gradyand K. McFerran (O'Grady, McFerran, 2007), E. Ruud (Ruud, 2006), G. Deker- Foight (Deker- Foight, 2003).

The problems of socialization of disabled people in Lithuania using art therapy methods as medium are solved V. Aleksienė (Aleksienė, 2005), J. Šinkunienė (Šinkūnienė, 2005). These researchers studied more children and young people with a variety of mental (and complex) disability issues and opportunities to adapy methods of art therapy. R.Brūzga (Brūzga, 2005) and J. Taločkienė - Žebrauskienė (Taločkienė - Žebrauskienė, 2005) wrote about the practical experience and methodology how to organize mentally disabled adults musical activities. Some information about socialization using music can find in A. Gaižutis (Gaižutis, 1998) research.

Results of the research

In the research process was involved people who participated in the social-cultural activities, events where adult intellectually disabled person show their artistic abilities. Testing was done in Lithuania in Plunge, Telsiai and Klaipeda. During different socio-cultural events were tested 123 respondents. Of them: 62 in Plunge, 38 in Klaipeda and 23 in Telsiai. At the same moment were tested adult 54 intellectually disabled persons (28-64 y.o.). Were organized observations before the music workshop, through music session, after the music workshop. Testing still continues and in this article we would want to present few results.

Using Diagnostic methodology possible to do summary, the majority of customers actively participated in workshops (both: individual and group), was sheerful, good moods. This can be explained by the fact that:

a) the client / customers feel safe during the session;
b) well understood given commands;
c) workshops activities were not impaired freely creative abilities;
d) an assessment of his / her / their creative „product" unconnected of artistic quality;
e) have possibilities to choose the instrument according to his/her moods or on the basis of own criteria.

In the sessions respondent/s participated passive when was felt deterioration in health.

Using Empiric methodology were interviewed people involved in various socio-cultural events. How respondents decide what person is mentally disabled shows systematic information in Figure 1.
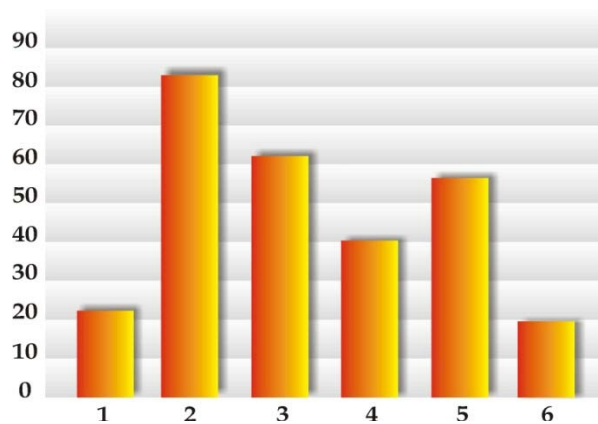
1 of clothing; 2 of the treatment; 3 out of actions; 4 of gestures; 5 of facial features;
6 do not decides until start to communicate

Figure 1. How do you decide that it is mentally disabled person
(as long as he does not speak)?

Most of respondents recognized a disabled person from his behavior, actions and facial features (84, 62, and 58 respondents). That person is mentally disabled from his gesticulation decided 41 respondent. Of clothing about person's disability decided 23 respondents. Not decided until the person started to communicate with the respondent noted 20 patients. These data suggest that people with higher level disabilities apart from other „healthy" because of a long time formed the concept of society and attitudes about the behavior and actions of mentally disabled in a public place.

Respondents were asked how they feel are the most important or disabled their integration process, more specifically, communication with „normal" people. The following results were obtained (Figure 2):
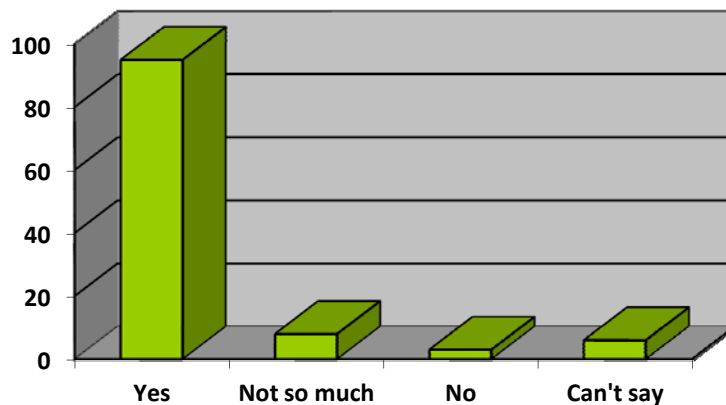
Figure 2. Are there important mentally disabled people with communication „healthy"?

It means that most of respondents agree that communication as social integration tool is realy importnat for intellectualy disabled people.

Respondents were given the question „Are cultural - artistic activities help people feel in the same levels like „healthy" „do such activities develope their self-esteem, change communication skills, independence and understanding about their environment, behavior?" Replies are formated Figure 3.
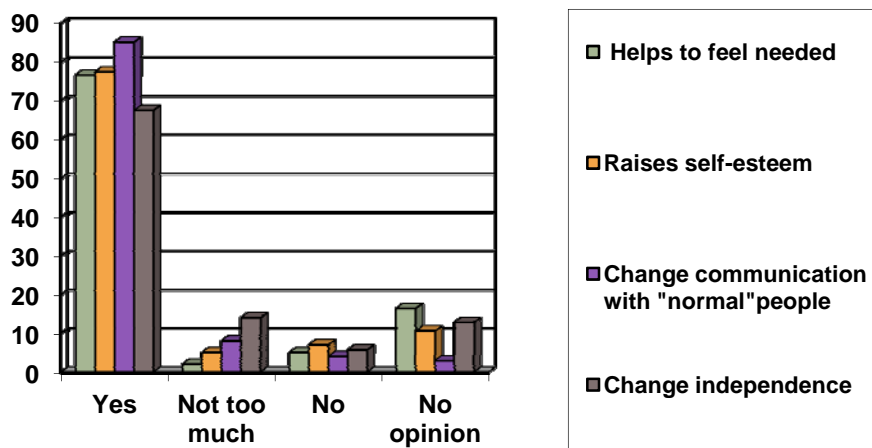
Figure 3. Are cultural - artistic activities help people feel in the same levels like „healthy"

The majority of the respondents answered YES to submited questions (respectively 95.7%, 87%, 78.9% and 76% of respondents). Persons who participated in the study recognize that cultural - artistic activities assist for intellectually disabled persons to feel as equal with „healthy" society. It arise personality self-assessment, what accordingly affects in communication and behavioral changes with others, expanding the information about their environment, and give confidence and independence in modified and enlarged but safe space.

Conclusions

1. Using music therapy the residential core - through conscious communication between therapist and client, bridging the gap between music and life, to strengthen and nurture the inner and the outer world interfaces.
2. Music workshops raising people with disabilities self-awareness, expanding quantitative and qualitative expression capabilities, increasing their self-esteem and enable self-realization through art - cultural activities, socio-cultural projects and contribute effectively integration into society and thus to optimize the quality of life in the limited possibilities.
3. Monitoring analysis confirmed the theoretical arguments that music workshops allows on residents increasing self-confidence, his/her self-

esteem changing behavior and communication standards, there is need for self-realization through the day to day activities.

4. Public opinion anglysis showed that the need for communication and cooperation between the „healthy" („normal") and the disabled is recognized, and welcome in the process of integration through art - cultural activities.

5. Music - cultural activities help and accelerate people with different kind intellectual disability socialization and integration into society.

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SUSTAINABILITY AND EMPOWERMENT IN CONTEXT OF INCLUSION OF DISABLED PERSONS

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Abstract. *Creation without disassembling, using wisely, responsibleplaning and estimation longer-term consequences giving priority to the person, respecting his/her individuality, diversity - this is a new approach and sustainable society features. Quality of life include all aspects of the way we live our lives. They allow us to fulfil our needs and aspirations. On the basis of results of the research EU policy materials and Lithuania and Latvia ways of realization these laws in the regional policy, that all global methods and wellbeing development actions have a direct impact for people with intellectual disabilities and influent to expanding possibilities self-expression, activating self-action, stimulating self-conception. Creatiwity – the way and possibility in empowering these people socialization and self – realizing. The researches in this field would answer to the questions: possible to optimize the quality of life for people with intellectual deseases in their abilities limited space.*

Keywords: *Sustainable development, Regional development, well-being, quality of life, empowerment, creatiwity, intellectually disabled, self-expression, self-action, limited abilities, inclusion.*

Introduction

Sustainable development is one of most important the world development concepts. First time the Concept defined by the United Nations Commission on Environment and Development, headed by the then Minister for the Environment of Norway Gro Harlem Burndtland in the report „Our Common Future" (1987). Will be correct if we say that sustainable development - environmental, economical and social well-being for today and tomorrow for all human in the world.

When we think about the world as a system which connect space and time, then we also understand that quality of life is a system too and we can talk about holistic nature and holistic and humanistic philosophy of sustainable development.

It looks global concepts but realy they are closely connected to each of us, our environment. "The concept of sustainable development is rooted in this sort of systems thinking. It helps us understand ourselves and our world" - that is basic motives of IISD's (International Institute for Sustainable Development) staff, associates and board to innovate for a healthy and meaningful future for this planet and its inhabitants.

Sustainable development combines three essential elements: economic, environmental and social development. In the United Nations documents, the following items are shown as interdependent and mutually reinforcing.

The European Council on June 2006 adopted the new EU Sustainable Development Strategy, which defines the responses to be adopted to tackle the principal sustainable development challenges: climate change and green energy; sustainable transport; sustainable consumption and production; threats to public health; social exclusion, demographics and migration; conservation and management of natural resources; the war on poverty in the world and the challenges in terms of sustainable development.

Whereas in this work developing problems of social integration, empowerment and inclusion, discussions about the conception of sustainable development will be in the social dimension area. As a part of this work relevant the guality will be investigate few aims of sustainable development: public health and social exclusion.

Values shows not words but works/actions. Observing and evaluating phenomena taking place around, we can find what is important and what is not for a modern man. Consumption growth marks the welfare rising. In the evolution of values occured changes causes difficulties to predict the consequences. Created by humans material of wealth must to serve man. Ideally if individual liberated from the difficult domestic survival problems may engage personal development, search the meaning of life and happiness. But in reality this does not happen.

Focus on man - respect, attempting to help and assist, decency and honesty in everyday life, business and policy should not be treated as signs of sentimentality. Ethics, morality, ability to share with others brings a long-term, stable and predictable positive change.

Long Western democracies experience shows that permanent, respectfull and trust-based relationship gives a birth a transparent and democratic policy, socially responsible business, according to the society and the needs of the individual and create considerably larger (gradually increasing) value, which in the long term perspective many times superiorthe instantaneous benefit.

The Sustainable and Regional Development importance for disabled people well-being

Regional policy – it is a public policy aimed at reducing social and economic disparities between regions. In the article we can distinguish the European Union (hereinafter - EU) and the Lithuanian national regional policy.

The main goals of European Union's regional (also called structural) policy are by series of measures (measured by GDP per capita) to reduce the level of nations, humans well-being and prosperity, to reduce the difference between the most and least developed regions of the EU. Lithuania by EU regional

(otherwise know and notion as *cohesion*) policy terms is considered as a single region, which approachis to achieve the EU average economic development level. The main EU's instrument for the implementation of Regional policy - Structural Funds. National regional policy, according to the Regional Development Act, is the state institutions and other entities targeted activities that have a differential impact on the state of regional social and economic development, in order to reduce regional socio-economic disparities and development differences within the regions, to promote stable and sustainable development throughout the country.

The formation and evolution of regional differences are determined by a variety of both internal and external factors. In a small country like Lithuania many external factors, that have a direct impact, can not be removed, possible only to mitigate the effects. That is why regional policy in Lithuania is compensatory nature, aimed in reducing the negative impact of external factors and focused on minimizing the differences between regions and within them. Regional policy in Lithuania undergoned several stages of formation, and at present the main objective of regional policy is the reduction economic and social disparities between regions.

In 2000 adopted the Regional Development Act (recasted in 2002) to develop and launch a regional development plans. The notion has been extended from the administrative to the social and economic development with the differentiated measures for a state social and economic policy. Appeared „target areas" conception which propose to see the region as a system that has certain structural parts: the center and periphery and the occupants, elements which have ties with the center and doing influence. At this moment in Lithuania is accented interaction between regional centers and socially less developed areas and regional centers strengthening their potential disclosure.

The situation is changed in the period 2007-2013, the European Union support planning period - began closer links between national and regional policy and the European Union cohesion policy. The aims and objectives of Regional policy were based on real financial instruments. At present, using the European Union support aims are not only declining differences between Lithuania and the European Union's economic, but declining the social and economic disparities between regions within a country too. Funding the programs led the reduction social and economic differences in the region's, and take real actions in the development of targeted areas (regional centers and problem areas) and to balanced more the distribution of EU support funding municipalities and regional councils initiated development projects.

In 2010 the European Commission adopted a document that defined the direction of the EU in the medium term - 2020: Strategy for Smart, Sustainable and Inclusive Growth, which identified the main priorities for the EU's enlargement in 10 years: intellectual growth, sustainable growth and inclusive growth, ensure social and territorial cohesion (Cohesion Policy 2014-2020)

To implement this strategy, the European Commission and other EU institutions are planning to use a sufficiently wide range of instruments. At the moment the Regional Policy in Lithuania can be defined as a remedial activity, focused on minimizing the differences between regions and within them.

Given in mind Lithuania as state limited resources, regional policy is implementing in accordance of the two fundamental principles: Subsidiarity and Concentration.

Lithuania Regional policy long-term goal - to ensure a high quality of life for all residents of the country's territory. Lithuanian regional policy priority axis - equivalent Lithuania territorial socio-economic development.

Reviewing the sociologists, economics and business professionals J.Weiss, R.T. Georges, L. Nesh, R.A. Bucholz, S.K. Beylly, A. Cava and V. Pruskus published works and publications, it is possible to generalize and draw conclusions that the social welfare of society is very closely related with the consumption increaseing and well-established values and attitudes. The mentioned abowe authors analyzing the functioning of the human values, interaction and choice by market conditions. The values of the concept highlights the economic and cultural values and their diversity and the peculiarities.

Authors discuss about the market impact to individual self-determination and the values and influence of development of civil society, analyzed the problems adapting market principles in the areas of human life and the environment. The authors examine the produced comodities as good in useful options of market conditions, as well as importance economic and cultural values interoperability, ensuring the relatively stable society development in the face of globalization.

Empowerment and social well-being

The scientific literature society well-being analyzing in a broad and narrow sense. The first concept of prosperity is closely related to an objective concept of the welfare, well-being which includes economic aspects (socio-economic status, personal financial stability), medical aspects (health or sickness absence), political aspects (human rights). Narrow concept of the well-being is closely in connection to social psychology and describes the person experienced feelings and emotions (e.g., happiness, anxiety), also good moods of life being and satisfaction of needs (e.g., autonomy, a sense of closeness to others), external conditions (e.g., the financial conditions of life, incomes) and personal resources (e.g., health, strength, optimism, self-esteem).Well-being of high living person (i.e., daily experiencing positive feelings, in good moods and satisfying his/her needs) can be described as prosperous. Well-being also can be described as a life quality. Well-being includes personal autonomy (i.e., a sense that the person can control his/her life) and purpose of life. Negative emotions also have an impact

on personal well-being, because improves willingness to face the new challenges, broadens personal resources and increases capabilities. Thus, the human happiness is not spontaneous him/herself purpose, but also a way to expand the possibilities to grow up personal well-being. It is important to distinguish well-being from what is having an impact. Well-being is affected by external factors (income, housing, education, social relations) and internal factors (health, optimism, self-esteem)

In the world (at the same time in Europe, Lithuania and Latvia too) have been many important political, social, economic and cultural life changes. Reducing public insularity, increasing migration and in diffusion of new lifestyles and behavior patterns, caused a stir on the social phenomena of which long time has been silent. Various sociology, psychology or philosophy books, studies, articles, discussions on web portals analyze these days relevant issues: violence and addictions, suicide, moral and economic poverty, people with disabilities exclusion.

Is done on a number of assumptions that the human individual as a social and cultural entity is necessary to belong to the community.

The community task – to educate someone to give him/her the opportunity to improve continuously, bring together, activate without altering communities substance. At present this process is popular to call – empowerment.

Empowerment refers the acquisition of power, capability to become a part of unit to do something.

Empowermen became the object of education and social work to help people or communities with difficulties. At present, the concept of empowerment is used in different contexts and situations. According to Barker (2003) empowerment is a support process that helps individuals, families, groups or communities to pursue personal, interpersonal, socio-economic and/or political power enhancement and conditions improvement. Empowerment is quite versatile and ambitious term describing the support for person, seeking him/her to feel as valuable and useful member of society, raising the bar for self-esteem. Empowerment is a process that allows changes: in personal environment, environment in whole or both at the same time. Empowerment occurs when the person feels and is competetive to manage his/her social environment. In the process of empowerment is very important to eliminate and/ or prevent the occurrence of interference what violate the social justice, equality, human and community dignity. The process makes all possibilities to develop a creative environment: both in terms of personality development processes, both between each individual's environment to reach human and/or community well-being.

Creativity and intellecually disabled in the community

In order to understand the possibilities of society, it is necessary to look objectively and soberly at the current environment, cultural traditions, declared and actuall the values, economic potential. Cultural traditions are changing the slowest. Rapid developments in this area usually does a lot of harm to the public welfare, which to repair take decades. Cultural revolution nowadays undesirable. More beneficial is community evolution and gradual maturation way - changing or deepening values in real life.

Nowadays widely are spoken and studying in many countries in the world (and in Europe, as well in Lithuania and Latvia) about how important disabled person integration, what approaches of disability should be and what is socialy right in the process of integration of disabled people. In the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) guidelines are encouraged to ensure inclusive development and launch a new movement for the rights of people with disabilities around the world. Convention proposes to reinforce the inclusion of people with disabilities not as a separate issue but as the tool of country's government's strategy implementation.

More than 30 years about that promotes Mobility Internation USA organization (MIUSA) and actively working in implementing innovative programs and building bridges to create a new era where people with disabilities will take their rightful place in the world community.

J.Vanier (2006) conveying the experience living in „Arc" community with people with intellectual disabilities marks that in the society, which emphasizes the strength and value, disabled people very difficult to find their place, because they are losing the battle for power. But, in turn, the weak - with a distinctive understanding of friendship - can affect and change the strenghts, if they only want to hear the voice of the „bottom".

Examined lot of the most famous these days social and economic policy experts and specialists articles, research can be summed that very important that all Regional policy instruments and funding should achieve targeted groups in the regions. analysis of authors such as D. Florida (2015) and J. Jauhiainen (2007, 2008) publications and books we can find that very important for regional socio-economic, sustainable development and community well-being is human creativity development in all aspects. Community can understand as a group of people with different economic and social status in the established territory, with different level of education, health, belong different age groups and gender, skin color, belonging to different religions and have different hobbies, occupation, lifestyle. All members in the community are straight connected to Regional policy searching goals and targeted objectives. Also all people can seach life quality and well-being using ongoing activities.

Regional policy influencing to the quality of life of persons with disabilities. This is a significant group of our society whose creative potential

has not been developed enough and not known the impact and benefits of public welfare improvement. And this is a wide field of research.

The main factors limiting the mobility of persons with disabilities in the society and the activity is not adapted public and working environment, thus reducing the education and training systems, other public services. The structure of services for people with disabilities still dominated institutional care and very little development of other services. The possibilities for integration of the disabled reduces public stereotypes about them one and the skepticism about their abilities. In 2005 entered into force the Law of Social Integration began the shape a new concept of disability, which emphasizes the opportunities and importance to work, create, participate in the public activities. Therefore, special attention is paid to the social, professional, creative rehabilitation. The main problems encountered in the development of this system is too poorly developed infrastructure of services, qualified professionals in various rehabilitation chain and lack of work methods to ensure a comprehensive, continuous and efficient rehabilitation, education, training deficiency.

One of possible ways of intellectually disabled people incorporation in the society – to develop their creativity and artistical abilities.

Art could be and should be as everyday consumer product, community commodity which is very efficient but still is used little as a tool of communication and mutual understanding. Art sociology deals culture and art „using" concept and proves that art should be served to each person, depending on his/her needs and acceptation opportunities. Unfortunately, there is a lack of skilled human resources and difficult to achieve physical and spiritual well-being of the disabled person.

These professionals like luxury goods, which are purchased after the economic and spiritual crisis, when we will have plenty of bread, and we are abe able to play … However, as the Romans used saying „bread and games", it must be at the same time ... Here and now …

Examining the European Commission's documents, developing policies, strategies, social and economic policy experts and specialists articles the current extreme attention is paid and highlights in empowerment and giving priority to the person, respecting his/her individuality, diversity - this is a new approach and sustainable society.

Reviewing scientific literature scientific articles, studies and publications referred above, possible to make a general conclusion - what aspects hinders and what aspects make influence in the process of disadvantaged people inclusion, what is presented on Figure 1.

The situation of person exclusion is influenced by factors mentioned in Figure 1: social and economic status, lack of education, life unfortunate situation and health condition. Developing social and individual potential possible to reduce the situation of marginalization and to find new models and opportunities for inclusion.
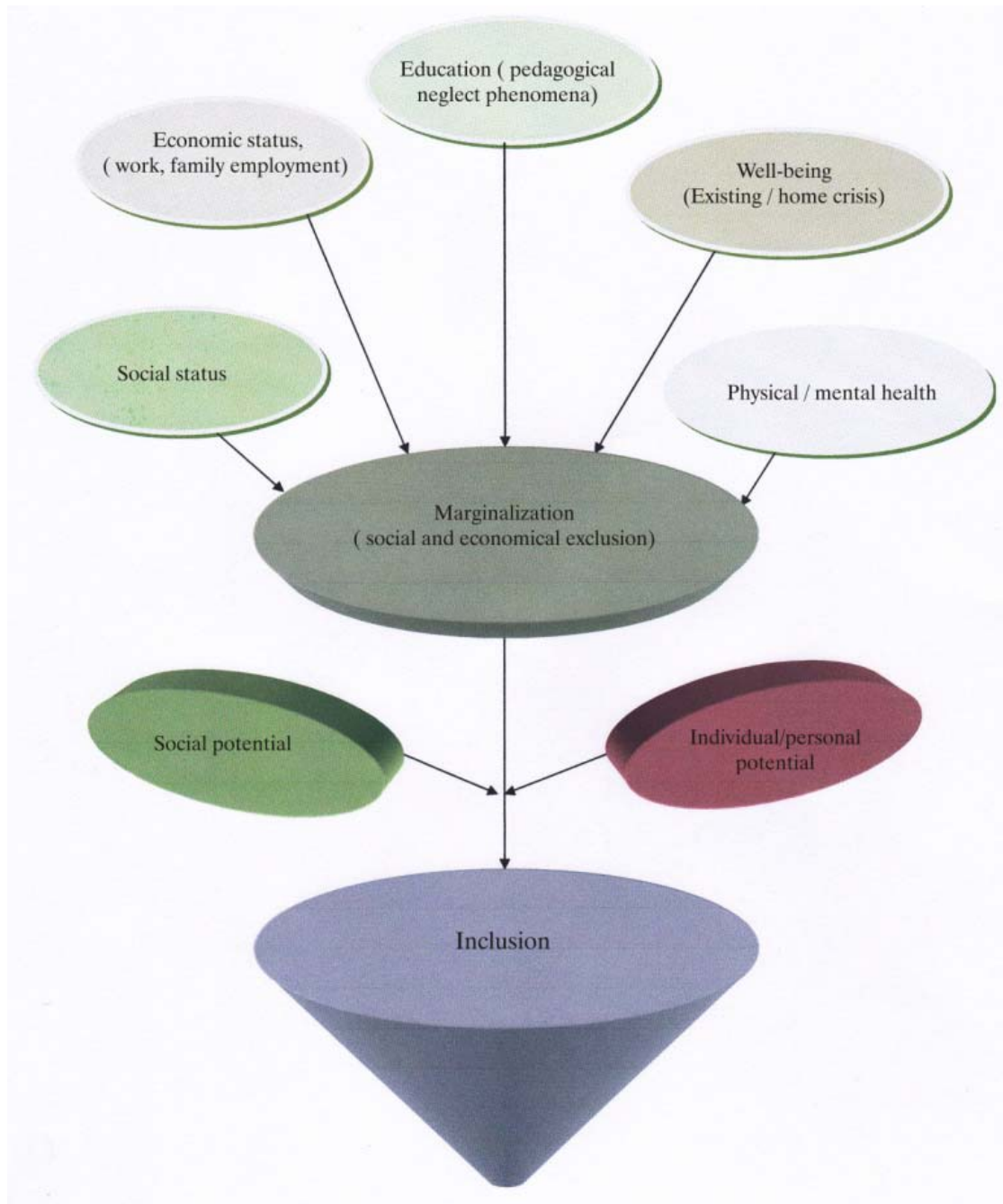
Figure 1. The aspects of inclussion process of socially disadvantaged persons

Conclusion

Inclusion as social phenomena, which long time has been silent, must be as one of priorities in developing comune wellbeing. Analyzing various sociology, psychology or philosophy books, studies, articles, discussions on web portals we need to talk about people with disabilities exclusion and the ways to empower them one and find ways for inclusion into society. They are part of our society and they must be included in devloping his/her personal quality of life, commune and society well-being, what directly influenced by the region's economic and social welfare increases, sustainable development policy.

All people can search life quality and well-being using ongoing activities. Empowerment allows changes in personal environment and social environment around him/her. It is very important to eliminate and / or prevent the occurrence of interference what violate the social justice, equality, human and community dignity.

All global methods and wellbeing development actions have a direct impact for people with intellectual disabilities and influent to expanding possibilities self-expression, activating self-action, stimulating self-conception. Creatiwity – the way and possibility in empowering these people socialization and self – realizing.

Time to revise the integration of people with disabilities into society stereotypes, politics, apply flexibile innovations and alternative models and methods. Thus, the debate about the creativity need for personal self-esteem and self-awareness development and influence to public welfare growth, begins.

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PERCEPTION, CONNOTATION, TRANSLATION OF NUMBERS

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Abstract. *The purpose of the note is to discuss the translation of the numbers from one language to another in order to retain their meaning (in this case it is easy) and to preserve their connotations (and this is the hard part, as in every translation). The lexical system of numbers is an excellent laboratory to study the semiotic phenomena of hypocoding and hypercoding at an intermediate level of complexity, that does not avoid the problems but still allows rigorous solutions. This problem takes a well-defined role in the two sections dedicated to perception and connotations, when some numbers assume the role of hypernyms similar to adjectives „some, many, too many". The various languages do not use the same system of hypernyms, so the translation, beyond the literal meaning, requires a particular knowledge, typical of bilingualism.*

Keywords*: connotation, hypercoding, hypocoding, numer systems, semiosis, translation.*

Introduction

A main problem of semiotics is the homomorphism between real world and its (conventional) representation. Mathematics has the advantage of a consolidated structure of „reality" that can be compared with long established language conventions. The paper shows that even at this level there exist some inconsistencies. As the surrounding world becomes more complicated and meaningful mathematics must renounce to some axioms, broadening its boundaries through probability and fuzziness. Corresponding mathematical vocabulary is no longer unambiguous, and changes from one language to another, generating problems of translation.

In the sciences, including social sciences as taught by Martinet (1985) in the first two chapters, it is essential to define precise areas of relevance. However, there is the risk of paying the accuracy and logic correctness with reductionism, which prevents to analyze phenomena lying at the margins between various disciplines. Complexity theory accepts fuzzy positions that allow achieving a holistic view. This is a critical point, since a Bayesian system of subjective probabilities becomes necessary and they may not coincide when different specializations converge in the same field.

Semiotics is not exempt from these risks, because the context in which it operates is too rich, and a purely abstract frame would be excessively reductionist. It is therefore important to find realistic areas of experimentation of affordable complexity. The numbers can be a fruitful ground to operate at an intermediate level of complexity, which does not avoid the problems but still allows rigorous solutions. Compared to other systems (colors, sounds, natural elements) numbers have the advantage of order, separation, possibility of generating formal operations at various levels of abstraction and precision. Of course boundaries to the semiotic analysis of the numbers must be imposed, eliminating the cases in which they operate as labels (telephone, automobile, current account) and waiving the magic superstructures they gained in time.

Numbers and structure

The number is the lexical item easier to translate. In all modern languages its meaning finds the exact match. It has universal symbols (also in non-alphabetic languages such as Chinese) operating as ideograms. In addition, the components are mostly one-to-one with the linguistic structure: for example, in the number 391, we can identify five lexical items <three-hundred-nine-ty-one> that match exactly ideogram 391 as the three root ideograms <three, nine, one> correspond to the figures, while the third position (from the right) in the ideogram points <hundred> and the second <-ty>. The mechanism is to be compared with Chinese alphabetization as described by the authors (Piccinini et al., 2013, p. 441).

This smart notation, with its double match, reached the formal completeness with the invention of the symbol zero, which is relatively recent. Linguistically the settlement is older, but not so old that non-positional states fully vanished (compare the first two chapters of Boyer, 1968). The most stable heritage from the past is the sexagesimal/duodecimal system of Babylonian origin <day, hour, minute, second>, but also mixed medieval systems such as <yard, foot, inch>, <pound, shilling, penny> survived. In some cases there are traces of the base 20, typical of the Germanic languages, where the ancient <skor> meant *notch, tally, twenty*. Score survives in English and traces of the system are also found in French for the numbers between 70 and 100 (but not in other francophone countries).

The regular numbering system goes into crisis when the numbers become very large. Already *thousand* derives from an original Old Nordic <*thusund*> (Eco, 2003) which meant numberless. Million is a derivative of the Latin <mille/milia> (=1000), but in this case no ambiguity arises. A big linguistic and practical problem is that in America Billion means 1,000 millions, while in England it means 1,000,000 millions, that is 1 trillion. In many systems the old *terminal* number was myriad (myrioi, myriades) that sometimes assumed the

precise meaning of 10,000, sometimes retained the generic value of „great many" as pointed out (Rocci, 1953, p. 1260).

In Chinese (Zhang, 2006, p. 64 and Zhao & Gatti, 1996, p. 57 and 350), 10,000 is the basis of the construction of large numbers since 1 万 (yi wàn) means 10,000 and 1 亿(yi yì) means 10,000 times 10,000, i.e. 100 million. In China there are no terms corresponding to a million and a billion, which become therefore 百万(bǎi wàn = 100 times 10,000) and 十亿 (shí yì = 10 times 100,000,000) respectively. For *millionaire* there is the regular construction 百万富翁 (bǎi wàn fù wēng = 100 times 10,000 rich father). Note that to say *billionaire*, next to the regular <Billion Man>, there is also the hyperbolic expression 亿万富翁 (yì wàn fù wēng = „100 million - 10 thousand - rich – father")[5].

It is interesting that in Chinese 万 (wàn) still retains also the meaning of <great number>, so that the translation of the famous <Pantheon> Temple in Rome (its name in Greek means Temple of <All the Gods>), becomes <Temple of the 10,000 Gods>, and 10,000 perceptually seems a quantity larger than *all*.

The linguist can observe the small gaps that creep into the perfection of decimal numbering system. Apart from the folklore of the French, in many languages there is a power of attraction of the round figures towards adjacent numbers: in Latin there were *undeviginti, duodeviginti* (19, 18) - but there are also the Germanic numbers *elf/eleven, zwoelf/twelve*, that meant one more and two more (Fowler & Fowler, 1964). The subtractive model still holds for the clock: in English *twenty minutes to four* is standard, while *three-forty* is used only in the time-tables. In Italian the backward model mostly operates up to fifteen minutes, so that <tre e quaranta> would be standard and <venti alle quattro> sounds cumbersome.

The perception of the number

It is more interesting to observe the number before it enters the domain of mathematics. The number is felt as a part of the language rather than of mathematics and so is a real signifier. But what is its meaning? Up to four, five *subitizing* (instant perceptual glance) allows to recognize small numbers of objects without counting. Stafford in section 35 reproduces simple experiments that show the possibility of exact results in this range (Stafford & Webb, 2005). If the number is higher a rough geometry allows simplifications of the count, since the set is decomposed into subsets immediately perceived and then the sum is performed.

Some numbers are associated with concepts or sensations: 12 is associated with the analogical clock or with a box almost square, the squares of digits are

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[5] Remark that the same phenomenon holds in modern Greek, where million is <ena ecatommyrio> (= one 100 times 10,000), even if <myrio> alone in the spoken language is mostly replaced by <deka chiliades> (10 thousand).

displayed as boxes filled with small squares, but already 100, and even more 1000 are associated with undefined feelings of crowding.

It is possible that *subitizing* represents the origin of grammatical designations of quantity. The Indo-European had the distinction between singular, dual, plural: the dual generally went out of use in historical times and now survives in Slovenian and in some Greek and Lithuanians dialects. The Russian has archaisms in declination which suggest the reference to terns and quadruples of objects. On the other hand there are languages like Chinese who do not have a mandatory distinction between singular and plural.

Almost all languages have the ability to designate *fuzzy* numerical aggregates at various resolution levels. Beyond subjective expressions such as „*many, few*" in all languages *numberless* is used to indicate an amount that escapes the count. There are expressions that combine a numeric value with uncertainty. Often they were related to the physical process of a reference mark with a notch, as in the case of *score*. In Chinese dozen can be translated as <yi dà>, which literally means <one shot>. In many languages, there is a possibility to render a number fuzzy adding an adverb or an adjective (*some* in English, *etwas* in German, *circa* in Italian, 几(*jǐ*) in Chinese) but French developed the specific suffix <aine> that fathered 10→<dizaine> (= half-a-score), 12→<douzaine>, 20 →<vingtaine>, 100 →<centaine>. The luckiest was <douzaine> (= dozen), that spread in almost all European languages; in Italian the complete set entered with the exception of <hundred> that continues uninterruptedly the Latin <Centenarium> as <Centinaio>. Remark that in German <Dutzend> can also replace <etwas zehn>, unlike what happens in English where dozen is different from half-a-score. The diffusion path of new structures is to be compared with what happens in trade contacts as shown by Droli (Droli et al., 2014) where some form of hypocoding allows penetration outside the core business (= the pure language).

In the perception of numbers (as in the case of colors) you enter easily into hypocoding[6], i.e. the phenomenon of semantic under-determination, due to linguistic or even perceptive inability. Often it is originated by a formal hierarchical system which provides a hypernym, that in some cases is well-defined, but in other cases segments the reality in an arbitrary manner, as is the case for the colors. As long as the morphology is different there is no possibility of confusing an exact number with a hypocoding, but often the very number (usually in round figures) acts as a hypernym. No sensible person thinks the *Garibaldi's Thousand* were exactly 1000, as no one thinks that the 100,000 at Wembley stadium were 100,000, but when we say the number 1343 the meaning cannot be other than 1343 (apart the computational possibility of fractions). For the dates usually there is no ambiguity, since for practical reasons we point out when the use is fuzzy. In a history text even 1000 usually means 1000. In

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[6] As a reference a fundamental text is due to Eco (1975) in particular section 2.14.4 for hypocoding and 2.14.3 for hypercoding, that will be used in the next section.

computing, on the contrary, K (which should mean 1000) stays for 1024, as M (mega, which should mean 1,000.000) means instead 1,048,576. A number that ends with a non-zero digit is not considered a hypernym but when it ends with a sequence of zeros, it is usually interpreted as a hypernym. Should the statement: „In this room there are 500 people" be interpreted as an exact number, a lexical additional clarification is needed: „In this room there are *exactly* (or *just*) 500 people". In the statistical tables sometimes the context is clear since in the same column round numbers and non-round numbers are aligned. Sometimes the expedient is to add one or more decimal places, so that the exact figure 100 is written as 100.00.

The hypernyms of numbers do not allow exact calculations, but sometimes allow fuzzy calculations, under two conditions, that are not used as a synonym of a very large or a terminal number and that they are of the same order of magnitude. Remark the indifferent use of million or billion with reference to a large amount, with a difference by factor thousand. There are many millionaires, but billionaires are much less! These numbers do not allow exact arithmetic operations. A billionaire who takes off a million remains a billionaire, but if the operation is repeated a thousand times he would no longer have anything! Recall also the joke of the shepherd who had three sheep and was close to a large flock. When asked how many sheep were on the meadow he answered 1003, as over one thousand sheep of the flock there were his three sheep.

Number and connotation

What tells us a number? Certainly is part of a sequence (or a nursery rhyme), and is placed at some point of this sequence. But what are the mental associations that it generates, i.e. which hypercoding is tagged with? We usually say that a number is large or small, what does not make sense unless there is a context that gives some *fuzzy* information. The experiments conducted by the authors show that in front of the request „Write down a big number" (without any context!) very few interlocutors refuse to carry out. There are various types of execution. Generally they write a sequence of 6 to 8 digits where the figures may be either random, or all equal to 9, or all equal to 1; a slight variant is a sequence of zeros preceded by a single significant digit. School reminiscence sometimes leads to exponential notation. A fairly low percentage (20%) write controversially a *single digit* number in *very large* format. It is clear that the test would give a very different outcome if it were conducted orally, since then a number such as 1,000,000 is not equivalent as fatigue of execution to a number such as 999,999. On the other hand the oral test should be conducted by

isolating the participants otherwise there would almost certainly the effect of an auction[7].

The emphasis can be achieved by repeating large numbers. In Catullus (1958) we find the passage

> Da mihi basia mille, deinde centum
> Dein mille altera, dein secunda centum,
> deinde usque altera mille, deinde centum
> Dein, cum milia multa fecerimus,
> conturbabimus illa, ne sciamus[8].   (5, 7-11)

Apart round figures, Catullus was very found of 300, a hyperbolic number with a realistic tinge. Some examples are 9,2; 11,18; 12,10; 29,14; 48,3.

The connotations of the number, as for many attributes, arise from its basic ambiguity. Its meaning is very abstract but on the other hand we have the experience of the numbers in various contexts, where the number glues its abstraction with concrete meanings, generating a hypercoding. „A thousand spectators" reminds a full theater (or an empty stadium), „five feet high" makes us think of a person of short stature. It seems that at the origins of *homo sapiens* numbers were perceived only in relation to the objects that they specified. The acquisition of the number as a means to segment the reality is more recent and belongs to the historical period. Even today the conversion from the American sequence 6, 8, 10, 12, 14 into extra-small, small, medium, large, extra-large shows us that numbers often serve to segment the reality instead of counting or measuring. Sometimes the numbers retain the significance of magnitude and allow both to segment the reality and to carry out the calculations on it. The transition is not always easy, since it requires a dribbling between right brain and left brain applied to the same reality. The cognitive leap belongs to the experience of the child who in its ontogeny follows the human phylogeny, with the discontinuities mentioned by Freudenthal in particular in 2.2 (Freudenthal, 1991) with reference to his experience remembered (Freudenthal, 1980).

At a time when the number becomes a tool for segmenting the reality possible problems of translation may arise for the connotations that it is to assume. Sometimes the number is used to give a feeling of precision, perhaps in an ironic sense. In Dante's Divine Comedy (Alighieri, 2001) devil Malacoda with notary pique recalls

> In just five hours it will be, since the bridge fell,
> A thousand two hundred sixty-six years and a day;
> That was the time the big quake shook to Hell
> Inf 21, 112-114

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[7] The main property of natural numbers is the existence of a successor. We have seen that on the practical experience there exists an empirical fuzzy bound that is not surmountable. Even a computer is a finite machine with finite operating limits.

[8] Give me thousand kisses, then hundred/ then thousand more, and hundred again/ thousand more, hundred again/ then, when we make many thousands/we shall mix them, so that we cannot know.

In this case the accounts are accurate. Where you just cannot make ends meet, even using the lunar months, is in the genealogy of the patriarchs (Genesis 5, especially in verse 27 where we find the 969 years of Methuselah).

Numbers and translation

Here is the simplest example: how to translate <thirty miles> from English into Italian (or any other language where miles are not used)? The most obvious proposal is <trenta miglia = thirty miles>. However, despite being exact, it uses a term foreign to the Italian system of measurement so that it gives a foreign, perhaps exotic, connotation[9] which was absent in the original text. At this point, it can be proposed to change the reference system: miles can easily[10] be converted in km, but in this case the number must be updated. The most sensible translation is fifty kilometers although it is incorrect in that it should be 48 km. This last translation (almost) exact presents a number with two significant figures in place of the original hypernym. In a technical manual it can be accepted, but in a translation attentive to the style that would create a distorted effect. Things are even more complicated in the translation of 30 mph, since 50 km/h gives a good perception, familiar to all drivers, but not exact. For the record, the translation of 30 mph into 48 km/h historically existed in the early fifties in the Free Territory of Trieste, then under British government, and represented the speed limit along the coastal road.

The mechanical measurements are often expressed in inches and fractions such as ½, ¼, 3/8 also in non Anglo-Saxon countries, with effect of embarrassment for the layman that perceives them as if they were ideograms.

Positivism joined with the transition to the metric system could result in hilarious effects. The „metric" tour guides were concerned to determine the length of the monuments in feet and inches, and then translate them into meters and centimeters. The strangest effects, however, are found in the less educated works. In (AA.VV., 1891) a Ferrara pound, of 12 ounces, is translated as fussiness in Kg. It reads just in the first pages

Cut Kg. 0.086 of bacon into slices thin as a *scudo*, cover the bottom of a large saucepan, and above this cut an onion a little thicker, then Kg. 1.380 beef without bones, fresh and lean, cut in two-finger-thick slices; ...

The amenity arises not only from the absurdity of the prescribed quantities (which scales are used?) but also from the contrast between coarse and empirical measures (*scudo*, a coin; two fingers) with high precision measurements. Note

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[9] Compare Eco (2003) in ch. 3 of where Reversibility and Effect are studied.

[10] We recall that even to-day many different types of mile are still in use. They range from the statute mile (this one), 1609.344 meter long to the geographic mile, 1855.4 meter long. Till the end of nineteenth century there were many other, in particular German miles were completely different and ranged from 6910 meters (Bohemian) to 8888 meters (Badish).

also the use of the kilogram instead of a gram or other units. The comic effect arises from the clash of two different systems that compete on the same grounds, following the model of Ruskin discussed by Kincans (2013, p. 378).[11]

For the nineteenth-century positivism it was a huge blow to discover that in the census the exact age classes could be missed. In the acts of the first census of the Kingdom of Italy, which was held (nominally) at midnight of December 31, 1861, we find accumulations of inhabitants in the round classes of 20, 30, 40 ..., a slight peak at 25, 35, 45, ... and intermediate ages almost empty, since the exact data were known primarily by nobles and bourgeois. The first census was still in the realm of hypernyms.

The choice of hypernyms in the metric system was originally established ten in ten (today it goes thousand in thousand), but this excessive availability caused some customary selections with differences between different countries. In Italy millimeters, centimeters, meters, kilometers dominate although at the beginning of the twentieth century there were abortive attempts to introduce the myriameter; hectometer survived only as hectar, 10000 square meters. In Austria a singular textbook (Rusch, 1903) used the square myriameter, though using square km for the density of the inhabitants. The decameter was not defended by anyone and the decimeter led a wretched existence limited to the school. For weights gram, and kilo[gram] were popular, but the intermediate sections oscillated between hecto[gram], deka[gram], quarter, half quarter. The German half quarter (=125 g) was reintroduced recently by Community rules. The country economically dominant forces his tongue!

In the case of currency, translation becomes impossible even within the same unit of measure because of economic evolution and inflation. A further information on the pricing system of the time is unintentionally provided so that again there is hypercoding. Often works of little literary value, thanks to this low profile, become over time sources of striking documentation.

Conclusions

Bilingualism related to the numbers is not the simple ability to count in different languages, which is one of the easiest to acquire. It relies on the perception of the connotations associated with different measurement systems. A continental knows that a mountain 4000 meters high belongs to the highest peaks of the Alps. But does he know with equal certainty that a mountain of 13,000 feet does not belong to Himalayas? Can we perceive that at 100 Fahrenheit the weather is hot, but not yet so hot as in the heart of the Sahara? And does an American perceive that 39 degrees represent a high fever? There are people who work with two systems of measurement, but in different

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[11] Slightly different is the classical case of pleasure (*Dulce = sweet*) considered by Lucretius (1900) in 2, 1-6, where the essential asymmetry of converging alternatives leads to opposition (and relief) rather than comic effects.

contexts: a continental airplane pilot measures land distances in kilometers and the heights of the mountains in meters, but measures the distances to travel by plane in miles and flight altitudes in feet. It is not automatic that he also has the perception that 100 feet are 30 meters, because this measure may be out of his range for English measure system. This phenomenon recalls the entry barriers that exist in economics, and can be compared with the discussion (Chang et al., 2015).

A daily case of bilingualism occurs in the perception of speed: the speed is the distance traveled in a given time but can also be perceived as the time required to travel a given distance (that is its inverse). For motor vehicles the speed can be read on the speedometer, while walking you see on the clock the time taken. The conversion is not intuitive and can mislead even engineering students.

Investigations should be carried out on the psychology of bilingualism in particular in cases of emigration. It seems that there are systems anchored to the first learning so that a conversion becomes slow and uncertain. This fact is confirmed by the difficulty that people used to perceive the prices in national currencies find with euro account, even after more than ten years; it is observed that when there is the need to have a quick perception of the amounts, they are still forced to bring the amount to the old currency. Beyond a certain age it is difficult to create new mechanisms of complete perception, even if you can detect the presence of bands of „bilingualism" in particular areas of frequent use.

Summary

The note shows that beyond the mechanical translation of a number from one language to another, there are many problems related to the field of the significance of the number. This paper only considers the natural numbers, which are learned before schooling, so that the phenomena of perception both exact and approximate are free from the influence of superimposed technicalities. This substrate has profound moments of hypocoding and approximation which are alternated with moments of hypercoding where the number assumes an emphatic fashion. Sometimes the reversal of its dimensional scale is reached, as when the phrases „I told you a hundred times," and „I told you a thousand times „are considered equivalent or a person is defined as „a millionaire" instead of „a billionaire", with the same meaning. The hypercoding can even cancel the original meaning of the number substituting a new dominant connotation. At the end, the note focuses on perceptive bilingualism of numbers, which could be investigated and compared in the euro-area countries where there was instant switching from a monetary system to another in the (theoretical) absence of inflation. In particular it would be worth to compare the speed of adaptation of three classes: older generations, non reactive; intermediate generations, with stable number perception with ability to react; younger generations that experience an evolving system just begun.

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INCLUSION, LEGISLATION AND PRACTICE: EDUCATING STUDENTS WITH DISABILITIES – THE AUSTRALIAN AND LATVIAN EXPERIENCES

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Abstract. *In Australia and Latvia the inclusion debate has changed the face of education. This change has been brought about by legislative edicts, challenges to traditions which segregate students and by confronting teacher beliefs. This article explores the experiences of the education system in Australian, specifically the state of New South Wales (NSW), in addressing inclusion. Parallels between the Australian and Latvian experiences are identified. Finally the retreat by the NSW system away from the confusion surrounding the use of the term inclusion to the concept of every student, every school is detailed.*

Keywords: *inclusive education, students with disabilities, educational policy, professional learning.*

Introduction

Inclusive education is based on concepts of social justice and equity but how these terms are understood and then manifested in the provision of educational services for each and every student varies across nations and education systems. The waters are muddied by the fact that the term inclusion attracts a plethora of meanings (Lindsay, 2007; Kavale & Forness, 2000). It has been used to discuss social justice, human rights (Lindsay, 2007) or as a way of building democracy (Villa, Thousand, Stainback & Stainback, 1992). Slee is disappointed that it has moved away from its original meaning which rejected the notion of medical or psychological labels to explain educational differences (as cited in Miles & Singal, 2010). With such complexity, how then do educational systems address inclusion? Where do they start and why? In the responses of NSW and Latvia it is possible to see the impact of "big picture" factors such as legislature, existing traditions, teacher beliefs and professional learning. These are elements that education systems can incorporate or address. Legislature from international declarations and conventions is crucial to the process of bringing about change. Traditions that have led to segregation, such as ways of defining disability and service provision, need to be confronted. Similarly teacher belief systems need to be challenged. The governments and education systems of both countries are engaged in these processes.

The purpose of the research was to analyse the NSW approach to inclusive schooling for students with disabilities to identify what impact the inclusive

schooling movement has had on NSW education department initiatives and directions. The Latvian experience is used as a comparison to determine what common elements are impacting on the way systems address inclusion. Questions that informed the review were the following:

- What is the role of legislative edicts in both jurisdictions?
- How do traditions within the NSW system impact on inclusion?
- If teacher beliefs, skills and knowledge concerning the education of students with disabilities impact on the change process, in what ways do NSW Departmental initiatives address these? How can teacher beliefs be altered?
- Is there an alternative to inclusion that would support the concept of education for all without the confusion that can sometimes arise from use of the term inclusion?

The methods used were: the review of legislature and policy documents relating to inclusive schooling and education for all in both NSW, Australia and Latvia; summation of major initiatives undertaken by the NSW state education system in response to inclusive schooling for students with disabilities.

NSW and Latvian education systems

The NSW state education system (Department of Education and Communities or DEC) is a large and complex one as testified by the fact that currently there are more than 740,000 students of whom 27% have a language background other than English, 5.5% are of Aboriginal or Torres Strait Islander descent and 2.0% are refugees. More than 76% of students with confirmed disability are enrolled in public schools: 90,000 students (12%) have a disability or additional needs such a learning difficulties or behaviour disorders; 77% of students with disability, learning or behaviour difficulty are enrolled in regular schools. These students are accommodated in 2,200 schools, taught and supported by 95,000 teachers and other employees (NSW. Department of Education and Communities, 2011).

In contrast in Latvia, in the 2013/2014 school year, there were 10,865 students with disabilities enrolled in schools. Of these, 5805 attended a special school and 5060 were enrolled in regular schools. Students with special needs made up 5.49% of the total school population (Ministry of Education and Science data). It is obvious that the NSW system has the advantages of size – more funding which means more services and initiatives, more choice. However it also has the disadvantages. Changing traditional ways of identifying, placing and teaching students with disabilities means changing teacher beliefs, something which is difficult to achieve in a large and geographically dispersed school system. Similarly membership of the European Union helps Latvia, a country with a population of 1 988.4 (Central Statistical Bureau of Latvia data), counteract the impact of being a small nation.

Impact of legislative edicts

Both education systems point to the importance of legislature for the change process. As Skrtic argues, schools and systems need external pressure in order to bring about change. Education systems across the world have seen the impact of a range of international declarations and conventions (Skrtic, 1991). Declarations that have influenced governments to develop national legislature have included: the UNESCO Universal Declaration of Human Rights 1948; the Convention against Discrimination in Education 1980; the Convention on the Rights of the Child 1989; the UNESCO Salamanca Statement and Framework for Action in Special Needs Education 1994; the UN Convention on the Rights of Persons with Disabilities 2006 and the UNESCO Policy Guidelines on Inclusion in Education 2009. The Latvian education system has responded not only to these, but also to the Education for All (EFA) movement originating at the World Education Forum in Jomtien, Thailand (Prudnikova, 2012). The 1994 Salamanca World Conference on Special Needs Education (UNESCO 1994) followed on from this, endorsing inclusive education arguing that regular schools with an inclusive orientation are the most effective means of changing discriminatory attitudes and achieving education for all (The Salamanca Statement and Framework for Action on Special Needs Education, 1994).

These conventions have led to legislature and regulations in Latvia that both describe and prescribe learning opportunities for all children including those with disabilities. The legislature has included: The Latvian Constitution of the Republic (The Latvian Constitution of the Republic, 1922/2010) which affirms that everyone has the right to an education; The Children's Rights Defence Law (The Children's Rights Defence Law, 1998) that states that children have the right to living conditions which support their physical and mental development; The Education Act (The Education Act, 1998) which guarantees access to special education programs for students with special needs; the General Education Law (General Education Law, 1999) which stipulates that students with special needs can receive support in any school setting and that they must have an individualised learning plan. Individualised education plans are a common feature of services for students with disabilities across jurisdictions. This leads to a quandary on the road to inclusion as they are also perceived by many regular class teachers as part of the reason why the student with disabilities should be educated in a special setting.

As well Cabinet Ministers' Regulations (2003-2010), which deal with turning laws into practice, specified that exemplary special education settings would be granted the status of Centre of Development for students with special needs and established networks among integrating schools to support these students. These actions reflect an important element of the Salamanca Declaration, which is the need to establish educational support systems for students with special needs to facilitate their inclusion. A similar move has taken

place in NSW where special schools are being re-badged as Centres of Expertise as part of their "Every student, every school" initiative which is discussed later.

Finally, the Education Development Guidelines for 2014 – 2020 (The Education Development Guidelines for 2014 – 2020, 2014) address a broad spectrum of special education issues including the educational rights of students with disabilities, the need for a solutions-based approach and the role of society in securing the inclusion of students with special needs. This document indicates a move to focusing on solutions not just the disability, an important aspect for inclusion and one that will be examined in more detail with respect to the NSW system.

Within the NSW context, one of the most formative conventions has been the UN Convention on the Rights of Persons with Disabilities which has led to The National Disability Strategy 2010-2020 (which aims to identify and remove barriers to services for people with a disability) and the National Disability Insurance Scheme Act 2013 (which provides for the National Disability Insurance Scheme in Australia and supports the independence and social and economic participation of people with disability).

The NSW Department of Education and Communities is also bound by, at a national level, the Disability Discrimination Act 1992 and the Disability Standards for Education 2005. The standards cover enrolment, parent choice, access and participation, curriculum development, accreditation and delivery, student support services, elimination of harassment and victimization. The Standards require schools to treat students with disabilities on the same basis as students without disability and include obligations for making reasonable adjustments to student's learning program and /or learning environment. Parents and, where appropriate, students with disabilities must be consulted on the personal adjustments that will be provided. It should be noted here that the term "reasonable adjustments", however, allows schools to decline enrolments if such an enrolment would create undue hardships or interfere with the learning of other students.

At a state (NSW) level the Department and its schools are also bound by the Anti-discrimination Act 1997, the Ombudsman Act 1974 and the Disability Inclusion Act 2014.

These acts, and the theories associated with their institution, have had a significant impact on the services provided by the Department over the years as it has moved from a disability category focus prevalent in the 1960-1970s to the current functional needs focus, where personalised learning adjustments are key. This has seen the Department and its schools, leaders, teachers and support staff move from segregation, to integration in the 1980s, inclusion in the 1990s and leading to a focus on diversity in the 2000s.

Challenging Traditions

Traditions, such as those associated with student placement or the range of support services, impact on how teachers view students with special needs and how they view their own ability to meet these needs. The determination of disability (the who, how and what) is an important element both for accessing educational options and for the process of making schools inclusive and education systems have traditionally relied on a medical model.

In Latvia special education support is enshrined in the General Education Law in Article 3 (The General Education Law, 1999). Article 1 of the Education Act specifies the range of people who require the support of special education (The Education Act, 1998). It states that special education services create the opportunities and conditions for students with special needs to be able to access any educational institution and to receive an appropriate education which takes into account their health needs, capabilities and level of development, all the while providing educational, psychological and medical adjustments, preparing them for work and life in the community. The term, "special needs" is defined by law in Article 1 as being „a need for support and rehabilitation which, when provided, facilitates the student's access to the curriculum, while taking into account the state of the student's health, his/her capabilities and level of development" (The Amendments to the General Education Act, 2011).

With such a broad definition of special needs, it is the role of the State Pedagogical Medical Commission or local government pedagogical medical commissions under the jurisdiction of the Cabinet of Ministers (The General Education Law, 1999) to ensure that students with special needs can access a quality education based on equality and equal rights. These commissions determine who meets the special needs criteria and can access additional or different services.

In NSW, the placement of students in special classes or even access to additional support in a regular setting has been, until the 2000s, dependent upon a medical model of defining disability. As the medical model places an emphasis on deficits, there has been a gradual move, especially amongst educators, towards a way of determining need without linking it to a deficit. As Van Swet, Wichers-Bots and Brown state "The ways in which individuals with disabilities are viewed has been an evolving global debate. The World Health Organization (WHO) revised its International Classification of Functioning, Disability and Health (ICF) in 2001 to consider the impact rather than the cause of the universal human experience of disability" (van Swet et al., 2011, p.909).

The medical model implies that the disability is within the individual and needs "fixing". This has led to specialisations in support services. It has also led to some teachers to believe that they are not sufficiently skilled to teach these students as the focus is on individual deficits (Slee, 2009).

However, for the purposes of inclusion, the use of a medical model of disability categorisation is only part of the problem. More of concern is how education systems, schools and teachers use this information and how it impacts on the way that students are taught. Also of concern is the perpetuation of the belief systems which underpin the acceptance of the use of these labels for educational purposes (Erten and Savage, 2012).

In NSW a range of placement options is available. One option for students with disabilities is to be educated in special schools and this is especially true of some groups of students such as those with Profound Intellectual and Multiple Disabilities. According to Lyons and Arthur-Kelly: Although some national and state jurisdictions have taken the initiative to deliver educational services under one (authentically) inclusive milieu (e.g. Finland), "special education" and its infrastructure prevails. Most students with PIMD have an individualised needs-based teaching/learning program delivered in accordance with their Individualised Education Plan but this often relates little to the "common" curriculum mandated for the vast majority of students (Lyons and Arthur-Kelly, 2014, p.449).

Another option is attending a support class in regular schools, sometimes with partial integration into mainstream or regular classes for some subjects. In the 1980s and 1990s such placement was not necessarily accompanied by any changes to the pedagogy, the school environment or the existing belief system about students with disabilities. The attempt was to create as little disruption to the functioning of the class as possible (Anderson, Klassen, and Georgiou, 2007).

The thinking behind such placement is in contrast to the social model propounded by DEC currently: The social model accepts, in contrast to the medical model, the possible disability or problem is the result of the relationship of the pupil and his environment, in this case the school. One assumes that a disability can certainly lead to functional limitations but, in the end, it is the responsibility of society to see that the individual does not experience the limitation as a handicap (van Swet et al., 2011, p.910).

Most students with disabilities in NSW are educated in regular classes in regular schools with varying levels of support. NSW teachers have experienced a steep learning curve and have had to re-think their classroom practices driven on by the fact that The Board of Studies, Teaching and Educational Standards (BOSTES) which prescribes the key learning areas for all schools, state and private in NSW, has incorporated curriculum adjustments for students with disabilities as something which occurs within the mainstream curricula. Similarly, the DEC has adopted a social model with respect to disability. The handicap or difficulty is no longer seen as belonging exclusively to the student but rather as something that reflects the interaction between the student and his/her environment and the specific barriers that he/she may meet: physical;

attitudinal; communication and social. Thus the environments need to change so that students with disabilities can participate on an equal basis with others.

Teacher beliefs and professional learning

The DEC is attempting to combat the impact of traditions and associated teacher beliefs through professional learning. Running parallel to the introduction of a social model was the introduction of the concept of quality teaching. This asked teachers to re-think what was important in the classroom: The core business of the profession of teaching is pedagog. Crucially, the term *pedagogy* recognises that how one teaches is inseparable from what one teaches, from what and how one assesses and from how one learns. The NSW Department of Education and Training is committed to providing a public school system, which develops fully the talents and capacities of all students in the pursuit of attaining the highest educational standards irrespective of students' background or circumstance (NSW, Department of Education and Training, 2003, p.4).

This meant a focus on the quality of each student's learning experience. Teachers had to reflect on relationships and connectedness in the classroom as part of the process of ensuring that learning was rigorous, meaningful and dignified for all students. DEC, while still relying on medical diagnoses for some disabilities, was moving towards personalised learning and support. The DEC was moving closer to the assumption expressed by Hulgin and Drake "that teaching is shaped by the particular needs, experiences and interests of a community of learners. The curriculum does not dictate who belongs" (Hulgin & Drake, 2011, p.393).

Skrtic (Skrtic, 1991) states that change needs the involvement of those who have been marginalised. The needs of a diverse population of students are more likely to be met byschools that are 'adhocratic'. In such schools educators, students, families and community members are involved in collaborative processes benefiting from a sharing of expertise. Teachers need to re-examine their practices and move on from seeing the students as the ones with the problem just because they don't fit into the way their classes are currently organised. Belief systems need to change.

Reflecting the above thinking, in 2012, the DEC introduced a learning and support framework to embed personalised learning and support for any student with special needs. This was the "Every Student, Every School" initiative. This initiative aimed to provide better learning support for students whose learning was impacted upon by disability.

Personalised learning and support has four elements: collaboration; assessed individual need; adjustments and the impact of adjustments and is solution-focussed. As van Swet et al., point out "the concept of using a solution-focused approach in an assessment process widens the prospect of potential

results" (van Swet et al., 2011, p.920) and as ready made solutions don't exist, it leads the teacher to work in a reflective manner collaborating with parents, students, school personnel, peers and outside providers in order to determine learning needs and address these needs.

Another element is that of assessment. Each student is assessed to determine his or her individual needs Based on this adjustment are made which are changes to curriculum, instruction and environments that are personalised against each student's assessed need. Finally the impact of the adjustments needs to be determined. Evidence is collected, analysed and interpreted in order to make a judgement about the value of the adjustments. This information informs further actions. As van Swet et al. state, this means that: Diagnosis is no longer only conducted by individuals specifically trained for this purpose but, rather, within a cooperative network of teaching colleagues, parents, other professionals, organisations and the students themselves. This shifting assessment concept recognises the complexity of cognitive development and the need for many voices to understand challenges presented by individual learners (van Swet et al., 2011, p.911).

However even with a collaborative approach, the understanding and attitudes of the teacher play an important part in determining whether students with disabilities are actually included, as opposed to tolerated, in regular settings. As Hansen states: It is primarily the teacher who draws the line between inclusion and exclusion in the specific classroom. … we should examine how the teacher constructs categories, teaching and classroom, because it is these constructions which decide the boundary between inclusion and exclusion (Hansen, 2012, p.95).

Most research shows that the successful introduction of reforms is directly related to the implementation strategies used by teachers and their knowledge, skills, attitudes, beliefs and ability to collaborate (Florian, 2005, 2007, 2008; Ainscow, 2003, 2004).

With its "Every Student, Every School" the DEC utilizes professional learning practice to impact upon school culture and practice. It provides a range of professional learning options to support teacher learning about students with disabilities. These include 9 modules detailing the "Every Student, Every School" initiative as well as individual e-learning opportunities for teachers across a range of topics such as: understanding autism spectrum disorder; understanding and managing behaviour; Inclusion of learners with speech, languages and communication needs; understanding dyslexia and significant difficulties in reading; understanding co-ordination difficulties. It also funds places in post-graduate special education courses at a Masters level. Additional professional learning is organised by schools as all schools are required to have incorporated professional learning into their school plan and, as a result, schools will organizeactivities which meet theirspecific needs. As Ainscow and Sandill state: …the starting point must be with staff members: in effect, enlarging their

capacity to imagine what might be achieved, and increasing their sense of accountability for bringing this about. This may also involve tackling taken for granted assumptions, most often relating to expectations about certain groups of students, their capabilities and behaviours (Ainscow & Sandill (2010).

From inclusion to every student

DEC developed a multi-faceted approach in its attempts to make schools more inclusive. In 2012 three strategies came into operation: Connected Communities (targeting inclusion of Aboriginal students); Early Action for Success (implementation of the state's literacy and numeracy plan) and Local Schools, Local Decisions (an education reform that gave NSW public schools more authority to make local decisions about how best to meet the needs of their students).

The introduction of "Every Student, Every School" was accompanied, in 2013, by structural change. 1800 Learning and Support Teachers were allocated to schools, which was partially achieved by restructuring the existing itinerant teacher program. Learning and Support Teachers work collaboratively with classroom teacher to support students with disabilities. Flexible funding to support students with disabilities was also made available to every regular school. In 2014 the use of Personalised learning and support was enhanced through professional learning including Disability Standards e-learning (47,550 courses) and tutor supported online learning (24,000 courses).

From 2015 each school becomes accountable for its actions as it becomes mandatory to take part in national disability data collection (National Consistent Collection of Data, NCCD) using evidence of personalised learning and support. Interestingly it is based on the professional judgement of teachers about their students.

"Every Student, Every School" marks the DEC's move away from use of the term inclusion. Whilst the majority of students with disabilities in NSW receive their education in regular schools, this move has validated the existence of special schools as well, as it refers to every school not specifically regular schools. It is an acknowledgement of the confusion surrounding inclusive schooling as jurisdictions try to make sense of it with respect to their circumstances and needs. The focus on every student and every school challenges all teachers and leaders to re-think how learning occurs but it also includes various supports: professional learning; support in the regular classroom; special schools as centres of expertise; materials to meet additional learning needs and information to support teaching and learning as well as access to expert support. "Every student, Every School" provides clear direction rather than the uncertainty and misunderstandings that can arise in discussions of inclusion. It has a strong focus on acknowledging and celebrating diversity, of accepting that the students with disabilities also contribute to the class

environment rather the being the outsider, the one with a label, and this is being used to confront existing teacher beliefs about students with disabilities.

Conclusion

The beginning of the inclusive schooling process in Latvia and NSW starts with legislature. Both education systems have developed policy documents and plans, and instituted mandatory requirements as a way to turn legislature into practice. The process of realising this legislature has led NSW to move from discussions of inclusion to ones that re-iterate the rights of each and every school student to quality education. However implementing change is an ongoing process and DEC is focusing on the professional learning of its teachers and school leaders as a crucial step in the process of confronting accepted beliefs and traditions. It has also modified to the way that students with disabilities are assessed, placed and their progress monitored and provided additional supports to regular schools as a way of reducing the gap in thinking between special education and inclusive education. In NSW the process of inclusion is framed within the concept of celebrating diversity. The experiences of both systems reflect the challenge that understanding and implementing inclusive education sets for education systems.

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STUDENTS OF SPECIAL EDUCATIONAL DISCIPLINES – ISSUE OF SOCIALIZING AND EDUCATING PEOPLE WITH HEARING IMPAIRMENT

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Abstract. *The contribution presents results of research which is focused on issue of socialization of people with hearing impairment. It is focused on the point of view of students of special education major. Research included 127 students of special education major who studied full time or distance study form. The questionnaire was used as research method and it included 28 opened and closed questions. The author also used Likert scale. Results showed that students of special education major prefer education of pupils with hearing impairment in the school for pupils with hearing impairment. Hearing impairment influences all areas of life - education, employment, relationships with peers, free time activities and partner relationships.*

Keywords: *hearing impairment; education; research; questionnaire.*

Introduction

Today, the society strives to integrate people with disabilities into the major society. MacCoby (2007) defines socialization as a phenomenon when people learn values, norms and attitudes which are needed for functioning in the society. This contribution is an output of a research which was realized under the project ofIGA_PdF 2014013. The research focused on students of special education. The aim of the research was to find out how students of special education are informed about issue of socializing and educating people with hearing impairment.

Theoretical basis

Ten million people live in the Czech Republic. Czech Statistical Office has posted information that over one million of people with disabilities have lived there. This group includes people with physical impairment (29.2%), people with visual impairment (6%), people with hearing impairment (5.1%), people with intellectual disabilities (6.1%) etc. (Czech Statistical Office). The author deduces that each tenth person has some disability.360 million people with hearing impairment live around the world. This number includes 328 million adults and 32 million children (WHO, 2014).

"Hearing impairment or disability refers to the reduced function of loss of the normal function of the hearing mechanism. A person who is deaf cannot use hearing to listen, understand speech and communicate orally without special

adaptions mainly in the visual mode. A person who is hard of hearing has a significant loss of hearing sensitivity but he or she can hear sounds, respond to speech and other auditory stimuli with or without the use of hearing aid"(Capulong, 2007, p. 205).

The rights of the people with disabilities are regulated by the Convention on the Rights of Persons with Disabilities, published by the United Nations. This Convention wants to improve the awareness of people with disabilities (Paragraph 8), because it was found out that people with disabilities are discriminated (Convention on the Rights of Persons with Disabilities). For the period of 2010 – 2014 the National plan for creating equal opportunities for persons with disabilities was made. In the Czech Republic, people have positive attitudes towards people with disabilities but it is very important to increase the awareness of these people (Kašíková, 2010).

In the area of education is the Czech Republic supports inclusive education (Kašíková, 2010). *"Inclusion refers to the placement and education of children with disabilities in regular education classrooms with children of the same age who do not have disabilities"*(Dash, 2006, p. 21). All pupils are educated according to the Education Act 561/2004 Sb. The education of pupils with disabilities is adjusted by paragraph 16. Children, pupils and student who are deaf or deafblind can be educated by communicational systems for the deaf and the deafblind. Basic education of all pupils in the Czech Republic is realized via the Framework educational programme. There are framework educational programmes for basic education, high school, pre-school education, art studies and language education (MSMT, 2015). Basic education of pupils with hearing impairment is realized according to the Framework educational program for basic education. Every school creates School educational programme, corresponding to the content of Framework educational programme for basic education. Pupils with hearing impairment belong to pupils with special needs. Pupils can be educated via the form of inclusive education (individual or group) at school for pupils with impairment or combination of these forms (MSMT, 2015). 13 basic schools for students with hearing impairment can be found in the Czech Republic (Hrubý, 1997; Švecová, 2012). A research identifying the view of the majority of special education was done of Center for Public Opinion Research in 2014. The research included 1 017 responds. The results showed that pupils with hearing impairment should be educated at schools for students with hearing impairment (Červenka, 2014).

Students with hearing impairment can visit two special programmes for students with hearing impairment: Czech language in the communication of the deaf (Prague) and Educational drama of the deaf (Brno) (Komorná, 2008; Švecová, 2012). Of course, students can visit all study programmes at all universities in the Czech Republic, then they use of university counselling service.

Similar research to the author's research was done by Vávrů (2007) who has sent a questionnaire to120 students ofMasaryk University in Brno. Vávrů identified what groups of people with disabilities the respondents would like to work with most likely. The results showed this order: 1) learning difficulties; 2) physical disability; 3) visual impairment; 4) hearing impairment; 5) intellectual disability etc.

Sedláková (2007) has also studied the attitude of the society towards people with disabilities and she has found out that the society considers intellectual disabilities as the most serious ones. In her study, the hearing impairment was on the fifth place.

Hearing impairment influences all areas of lives of people with hearing impairment (education, employment, free time, peer relationships, marriage, family etc.). Hearing impairment also influences partner relationships. The topics of partner relationships include communication, hobbies and relations of hearing and hard of hearing partner. The students suppose that people with hearing impairment think that they are disadvantaged when looking for a partner. The biggest problem is communication (Švecová, 2013). Single people with hearing prefer partner without hearing impairment or they do not have a straight forward opinion on this topic (Uhrová, 2013) and pupils with hearing impairment prefer partner without hearing impairment or they do not have a straight forward opinion on this topic (Švecová, 2013).

The aim of the research

The aim of the research was to find how students of special education are informed about hearing impairment. The area of hearing impairment is very large; it includes communication, sign language, spoken language, ethology, free time and employment, so the author focused on the socialization and education of people with hearing impairment. The area of education focused on basic questions of basic education, inclusive education, university education of hearing impairment, employment etc. The area of socialization includes the topic which informs from the point of view of the majority or the topic of partner relationships. The author thinks that benefit of this research is that it includes basic questions from different areas and these can be dealt with later in another research. In the context of the research we have formed these researched questions:

1. What are the benefits of educating pupils with hearing impairment at school for pupils with hearing impairment?
2. Which factors influence inclusive education?
3. In what areas is the hearing impairment limiting?
4. How hard is it for people with different disabilities to integrate into the society?

The target group

The author has chosen students of special education at Palacky University, Olomouc, as her target group. The author has chosen this target group because these students of special education will meet people with hearing impairment not only during university practice but also at work. For the purpose of the research the author approached students of full time form of studies who study bachelor or master degree of special education. The author contacted these students through email addresses set up by each freshman of special education. Sadly, the author does not know the exact number of respondents asked but the last year's report stated 733 students of special education in 2013. The author received only 47 questionnaires from the students of the full time study; that is why she addressed also students of the distance study. The author did not approach student of distance form of study through email but these students filled out questionnaires during lesson. The author did not include all students of special education of distance form into the research but the lessons with the greatest number of students were chosen. The data concerning the numbers can be found in the STAG. The author would like to emphasize that research was realized between January and February and therefore the author did not address more students. Finally, the target group included 127 respondents. The research includes 96.85% females and 3.15% males. This result shows feminization in education. Equal 37% of students study present form and 63% distance form. 41.73% of students graduated from education for hearing impairment. "Tab. 1" shows basic characteristics of respondents.

Table 1. Characteristics of respondents

	n_i	R_i %
Sex		
female	123	96,85
male	4	3,15
Total	**127**	**100**
Form of study		
full time	47	37,00
distance	80	63,00
Total	**127**	**100**
Completion of education of hearing impaired		
yes	53	41,73
No	74	58,27
Total	**127**	**100**
Choosing education of hearing impaired		
yes	38	29,92
no	89	70,08
Total (n)	**127**	**100**

(Švecová, in press)

Legends: n_i – frequency; **R_i %** - n_i/n

The methodology of the research

The author has used questionnaires to collect data. The questionnaire includes 28 questions. These questions were open-ended and closed-ended but the author has also used Likert scale. The questionnaire itself includes 5 chosen items (items 1, 2, 23, 26, 27), 3 enumeration items (items 3, 15, 18), 3 numeric scale (items 4, 12 and 20), 6 Likert scale (items 7, 10, 14, 16, 19, 21) and 11 opened items (items 5, 6, 8, 9, 11, 13, 17, 22, 24, 25, 28). The questionnaire includes two research areas: Education and Issue of socializing people with a hearing impairment. These areas were chosen for their topicality. The topic of research was education (items 1 – 11), area of socialization (items 12 – 22) and social demography characteristic (items 23 – 28). Questionnaire items were set up by the author after having read publications such as Disability and the Good Human Life (Bickenbach, Felder, & Schmitz, 2014), Psychological, Social and Educational Dimensions of Deafness (Schirmer, 2001) and Psychosocial Aspects of Deafness (Scheetz, 2004). Theauthor made the items of the questionnaire herself, because standardized questionnaire did not fit the requirements.

The results of the research

Item number one investigated which educational programme adjusts education of pupils with hearing impairment. Students chose from these options: framework educational programme general school, framework educational programme for basic education, framework educational program for hearing impairment and framework educational programme for hard of hearing and deafness. Only 26% of responds answered correctly (Framework educational programme for basic education).

Other item investigated where the pupils with a hearing impairment can be educated. The respondents chose from these questions: basic school for hearing impairment, individual integration for hearing impairment and group integration for hearing impairment. Equal 63% of responds chose possible "basic school for hearing impairment", 23% "group integration" and 14% "individual integration".

Education of pupils with hearing impairment at school for hearing impairment brings more benefits. Respondents could choose 3 possibilities at maximum. "Tab. 2" shows benefits of education of pupils with hearing impairment at school for hearing impairment.

Table 2. Benefits of education at school for hearing impairment

Items	n_i	Order
Fewer pupils in classroom	74	3.
Group same impaired peers	41	5.
Teachers for pupils with hearing impairment	98	1.
Using of sign language	55	4.
Special educational material	94	2.

Legends: n_i – frequency

Success of integration is influenced by several factors. For example degrees of hearing loss, level of spoken language, personality of pupils with hearing impairment, lip-reading, education in pre-school with hearing children, hearing family and time of formation of hearing impairment. The influence of these factors is expressed on a numeric scale. Number 1 (depends) – 5 (does not depend). Integration depends on 1. Lip-reading (2.28); 2. Time of formation of hearing impairment (2.50); 3. Degrees of hearing loss (2.63); 4. – 5. Level of spoken language (2.70); 4. – 5. Personality ofpupils with hearing impairment (2.70); 6. Hearing family (2.74) and 7.Education in pre-school with hearing children (2.87). The results also are in "tab. 3".

Table 3. Factors of integration

	1		2		3		4		5			
	n_i	$n_i \times 1$	n_i	$n_i \times 2$	n_i	$n_i \times 3$	n_i	$n_i \times 4$	n_i	$n_i \times 5$	average	order
1	35	35	35	70	30	90	16	84	11	55	2.63	3.
2	19	19	43	86	32	96	19	76	14	70	2.70	4.-5.
3	29	29	35	70	25	75	21	84	17	85	2.70	4.-5.
4	20	20	49	58	32	96	15	60	11	55	2.28	1.
5	11	11	37	74	47	141	22	88	10	50	2.87	7.
6	14	14	43	86	42	126	18	72	10	50	2.74	6.
7	38	38	33	66	24	72	18	72	14	70	2.50	2.

Legends: *1 - degrees of hearing loss, 2 - level of spoken language, 3 - personality of pupils with hearing impairment, 4 - lip-reading, 5 - education in pre-school with hearing children, 6 - hearing family and 7 - time of formation of hearing impairment.*

Students with hearing impairment can visit all universities in the Czech Republic, but only in Brno and Prague there are study programmes for students with hearing impairment. Only 11.02% of students know about these programmes.

Likert scale served to find out the degree of agreement with this statement: *"People with hearing impairment have the same chance to achieve bachelor or master degrees like people without hearing impairment."* Options – strongly agree, agree, neutral, disagree, and strongly disagree. 45.67% of responds strongly agree with this statement, 39.37% of responds agree, 2.36% of responds feel neutral and 12.60% of responds strongly disagree.

Every person with disability has a different chance of integrating into the society. "Tab. 4" shows the level of integration according to students of special education. Number 1 (very light integration) – 5 (very strongly integration).

Table 4. The degree of integration of people with disability according to students

	1		**2**		**3**		**4**		**5**			
	n_i	$n_i \times 1$	n_i	$n_i \times 2$	n_i	$n_i \times 3$	n_i	$n_i \times 4$	n_i	$n_i \times 5$	average	order
VI	2	2	19	38	38	114	45	180	23	115	3.54	**6.**
HI	5	5	19	38	50	150	38	152	15	75	3.31	**5.**
PD	7	7	39	78	48	144	28	102	5	25	2.80	**4.**
ID	3	3	7	14	20	60	45	180	52	260	4.07	**8.**
ASD	1	1	12	24	29	87	35	140	50	250	3.95	**7.**
LD	62	62	47	94	11	33	5	20	2	10	1.72	**1.**
BD	9	9	53	106	40	120	21	84	4	20	2.67	**3.**
SD	26	26	63	126	29	87	7	28	2	10	2.18	**2.**

Legends: VI – visual impairment, HI – hearing impairment, PD – physical disability, ID – intellectual disability, ASD – autism speech disorder, LD – learning difficulties, BD – behavior disorders, SD – speech disorder

Liker scale also found out degree of agreement with this statement: *"People with hearing impairment meet different obstacles every day"*. 27.56% of students strongly agree with this statement, 59.06% of students agree, 11.02% of students were neutral and 2.36% of students chose to disagree.

The item finding out in which areas people with hearing impairment were limited included these options: education, employment, free time activity, parenthood, marriage, relations with peers and knowledge ability. Respondents could choose 3 items at maximum. Order of items is in "Tab. 5".

Table 5. Areas which people with hearing impairment were limited

Area	n_i
Employment	106
Relations with peers	75
Education	53
Knowledge ability	51
Parenthood	21
Marriage	19
Free time activity	13

(Švecová, in press)

At last, Likert scale found out the degree of agreement with this statement: *"People with hearing impairment are limited when choosing a partner."* 7.87% of respondents chose that they strongly agreed, 47.24% of respondents agree, 21.26% of respondents choose neutral, 19.69% of disagree and 3.94% of respondents strongly disagree. Likert scale also found out the

degree of agreement with this statement: *"Partner relationship is for person with hearing impairment better with partner with hearing impairment than hearing partner."* 11.02 % of respondent chose that they strongly agree, 29.92 % of respondents agree, 47.67% of are neutral, 12.60 % of respondents disagree and 0.79 % of students strongly disagree.

Conclusion

Basic education in the Czech Republic is realized according to the Framework basic education, but the right answer was filled out by only 26% of students. The author thinks that it is very important to inform students about the issue of education because maybe they will work with children or pupils with hearing impairment.

National plan for creating equal opportunities for persons with disabilities promotes inclusive education; despite this only 27% of responds is for the inclusive education. This result is similar to results of the Center for Public Opinion Research. The Center found out that pupils with hearing and visual impairment cannot be educated through inklusive education (Červenka, 2014).

Successful integration of students with hearing impairment depends on lip-reading, time of formation hearing impairment, degrees of hearing loss, level of spoken language, personality of the pupil with hearing impairment, hearing family and education in pre-school for children without disability. There are 13 basic schools for pupils with hearing impairment in Czech Republic. The authors found out these benefits of education of pupils with hearing impairment atthese schools: fewer pupils in classroom, the group of the same impaired peers, teachers for pupils with hearing impairment, using of sign language, special educational material.

The author deduces that despite of all educational activities the fear from the unknown, which comes with integration, persists. The author also believes that it is not necessary to inform the society about hearing loss but it is necessary to inform society as well as successful integration. Educational activities should be targeted primarily at parents and educators. In the Czech Republic there are two university courses for students with hearing disabilities: Czech language in the communication of the deaf and Educational Drama for the Deaf, but only 11.02% of students knows about their existence. Special education students think that people in this order (1. People with learning difficulties; 2. People with speech disorders; 3. People with behavior disorders; 4. People with physical disabilities; 5. People with hearing impairments; 6. People with visual impairments; 7. People with autism spectrum disorders and 8. People with intellectual disabilities) integrate into the society the most easily. The author noted that similar ranking results were found in a research exploring what people with disabilities the interviewed would like to work with.

The author concludes from the results that people without disabilities often have fear of the unknown and unexpected, because people without disabilities do not meet people with disabilities very often in society. Students from special educational disciplines believe that persons with hearing disabilities are limited when choosing a partner. These respondents also think that people with severe hearing impairment prefer persons with severe hearing impairment or do not have a strong opinion. These results are different from the results ofUhrová (2013), who found that single people with hearing impairment (regardless of the degree of hearing impairment) preferred hearing partner or they did not have a straightforward opinion on this topic and Švecová (2013) who found that pupils with hearing impairments (regardless of the degree of hearing impairment) preferred hearing people they did not have a straightforward opinion on this topic.

Summary

The contribution focused on issue of socialization of people with hearing impairment. There are presents outcomes of research which were realized on the topic: Awareness of students of special education major in the field of hearing impairment. Research included 127 students of special education major. The author thinks that this questionnaire can be used for all students and majority society. The author also believes that this questionnaire can be applied on people with hearing impairment and results can be compared. Also every questionnaire item can be elaborated into separate research.

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APHASIA IN THE COGNITIVE DISORDERS CONTEXT – PRELIMINARY STUDY

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Abstract. *Purpose: The aim of the article is to analyse cognitive disorder in persons with aphasia of various aetiology pursuant to brain damage, emphasizing the interdisciplinary cooperation between the professionals of speech therapy and psychology.*
Methodology: Seven persons with stroke related aphasia of different aetiology participated in the research. For data processing, psychological, neurological and speech therapeutic detailed reports were applied.
Results: We observed higher incidence of ischaemic stroke than haemorrhagic stroke. Expressive aphasia occurred in 6 of the 7 clients. Attention disorder and thinking disorder occurred in almost all 6 of the clients. Executive functions were impaired in 5.
Conclusion: Given our findings, we tend to aphasia therapy in terms of cognitive rehabilitation. We perceive the interdisciplinary cooperation with specialists from the field of psychology as absolutely necessary. The results of psychological examination of persons with aphasia can significantly influence the effectiveness of speech therapy intervention.

Keywords: *aphasia, cognitive disorder, interdisciplinary cooperation, stroke.*

Introduction

The role of non-linguistic disorder is more-often-than-not disregarded in speech-therapeutic interventions and speech therapists are often directed merely by the results of language tests even though people with aphasia show a high rate of variability in cognitive processes, given that the negative influence of non-linguistic disorders of cognitive functions was proven in the therapies of aphasia (Seniów et al., 2009). For this reason, the objective of the research examination is to analyse non-linguistic disorders of cognitive functions in people with aphasia of various aetiology pursuant to brain damage. The research examination took place in the Centre for Cognitive Disorders of the University hospital in Ostrava, Czech Republic and the professional neurological, psychological and speech-therapeutic reports from examinations of individual research participants were used for data processing. The objective of the preliminary study was to point out not only the non-linguistic disorders of cognitive functions in people with aphasia but also the necessity of interdisciplinary cooperation between speech therapists and psychologists.

Relationship of aphasia and disorders of cognitive functions

The origin of intensive examination of a link between language disorder (aphasia) and cognitive disorders dates back to the 80s of the 20th century (Vukovic et al., 2008). The study of cognition in severe aphasia is, for example, applied in the research of the necessity of language in various areas of thinking (Bek et al., 2010).

At present, on the one hand we can encounter opinions that language disorder is manifested by a disorder of cognition (Baldo et al., 2005). These statements are supported by model situations specifying an integral relationship between speech and other domains of cognitive functions in people with or without speech disorder (Murray, 2012). Kalbe et al. (2005) identified significant correlation between a sub-test focused on visual attention and two other linguistic sub-tests (understanding of a read text and speech fluency). On the other hand, there are researches at disposal that did not detect, in people with aphasia, any significant link between linguistic and non-linguistic abilities of attention, memory, executive functions and visuospatial abilities (Helm-Estabrooks, 2002; Hickley & Nash, 2007; Vukovic et al., 2008, Nicholas et al., 2011).

In general, we can observe an individual profile of non-linguistic damage from which it can be deduced that it is not possible to foresee a condition of non-linguistic cognitive abilities on the basis of a condition of language abilities (Helm-Estabrooks, 2002; Seniów et al., 2009; Murray, 2012).

Prevalence of non-linguistic cognitive disorders in aphasia after stroke was observed by Hachioui et al. (2014) in their study. Out of the total amount of 147 patients, a cognitive disorder was proven in at least one non-linguistic domain in 107 patients (88 %) three months after stroke and in 91 patients (80 %) one year after stroke. Higher probability of deficiency in cognitive functions is associated with damage to the left hemisphere, cortical lesion and ictus in the medial cerebral artery (Cumming et al., 2013).

The need to evaluate the non-linguistic cognitive abilities in people with aphasia is highlighted for reason of maximizing the benefit of therapy (Votruba et al., 2013; Zakariás et al., 2013; Hachioui et al., 2014). Deficiencies in one of the non-linguistic cognitive areas can disturb not only the process of renewal of speech abilities but also the process of coping with the handicap (Seniów et al., 2009). Negative impact of, especially, disorders of attention and executive functions on the therapy of aphasia is mentioned, among others, in the studies by Brownsett et al. (2014) and Ramsbergera (2005), claiming that the rehabilitation of these cognitive functions, even in people with chronic aphasia, can lead to apparent changes in these abilities. The components of executive functions seem to be important for initialization of a new theme, planning and controlling of our communication performance, including changes in communication strategies, which results in successful delivery of information (Ramsberger, 2005).

Vukovic et al. (2008) draw attention to the condition of memory in people with aphasia which is, according to the results of their research, a significant prognostic factor of aphasia and correlates with revival of the language functions. A rather significant prognostic factor of aphasia seems to be, above all, the aetiology. Published studies indicate that aphasia occurring as an aftereffect of cerebral trauma have better prognosis than aphasia occurring after a stroke (Vukovic, 1998; Laska et al., 2001; Vukovic et al., 2008).

Methodology

In total, 7 adult people with aphasia as a result of stroke of various aetiology participated in the research examination. The excluding criterion was aphasia in acute phase and aphasia that did not occur as a result of stroke or the presence of dementia. The research sample included 4 women and 3 men, average age 56.43 years.

In order to carry out objective data processing, which would indicate a disorder of cognitive function in people with aphasia, a detailed report from a psychologist was used together with a report from a neurologist or a speech therapist. The following methods were used for psychological diagnosis: Addenbrooke´s cognitive test (ACER), selected sub-tests of Wechsler intelligence scale for adults (WAIS-III), Trail Making Test, Rey-Osterrieth complex figure test, and observation and dialogue. Based on the report of a speech therapist or a neurologist, the type of aphasia was identified. For our purpose, only a dichotomous classification was applied for distinguishing between expressive and receptive aphasia.

The following **research questions** were set for the selected research sample of people with aphasia:
1) Do you observe the presence of non-linguistic disorders of cognitive functions?
2) What is the frequency of occurrence of individual non-linguistic disorders of cognitive functions?

Data analysis

We decided to record the results acquired from the research in the form of tables. We recorded general information referring to gender, age, and the type of stroke and aphasia (Tab. 1). Other tables show specific information relating to individual clients: the results of Addenbrooke´s cognitive test (Tab. 2) and evaluation of cognitive functions (Tab. 3). We evaluated, in all clients, the following domains of cognitive functions: attention, memory, executive functions, thinking (bradypsychism) and visuospatial abilities. We did not focus on individual components of cognitive abilities. In the event of detecting a deficit in the client´s cognitive function, we allocated the "plus" sign. The

"minus" sign indicated absence of a disorder. In case a domain was not evaluated in a client, we gave him/her the "x" sign.

Table 1. General information about clients

Patient	Sex	Year of Birth	Neurological Diagnosis	Speech-therapy Diagnosis
P1	Woman	1982	Intracerebral bleeding F-T left	Expressive phatic disorder
P2	Woman	1971	ischemic CVA left	Expressive phatic disorder
P3	Man	1952	ischemic CVA left	Expressive phatic disorder
P4	Woman	1941	ischemic CVA left	Expressive phatic disorder
P5	Man	1948	Lacunar stroke in the left carotid area	Expressive phatic disorder
P6	Man	1964	ischemic CVA left	Expressive phatic disorder
P7	Woman	1945	Intracerebral bleeding T left	Sensory phatic disorder

Table 2. Results of Addenbrooke´s cognitive test

Patient	MMSE	ACER	Attention and orientation	Memory	Verbal production	Langu age	Visually spatial abilities
P1	28/31	73/101	18/18	15/26	1/14	23/26	16/16
P2	X	x	x	x	x	X	X
P3	x	x	x	x	x	X	X
P4	22/30	59/100	13/18	13/26	1/14	21/26	11/16
P5	10/30	28/100	6/18	6/26	5/14	9/26	2/16
P6	x	x	x	x	x	X	X
P7	11/30	32/100	5/18	0/26	0/14	11/26	16/16

Table 3. Evaluation of cognitive functions

Patient	Attention	Memory	Executive functions	Thinking (bradypsychism)	Visuospatial abilities
P1	+	-	+	+	-
P2	-	-	x	+	+
P3	+	+	x	+	x
P4	+	x	+	-	+
P5	+	+	+	+	+
P6	+	+	+	+	-
P7	+	x	+	+	-

Results

From table 1 (Tab. 1), more frequent occurrence of ischemic stroke (4/7 people) compared with haemorrhagic stroke (2/7 people) can be deduced. We can also observe the presence of expressive phatic disorder almost in all clients (6/7).

Table 2 (Tab. 2) shows the results of Addenbrooke´s cognitive test. In principle, this is a neuropsychological screening battery applicable in the early detection of cognitive disorders and for identifying the level of cognitive functions (Mathuranath et al., 2007; Raisová et al., 2011). The presented results might indicate the presence of dementia in 2 out of 7 patients. With respect to the presence of aphasia, this conclusion is not correct. In our opinion, the application of the Addenbrooke´s cognitive test is not objective and relevant for evaluating cognitive functions in people with aphasia:

- 3/7 clients were not able to conduct the test,
- 2/7 clients fall in the category of moderate dementia,
- 1/7 clients fall in the category of mild dementia,
- 1/7 client is within the norms.

The results do not correspond with the reality and rather indicate the significance of the phatic disorder because almost all sub-tests require verbal production or undisturbed understanding of speech.

Table 3 (Tab. 3) shows the presence of cognitive deficits in aphasia in domains other than linguistic. Disorder of attention and thinking occur in almost all clients (6/7). Executive functions were disturbed in 5/7 clients, in 2/7 clients it was not possible to express a clear opinion on these functions. Disturbance in the area of memory and visuospatial abilities seems to be more varied.

Clients P1 and P7 suffered haemorrhagic stroke with almost identical localization (left temporal and frontal-temporal). We can observe the comparable distribution of disorders of cognitive functions (Tab. 4). Only these two clients achieved 16/16 points in the domain "visuospatial abilities" in the ACER test.

Table 4. Distribution of disorders of cognitive functions in haemorrhagic stroke

Patient	Attention	Memory	Executive function	Thinking (bradypsychism)	Visuospatial abilities
P1	+	-	+	+	-
P7	+	x	+	+	-

Responses to the research questions:

1) Do you observe presence of non-linguistic disorders of cognitive functions?

In selected people with aphasia, disorders of non-linguistic cognitive functions are detected in more than one domain.

2) What is the frequency of occurrence of individual non-linguistic disorders of cognitive functions?

Most frequently occurring, in selected people with aphasia, were the disorders of attention and thinking (6/7 people). Disorders of executive

functions were present in 5/7 people. Disorders of memory and visuospatial abilities were monitored in 3/7 people with aphasia.

Conclusion

The fact that there is an indisputable correlation between cognition and language requires including all cognitive abilities of a patient in the process of rehabilitation following cerebral damage. Speech therapy of people with aphasia should incorporate also therapy of non-linguistic cognitive functions. Therefore, interdisciplinary cooperation with professionals from psychology is considered as essential. The results of psychological examination in people with aphasia can significantly influence the effectiveness of speech-therapeutic intervention if we take into consideration the findings about the impact of disorders of cognitive functions on the therapy of aphasia:

− Disorder of attention can result in disturbance in data processing regardless.
− In speech therapy, it is possible to apply all types of teaching methods supported by memory processes.
− Visuospatial abilities are blended in the entire intervention (recognition of pictures, letters, etc.).
− Communication ability in every-day unpredictable situations requires flexible solution to a problem, i.e. undisturbed executive functions.

The results of speech-therapeutic examination can, on the contrary, influence the compilation of a plan for cognitive rehabilitation of people with aphasia in order to maintain consistency in practising cognitive functions, and thus contribute to the rehabilitation of the most damaged phatic function.

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RUNAS UN VALODAS ATTĪSTĪBAS MULTISTRUKTUĀLAIS MODELIS VESELUMA PIEEJAS ASPEKTĀ

The Multi-Structural Model of Speech and Language Development in the Aspect of Holistic Approach

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Abstract. *The article analyses the theories on the child's language acquisition and development process (psychological nativism, cognitivism, interactionism, bihaviorism), and it is concluded that the various models of language acquisition raised in these theories depend on language development stage and its representative factors - the dominant neural processes, language acquisition strategies and the results in a context of language development. Speech and language development and their interconnection can be viewed inthe aspect of holistic approach - how it is affected by diverse exogenous and endogenous factors, the development of language basis' functions and the varied mutual interaction of all the factors mentioned above. There is the multi-structural language development model diverse in each individual case and thus defining the individual character of child's language development process and language disorder adjustment.*

Keywords: *language development, language development theories, language development stages, holistic approach, the multi-structural model of speech and language development.*

Ievads
Introduction

Raksta mērķis ir analizēt bērnu runas un valodas attīstības teorijas, zinātnieku atziņas psiholongvistikas, neirolingvistiskas, ontolingvistikas un logopēdijas jomās par runas un valodas attīstības priekšnosacījumiem, to savstarpējo mijiedarbību, kā arī par valodas attīstības stadiju pēctecību un to raksturojošiem faktoriem – dominējošajiem neirālajiem procesiem, valodas apguves stratēģijām un rezultātiem valodas attīstības kontekstā.

Pētījuma rezultāts: izstrādāts un pamatots runas un valodas attīstības multistrukturālais modelis veseluma pieejas aspektā, kā arī apkopota un shematiski atspoguļota runas un valodas attīstības teoriju saistība ar valodas attīstības stadiju pēctecību un to raksturojošajiem faktoriem.

Pētījuma metode: zinātniskās literatūras izpēte un analīze.

Runa un valoda kā funkcionāls sistēmisks veselums
The speech and language as a functional systemic integrity

Valoda ir izveidojusies un turpina attīstīties cilvēces kultūrvēsturiskās attīstības procesa un sabiedrības vajadzību realizācijas ietekmē. Tā galvenokārt tiek lietota divās sociālās sfērās:

1) individuālās organizēšanas sfērā;
2) sociālās organizēšanas sfērā (Freimane, 1993).

Individuālās organizēšanas sfērā valoda funkcionē kā domāšanas un domu atspoguļošanas līdzeklis. Tā ir valodas reprezentatīvā funkcija, kas veido valodas materiālo formu, lai izzinātu un vispārinātu objektīvu īstenību. Šajā procesā subjekts ir valodas producētājs, bet objekts – īstenība, objektīvā realitāte. Sociālās organizēšanas sfērā tiek iesaistīts arī adresāts un var runāt par citu valodas pamatfunkciju – saziņas līdzekļa un sociālās prakses organizēšanas funkciju. Saziņas jeb komunikatīvā funkcija ir svarīgākā valodas funkcija sabiedrībā (Freimane, 1993).

Valoda pastāv divās formās – kā kods (nosacīta zīmju sistēma) un kā runa (koda realizācijas iespējas). Katrs runas veids (mutiskā, rakstiskā, žestu) satur savas komunikatīvās un ekspresīvās īpašības. Dažādas ir šo runas veidu „vārdnīcas", kā arī stilistika, skaidrojuma plašums un izteiksmes līdzekļi. Runu no valodas nav iespējams nodalīt. Runa ir savdabīga forma, kā cilvēks izzina priekšmetus un īstenības parādības, tā ir līdzeklis cilvēku saskarsmei vienam ar otru. Bērna runas funkcijas (komunikācijas, socializācijas, jēdzienu šķirkļa, pieredzes jēdzieniskā funkcija) ir cieši saistītas ar bērna darbības veidu un atbilst viņa specifiskajām emocionālajām un kognitīvajām vajadzībām katrā attīstības posmā.

Tāpat kā runas un valodas funkcijas, tā arī bērna runas un valodas attīstības procesi ir nedalāmi – tie attīstās līdztekus un savstarpēji mijiedarbojas. Vācijā un ASV parasti lieto jēdzienu „valodas attīstība" (*Sprachentwicklung, language development*) ar to saprotot bērna individuālo runas un valodas attīstības procesu veselumā (Suchodoletz, 2004; Szagun, 2006; Wirth, 2000), savukārt Krievijā tiek lietots jēdziens „runas attīstība" (*речевое развитие*), ar to saprotot ne tikai indivīda runas kā procesa attīstību, bet arī indivīda valodas sistēmas attīstību (Волкова, Лалаева & Мастюкова, 1989; Жукова, Мастюкова & Филичева, 2005). Semantiski abi jēdzieni ir ar atšķirīgu nozīmi, taču runas un valodas apguves procesa kontekstā parasti tie tiek lietoti ar vienu un to pašu saturisko nozīmi.

Raksta autore, lietojot jēdzienu „valodas attīstība", ar to saprot bērna runas un valodas attīstību sistēmiskā veselumā, kurā ir ietverta gan runas procesa, gan valodas lingvistisko struktūru attīstība aktīvas runas un valodas darbības rezultātā. Šāda pieeja ir balstīta uz valodas attīstības norises izpratni trīs dimensijās:

- sistēmiskumā(fonoloģija, morfoloģija, sintakse, semantika, leksika);

- procesā (valodas sapratne un produkcija dekodēšanas un kodēšanas procesā);
- darbībā (valodas nozīmes sapratne un informācijas nodošana runājot).

Valodas attīstības procesā bērns apgūst valodu trīs dažādu kompetenču līmenī: lingvistisko kompetenci (valodas kompetenci), fonētisko un psiholingvistisko kompetenci (runas kompetenci), lietošanas kompetenci (komunikatīvo kompetenci) (Braun, 2006). Kaut arī valoda ir izteikti sarežģīta sistēma ar daudzveidīgām tās funkcijām, tomēr uz pasaules nav tādas valodas, kuras sistēmu pilnībā un bez grūtībām nespētu apgūt vesels bērns pirmajos dzīves trīs līdz piecos gados.

Bērna valodas attīstības teoriju analīze
The analysis of child's language development its precondition theories

ASV, Eiropas un Krievijas zinātnieki dažādos laika periodos ir attīstījuši dažādas valodas apguves un attīstības teorijas. Mūsdienās ir izkristalizējušās četras galvenās teorijas par bērna valodas apguves un attīstības procesu - natīvisms, kognitīvisms (konstruktīvisms), interakcionisms un biheiviorisms.

Par natīvisma teorijas pamatlicēju uzskata N.Čomski, kas pagājušā gadsimta 60.gados pētīja valodas sintakses struktūru un konstatēja, ka katrs runājošs indivīds ir spējīgs producēt un saprast ļoti lielu daudzumu teikumu, kā arī tos daudzveidīgi izmainīt reproducējot. Tā kā pirmsskolas vecuma bērnam neviens nemāca dzimtās valodas gramatikas likumus, tad tika izvirzīta hipotēze, ka valoda attīstās no iedzimtām zināšanām par valodas sistēmu un citas bērna spējas šajā procesā nav nepieciešamas – valodas attīstība ir kā izolēts kognitīvas dabas fenomens, kas neatrodas tiešā mijiedarbībā ar citām bērna kognitīvās sfēras struktūrām (Chomsky, 1973). Bērnam nav jāapgūst gramatikas likumi, bet gan tikai jāprot izvēlēties vajadzīgo valodas sistēmas struktūru, jo valodas principi un lietojums ir jau ģenētiski ieprogrammēti (*language acquisition device*). Ē.Lennebergs savās atziņās tomēr atzīmē, ka zināma loma valodas apguves procesā ir apkārtējās vides ietekmei. Ģenētiski ieprogrammēti ir tikai valodas kategoriju veidošanās procesi, bet apkārtējā valodas vide un organisma fizioloģiskā nobriešana ir priekšnosacījumi valodas apguvei (Lenneberg, 1967). Uz natīvisma teorijas balstītajos pētījumos ir veikta lingvistiska valodas sistēmas struktūras izpēte sintaktiskajā līmenī periodā, kad bērna valoda jau ir izveidojusies (Zollinger, 1997).

Kognitīvisma teorija attīstījās pagājušā gadsimta 70.gados kā pretstatījums natīvisma teorijai un ir balstīta uz Ž.Piažē izstrādāto kognitīvās attīstības teoriju. Pēc šī virziena pārstāvju atziņām, bērna vispārējā un valodas attīstība notiek pakāpeniski, bāzējoties uz iepriekš apgūto – sākot no pirmajām kustībām un sensorajiem iespaidiem līdz abstraktai domāšanai. Ir secināts, ka valodas apguves procesa mehānisms ne tikai seko kognitīvās attīstības vispārējiem mehānismiem – asimilācijai, akomodācijai, ģeneralizācijai un abstrakcijai, bet ir

arī lielā mērā atkarīgs no šo kognitīvo procesu attīstības (Пиаже, 1994). Pēc Ž.Piažē teorijas bērna kognitīvo attīstību valodas lietojums būtiski neietekmē, bet kognitīvai attīstībai ir nozīmīga loma valodas attīstībā. Bērna kognitīvās attīstības teorijas kontekstā netiek izvērtēta sociālo un emocionālo faktoru loma. Kognitīvisma teorijas piekritēji, balstoties uz pieņēmumu, ka valoda ir realitātes reprezentācija, pārsvarā pētījumus veica valodas semantiskajā līmenī periodā, kad bērna valodā parādās pirmie vārdi, vārdu savienojumi (Zollinger, 1997).

Interakcionisma teorija balstās uz pieaugušā runas izpausmju novērojumiem saskarsmē ar bērniem. Mātes runa leksiski morfoloģiskajā līmenī būtiski atšķiras no pieaugušā runas un tā ir pielāgota bērna attīstības līmenim. Mātes intuitīvi vienkāršotā valodas sistēma būtiski atvieglo bērna valodas apguves procesu, savukārt vārda un teikuma daļu atkārtošana ar īsu laika atstarpi nodrošina bērnam iespēju atkārtoti uztvert un pārstrādāt dzirdēto informāciju. Pēc Dž.Brunera uzskatiem, bērna valoda veidojas uz pirmsvalodas komunikācijas bāzes. Mātes un bērna saskarsme, kopīgās darbības agrīnajā attīstības periodā ir priekšnoteikums sekmīgai valodas attīstībai ne tikai leksiski semantiskajā aspektā, bet arī morfoloģijas un sintakses apguves kontekstā (Bruner, 1987). Uz interakcionisma teorijas balstītajos pētījumos ir veikta valodas komunikatīvā aspekta izpēte pragmatiskajā līmenī. Pētījumi pārsvarā ir saistīti ar bērnu valodas attīstību pirmsvalodas periodā (Wirth, 2000).

Biheiviorisma piekritēji izvirza hipotēzi, ka bērna valodas pirmās struktūras attīstās imitējot pieaugušā runu, tas ir, valoda attīstās caur apkārtējās vides iespaidiem mācību procesā. Pēc B.Skinnera domām, tikai apkārtējās pasaules stimuli izsauc runas un citas reakcijas – iedzimta ir tikai universāla spēja mācīties un bērns visu apgūst mācoties. Valodas struktūra nav ģenētiski ieprogrammēta, bet gan tiek apgūta pateicoties spējām imitēt pieaugušo runu – pieaugušā runas paraugs vai nu veicina, vai arī kavē sekmīgu valodas apguvi (Skinner, 1957). Dž.Maknamara uzskata, ka valodas izpausmes atspoguļo domāšanas procesu un bērns valodu apgūst caur nozīmes izpratni. Bērns „nojauš", ko runātājs domā, un pakāpeniski apgūst precīzu vārdu nozīmi. Valodas apguves process notiek kompleksi ar priekšmeta pielietojuma, darbības apguvi (Macnamara, 1972). Biheiviorisma piekritēju atziņas sasaucas ar interakcionisma teoriju un atsevišķu autoru darbos (Zollinger, 1997; Keilmann et al., 2009) tās netiek izdalītas kā valodas apguves teoriju virziens.

G.Virts uzskata, ka neviena no minētajām teorijām pilnībā neatklāj valodas apguves procesu, taču tajā pašā laikā katra no tām ir pareiza noteiktā kontekstā (Wirth, 2000). B.Collingere (1997), analizējot natīvisma, kognitīvisma un interakcionisma teorijas no psiholingvistiskā aspekta, izvirza hipotēzi, ka šajās teorijās izvirzītie valodas apguves dažādie modeļi ir atkarīgi no valodas attīstības stadijas un vispārīgās attīstības procesiem:
1. valodas attīstības stadijā dominē interakcijas faktors;
2. valodas attīstības stadijā dominē kognitīvie procesi;
3. valodas attīstības stadijā dominē neirolingvistiskie procesi.

No iepriekš minētā izriet, ka katrā valodas attīstības stadijā prevalē viena vai otra valodas apguves teorija. Pirmajā valodas attīstības stadijā noteicošās ir interakcionisma, otrajā valodas attīstības stadijā kognitīvisma, bet trešajā valodas attīstības stadijā – natīvisma teorijas izvirzītās hipotēzes.

Valodas attīstība neirolingvistiskajā pieejā (Locke, 1997) ir skatīta noteiktā pēctecībā un tiek izdalītas trīs valodas attīstības sensitīvās fāzes:

1. fāze – attīstās izpratne par prosodiju, tiek apgūts balss intonatīvais lietojums (vecumā ap 0 – 6 mēneši);

2. fāze – holistiskā valodas sistēmas apguves stratēģija (vecumā ap 6 – 20 mēneši);

3. fāze – analītiskā valodas sistēmas apguves stratēģija (vecumā ap 20 – 36 mēneši).

Noteiktu smadzeņu reģionu attīstība un atbilstoši neirālie procesi nosaka katru no attīstības fāzēm un to norisi noteiktā laika periodā, kas ir priekšnosacījums nākamās fāzes sasniegšanai. Otrajā valodas attīstības fāzē notiek vārdu krājuma apguve un ir labās puslodes dominante, savukārt trešajā fāzē notiek valodas gramatikas apguve un pāreja uz kreisās puslodes dominanti. Ja pārejas process no otrās fāzes uz trešo ir traucēts, tad tas var izraisīt labās smadzeņu puslodes kompensatoros mehānismus. Neirolingvistiskā pieeja, kas ir balstīta uz neirofizioloģijas zinātnes pētījumiem, pamato centrālās nervu sistēmas (CNS) struktūras un neirālo procesu nozīmi valodas apguvē, kā arī agrīnās korekcijas nepieciešamību valodas traucējumu gadījumos.

Neirolingvistiskā un psiholingvistiskā pieeja izskaidro valodas sistēmas attīstību kā secīgu un savstarpēji saistītu attīstības stadiju (sensitīvo fāžu) rezultātu – tās viena otru papildina un padziļina izpratni par valodas attīstības kopsakarībām. Analizējot neirolingvistisko un psiholingvistisko pieeju no valodas attīstības teoriju aspekta, var secināt, ka dažādu valodas attīstības teoriju rašanās ir saistīta ar pētījumiem konkrētā valodas attīstības stadijā vai sensitīvajā fāzē. 1.attēlā autore ir uzskatāmi apkopojusi runas un valodas attīstības teoriju saistību ar valodas attīstības stadiju pēctecību un to raksturojošajiem faktoriem.

G.Scaguna kā valodas apguves un attīstības priekšnosacījumu pamatojumu izmanto epiģenētisko pieeju – valodas attīstība tiek izskaidrota ar ģenētiskās predispozīcijas un apkārtējās vides jeb endogēno un eksogēno faktoru mijiedarbību (Szagun, 2006). Bērns valodu apgūst, pilnveido un lieto komunikācijas kontekstā. Liela nozīme ir mācīšanās procesam – bērns dzirdētās valodas likumsakarības pakāpeniski mācās pielietot savā valodā un to pilnveido (Keilmann et al., 2009). G.Scagunas epiģenētiskā pieeja ir raksturojama kā multifaktorāla un tā apvieno natīvisma, interakcionisma un biheiviorisma teoriju atziņas.

1. valodas attīstības stadija jeb fāze (0 - 6 mēn.) → interakcionisma teorija		
dominē interakcijas process	prosodijas apguve	reflektējošā valodas apguves stratēģija

2. valodas attīstības stadija jeb fāze (6 - 20 mēn.) → kognitīvisma teorija		
dominē kognitīvie procesi	vārdu krājuma apguve	holistiskā valodas apguves stratēģija

3. valodas attīstības stadija jeb fāze (20 - 36 mēn.) → natīvisma teorija		
dominē neirolingvistiskie procesi	gramatikas kopsakarību apguve	analītiskā valodas apguves stratēģija

1.attēls. Runas un valodas attīstības teoriju saistība ar valodas attīstības stadiju pēctecību un to raksturojošajiem faktoriem
Figure 1. The connection between language development theories and language development phase's succession and factors characterizing them

Krievijas medicīnas, logopēdijas, psiholoģijas un pedagoģijas jomu zinātnieku (Волкова, Лалаева & Мастюкова, 1989; Поваляева, 2010; Хватцев, 1959 u.c.) atziņās par valodas apguves procesu pārsvarā dominē multifaktorālā pieeja ar uzsvaru uz neiropsiholoģisko un sociāli – psiholoģisko faktoru nozīmi. Tiek uzskatīts, ka valoda veidojas ontoģenēzes procesā paralēli bērna fiziskajai, garīgajai un sociālai attīstībai, kļūstot par bērna vispārējās attīstības rādītāju (Сохин, 1979). Šādu pieeju pamato Ļ.Vigotska teorija par runas un domāšanas attīstību, to savstarpējo un dinamisko mijiedarbību. Valodas un domāšanas procesu sākotnējā attīstība ir separāta un neatkarīga, taču tad to attīstība saplūst, kā rezultātā valodas sapratne un produkcija ne tikai ietekmē domāšanu, bet arī izmaina visu garīgo funkciju struktūru (Vigotskis, 2002).

Lingvistikas jomas pētniece S.Ceitlina bērna valodas apguvi traktē no konstruktīvisma pozīcijām – bērns pats veido savu valodas sistēmu balstoties uz pieaugošo runas paraugu (Цейтлин, 2000). Tomēr pēdējos gados arvien vairāk tiek uzsvērta neiroloģijas, psiholoģijas, lingvistikas, defektoloģijas (logopēdijas) un pedagoģijas zinātņu starpdisciplināru pētījumu nepieciešamība valodas apguves procesa izpētē (Цейтлин, 2006), kā arī valodas attīstības traucējumu patoģenēzes izpratnes un korekcijas realizācijas kontekstā (Поваляева, 2010).

D.Markus (2003, 2007) ir veikusi valodas apguves pētījumus ontolingvistiskā aspektā un norāda, ka bērna valoda attīstās „kultūras pasaulē", kas bērnam ir pieejama konkrētas apkārtējās vides kontekstā. Līdz ar to valodas apguves procesā ir individuālas atšķirības, kas saskatāmas gan radošuma, gan izmantoto valodas apguves paņēmienu izpausmēs. Tās atspoguļo bērna lingvistisko un tēlaino domāšanu, pasaules uztveri un izpratni (Markus, 2003, 2007). D.Markus pētījums ir specifisks lingvistisks pētījums un to nevar tieši

saistīt ar kādu no valodas apguves teorijām, kaut arī tajā atspoguļojas dažādu virzienu (kognitīvisma, biheiviorisma, interakcionisma) atziņas.

Runas un valodas attīstības multistrukturālais modelis veseluma pieejas aspektā
The multi-structural model of speech and language development in the aspect of holistic approach

Analizējot valodas attīstības teorijas un dažādu autoru atziņas, ir jāsecina, ka katras teorijas virziena pārstāvjiem ir atšķirīgs uzskats par bērna valodas attīstību un tās priekšnosacījumiem, jo ir pētīti tādi atšķirīgi valodas sistēmas līmeņi kā pragmatika, semantika vai sintakse dažādās valodas attīstības stadijās – pirmsvalodas, viena vārda, frāzes vai teikuma stadijā. Atsevišķos gadījumos var konstatēt dažādu teoriju saplūšanu, piemēram Dž.Macamara atziņas var vērtēt gan kā biheiviorismu (Wirth, 2000), gan kā interakcionismu (Keilmann et al., 2009).

20. gadsimta sākumā valodas apguves procesa izpētē dominē psiholoģiskā pieeja, kas daļēji izskaidrojama ar Ž.Piažē un Ļ.Vigotska teoriju ietekmi un psiholoģijas kā zinātnes attīstību. 20. gadsimta otrajā pusē ir daudz pētījumu psiholingvistikas jomā. Tie pārsvarā ir veikti kādas atsevišķas valodas sistēmas struktūras līmenī konkrēta attīstības periodā, neskatot valodas attīstību kā veselumu. Savukārt 20. gadsimta beigās un 21. gadsimta sākumā mainās izpratne par valodas apguves procesa un to ietekmējošo faktoru kopsakarībām. Pētījumiem ir starpdisciplināras un multifaktorālās pieejas raksturs kā rezultātā attīstās valodas attīstības teorija, kas balstīta uz veseluma pieejas konceptu (Eichholzer, 2010; Gronfeldt, 1997; Kannengieser, 2009; Weigl & Reddemann-Tschaikner, 2009; Zollinger, 1997 u.c.).

Balstoties uz valodas attīstības teoriju un zinātnisko pētījumu teorētisko analīzi, ir apzināti galvenie valodas attīstības priekšnosacījumi un veikts to vispārīgs apkopojums septiņās pamatgrupās:

1) ģenētiskā predispozīcija, iedzimtie un iegūtie traucējumi (bioloģiskie faktori, kas ietekmē bērna veselību un attīstību);
2) psihosomatiskā veselība, fizioloģiskā attīstība;
3) sensomotorā, kognitīvā attīstība;
4) agrīnā interakcija, saskarsme;
5) sociokulturālā vide (ģimene, sabiedrība, kultūras vide);
6) sociālekonomiskie apstākļi (mātes un bērna veselības aprūpes, izglītības, sociālo garantiju un palīdzības nodrošinājums);
7) apmācība, ko tieši un netieši ietekmē sociāli kulturālā vide un sociālekonomiskie apstākļi ģimenē un valstī.

Var secināt, ka bērna valodas attīstību ietekmē, nevis kāds konkrēts faktors vai vairāki atsevišķi faktori, bet gan visu faktoru kopums. Valodas attīstību ietekmējošie faktori atrodas daudzveidīgā savstarpējā mijiedarbībā. Tie viens

otru tieši vai pastarpināti ietekmē pozitīvā (attīstot, pilnveidojot, papildinot, kompensējot...) vai negatīvā aspektā (traucējot, izraisot, bremzējot, pastiprinot...). Priekšnosacījumu mijiedarbības modelis katrā individuālā gadījumā ir atšķirīgs un tādējādi nosaka bērna valodas attīstības procesa individuālo raksturu, vienreizīgumu.

Balstoties uz veikto priekšnosacījumu apkopojumu, autore ir izstrādājusi runas un valodas attīstības multistrukturālo modeli, kas balstīts uz valodas attīstības izpratni veseluma pieejas aspektā (sk. 2.attēlu).
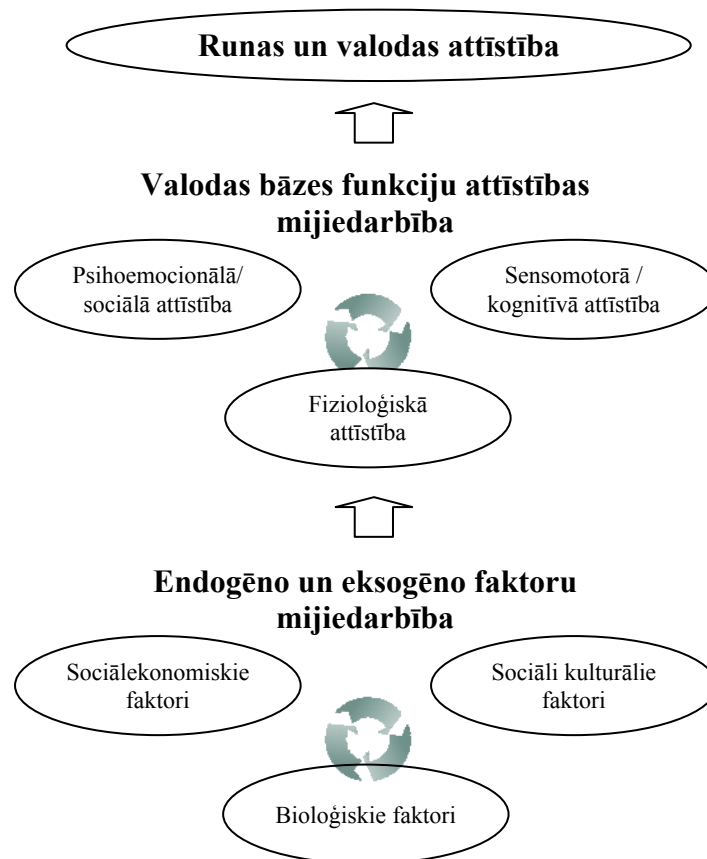
2.attēls. Runas un valodas attīstības multistrukturālais modelis
Figure 2. The multi-structural model of speech and language development

Valodas attīstības multistrukturālais modelis sevī ietver trīs primāros endogēno un eksogēno faktoru komponentus: bioloģiskos faktorus, sociāli kulturālos faktorus un sociālekonomiskos faktorus. Šo primāro komponentu savstarpējās mijiedarbības rezultātā tiek ietekmēti bērna vispārējās attīstības komponenti jeb bērna valodas attīstības bāzes funkcijas: fizioloģiskā attīstība, sensomotorā/ kognitīvā attīstība un psihoemocionālā/ sociālās attīstība.

Abu līmeņu komponenti savstarpēji viens otru ietekmē un mijiedarbojas gan horizontālā, gan vertikālā virzienā, tiešā vai netiešā veidā ietekmējot bērna valodas attīstību. Valodas attīstība ir kā rezultāts atsevišķu strukturālu komponentu mijiedarbības kopumam. Endogēno un eksogēno faktoru

ietekmējamība ir daļēji un vienmēr ir skatāms kā laikietilpīgs process, ko nosaka gan sabiedrības sociāli kulturālās attieksmes, gan valsts sociālekonomiskais stāvoklis. Savukārt bērna vispārējās attīstības komponentus var ietekmēt jebkurā attīstības stadijā un šī ietekme ir tūlītējs un nepārtraukts process. Pēc divarpus, trīs gadu vecuma var novērot valodas attīstības atgriezenisko saikni uz bērna kognitīvo un sociālo attīstību, savukārt pieaugušo vecumā – uz indivīda sociālekonomisko un sociāli kulturālo statusu. Šo atgriezenisko saikni apstiprina ārvalstu zinātnieku longitudinālie pētījumi par bērnu valodas attīstības traucējumu ietekmi uz dzīves kvalitāti nākotnē. Ja runas un valodas attīstības traucējumi netiek savlaicīgi diagnosticēti un laboti, tad traucējumu seku parādības ietekmē ne tikai konkrētā indivīda dzīves kvalitāti, bet tiek radīti būtiski zaudējumi sabiedrībai un tautsaimniecībai kopumā (Ruben, 2000; Suchodoletz, 2002, 2004; Weinert, 2002 u.c.).

Mūsdienās runas un valodas traucējumu struktūra kļūst arvien komplicētāka. Bieži vien runas vai valodas traucējums ir nevis kā vadošais (primārais) simptoms, bet gan kā saslimšanas vai specifiska psiholoģiskā stāvokļa sastāvdaļa un ir uzskatāms kā sekundāra parādība (Kannengieser, 2009; Keilmann et al., 2009; Wirth, 2000; Zollinger, 1997 u.c.). Līdz ar to diagnosticējot un labojot runas un valodas traucējumus, bērna valoda ir jāskata veselumā ar citām attīstības jomām, ievērojot runas un valodas attīstības multistrukturālo modeli. Pat tad, ja izrunas traucējums skar vienu skaņu grupu vai kādu atsevišķu skaņu, logopēda darbs neaprobežojas tikai ar traucētās skaņas izrunas iemācīšanu, bet gan ar visas valodas sistēmas un valodas bāzes funkciju attīstības veicināšanu, kas vēlākā posmā nodrošina sekmīgu rakstu runas apguvi. Veseluma jeb kompleksā (integratīvā) pieeja ir nozīmīga visos runas un valodas traucējumu gadījumos, bet it īpaši, ja ir diagnosticēti sarežģītas struktūras traucējumi ar kompleksiem traucējumu izcelsmes cēloņiem.

Secinājumi
Conclusions

Dažādu valodas attīstības teorijas virziena pārstāvjiem ir atšķirīgs uzskats par bērna valodas attīstību un tās priekšnosacījumiem, jo ir pētītas atšķirīgas valodas sistēmas struktūras – pragmatika, leksika un semantika vai morfoloģija un sintakse dažādās valodas attīstības stadijās. Bērna runas un valodas attīstību nevar uzskatīt kā izolētu procesu kādā atsevišķā vecumposmā – tā ir jāskata sistēmiskā un pēctecīgā veselumā, kurā ir ietverta gan runas procesa un valodas lingvistisko struktūru attīstība, gan valodas bāzes funkciju attīstība eksogēno un endogēno faktoru ietekmē.

Kopumā valodas attīstības procesu var raksturot kā multifaktorālu modeli, kurā bērna valodas attīstību ietekmē, nevis kāds viens konkrēts faktors vai vairāki atsevišķi faktori, bet gan visu faktoru kopums, kas atrodas daudzveidīgā un nepārtrauktā savstarpējā mijiedarbībā. Veicinot valodas attīstību vai

diagnosticējot un labojot runas un valodas traucējumus, bērna runa un valoda ir jāskata veselumā ar citām attīstības jomām un attīstību ietekmējošajiem faktoriem. Ir jānoskaidro katra atsevišķā gadījuma runas un valodas attīstības multistrukturālā modeļa īpatnības, lai konstatētu visus iespējamos traucējuma cēloņus, to iespējamo mijiedarbību un izstrādātu atbilstošu korekcijas un attīstības plānu. Endogēno un eksogēno faktoru ietekmējamība ir daļēja un ir laikietilpīgs process, ko nosaka gan sabiedrības sociāli kulturālās attieksmes, gan valsts sociālekonomiskais stāvoklis, bet savukārt attīstības komponenti nepārtraukti transformējas no vienas attīstības stadijas nākamajā.

Summary

The representatives of direction of various language development theories have a different opinion about the child's language development and its preconditions for there have been studies of different language system structures (pragmatic, lexical semantics or morphologically syntactical) in diverse stages of languagedevelopment. So it can be concluded that the child's speech and language development cannot be viewed as an isolated process in an individual age group - it has to be viewed in systemic and successive integrity including both the development of speech processes and language linguistic structures,the development oflanguage bases' functions andthe effect of exogenous and endogenous factors.

Language development process can be described as a multifactorial model when the child's language development isn'taffected by any particular factor or several individual factors, but there is an influence of a whole set of factors interacting diversified and steadily, taking into account the characterizing factors of each stage of language development: - the prevailing neural processes, language acquisition strategies and the expected results in the context of language development.

Promoting the language development, diagnosing and correcting speech and language disorders, the child's speech and language has to be viewed in wholeness together with other development fields, with the development consecutiveness and the factors influencing the development, considering the multi-structural model ofspeech and language development. An amenability of endogenous and exogenous factors is partial and always has been viewed the time-consuming defined by both the socio-cultural attitude of society and the national socio-economic situation. Whereasthe development components or a child's physiological and functional development can be affected immediately in any stage of development.

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ФЕНОМЕН ПОЖИЗНЕННОГО ОБРАЗОВАНИЯ ИНДИВИДОВ С ПРОБЛЕМАМИ ЗРЕНИЯ В КОНТЕКСТЕ ИНКЛЮЗИИ

The Phenomenon of Lifelong Learningindividuals with Visual Impairments in the Context of Inclusion

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Abstract. *The aim of this paper titled „The Phenomenon of lifelong learning individuals with visual impairments in the context of inclusion „is to acquaint the reader with the basic information that relate to aspects of inclusion and lifelong education of individuals with visual impairments, to provide an overview of basic documents and European standards that relate to the topic and present the main aspects that fundamentally influence the process of education for persons with visual disabilities. „This paper is dedicated to project the impact of subjective perception of disability / presence of chronic illness and the concept of health awareness and literacy (IGA_PdF_2015_003)".*

Keywords: Lifelong learning; visual impairment.

Введение в проблематику
Introduction to the topic

С термином „инклюзия" в среднеевропейском контексте встречаемся все чаще в связи с разными меньшинствами. Речь идет прежде всего о меньшинствах национальных, религиозных, языковых или этнических. Нельзя, однако, не обратить внимание также на индивидов с проблемами со здоровьем, в случае которых инклюзия связана прежде всего с областью образования и процессом социализации. Люди с приведенными проблемами в результате состояния своего здоровья часто попадают на периферию общества, в невыгодное положение при доступе к новым возможностям – несмотря на то, что Хартия прав и свобод, составная часть нашего общества, в своей первой статье говорит о свободе и равенстве человека в его правах и достоинстве.

Процесс эдукации этих индивидов является с разных точек зрения очень специфической областью. Процесс образования сам по себе представляет собой для учащихся с проблемами зрения возможность естественного включения и соединения с коллективом класса. Пожизненное образование в значительной мере повышает вероятность достижения высшей степени образования. Достижение такой степени образования потом помогает найти себе место на открытом рынке труда. В

результате такие люди попадают в рамках своей работы в разнообразные общества людей. Весь этот процесс в свою очередь способствует инклюзии и достижения самореализации приведенных индивидов.

Характеристика ключевых понятий
Characteristics of key concepts

Одним из ключевых понятий, с которым авторы работают в статье, и которое необходимо определить, является понятие **проблема зрения.** Одной из дисциплин специальной педагогики, которая занимается общим развитием индивидов, является тифлопедия или специальная педагогика лиц с проблемами зрения. Лудикова (Ludíková, Souralová, 2006, с. 25) определяет проблему зрения следующим образом: „В понимании тифлопедии под индивидом с проблемами зрения понимается такое лицо, которое после оптимальной (напр. медикаментозной, хирургической, оптической) коррекции своей проблемы зрения продолжает иметь проблемы при зрительном осознании и его обработке в повседневной жизни".

Следующим ключевым понятием является понятие **инклюзия.** Понятие восходит к латинскому выражениюinclusio (включение) и представляет собой принятие или внедрение в определенное целое. Инклюзивное образование стало очень частым выражением на конференциях и в области национальной политики образования во всем мире. Но чтооно обозначает? Речь идет о слиянии специальной группы учащихся с проблемами со здоровьем и специфическими потребностями в области образования с группой интактных студентов в одно целое. (Booth, 2005)

Пожизненное образование можно определить как обучение, которое можно наблюдать на протяжении всей жизни: обучение, которое является флексибильным, разнообразным и доступным в разное время и на разных местах. Пожизненное образование пересекается с разными областями, поддерживает образование вне объязательного посещения школы на протяжении всей жизни включая в зрелом возрасте (т.е. включая период после завершения объязательного образования). (Delors, 1996)

Пожизненное образование
Lifelong learning

Уровни достигнутого образования в последнее время придается большое значение. В этом месте нам хотелось бы привести определение пожизненного образования из Педагогического словаря (Průcha, Walterová, Mareš, 2001, с. 33), где, по нашему мнению, этот процесс очень удачно описан. „В последние десятилетия в полилике образования в общемировом мериле продвигается концепция того, что люди должны учиться и

образоваться на протяжении всей жизни. Речь при этом идет не о продлевании объязательного образования или расширении образовательной системы, но о принципиально новом подходе к роли образования индивидуа и целого человечества".

Пожизненное образование представляет собой также соединяющий элемент личного и общественного формирования человеческой личности в следующий направлениях:

- формализированное образование – т.е. образование в школных институциях, институтах специальной подготовки, терциарном образовании, образовании взрослых людей,
- образование в неформальной среде – на рабочем месте, в домашней среде и других специфических целых.

По словам Прухи, Вальтеровой и Мареша учащееся общество представляет собой состояние человеческой цивилизации, в которой пожизненное образование становится частью образа жизни. (Průcha, Walterová, Mareš, 2001)

Пожизненное образование лиц с проблемами зрения
Lifelong learning of visually impaired

Релевантной областью, которая может оказать сравнительно большое влияние на реализацию инклюзии в наших условиях, является процесс пожизненного образования лиц со специфическими потребностями. Для приведенных лиц пожизненное образование представляет собой значительную предпосылку не только для приобретения опыта, который может сделать их жизнь в разных аспектах более качественной, но, прежде всего, возможность сохранить уже приобретенные знания и способности, которые они приобрели нередко с большим усилием. Сам процесс образования дает индивидам с проблемами зрения возможность стать естественным путем частью школного класса или учебной группы. Такой индивидум в процессе пожизненного образования становится неотъемлемой частью и полноценным членом группы здоровых людей, что позволяет ему прожить нормализацию гандикапа.

Условия пожизненного образования инвалидов
Conditions for lifelong learning for persons with visual disabilities

Актуальным общемировым трендом в области социализации и образования является направление к инклюзии. Несмотря на то мы вынуждены констатировать, что на территории Чешской Республики пока встречаемся только с интеграцией. Кроме того оказывается, что при попытках достижения инклюзии на территории Чехии уделяется недостаточное внимание различению детерминирующих условий, оказывающих большое влияние на успешность процесса инклюзии. Для

того, чтобы инклюзия могла проходить с как можно большим успехом, необходимо выполнить целый ряд предпосылок, которые направлены как на самих инвалидов, так и на членов доминирующего общества.

Важные документы
Important documents

Характеристика изменений в подходе к воспитанию и образованию инвалидов и равенство возможностей была разработана в нескольких документах.

Самыми важными являются „Конвенция о правах ребенка" (1989), проект ЮНЕСКО под названием *„Школа для всех"* (School for all, 1991), мысли которой принял в свои образовательные программы целый ряд стран. В Чешской Республике был по этому проекту издан методический материал (*Kurz integrace dětí se speciálními potřebami,* příručka UNESCO pro vzdělávání učitelů, Praha: Portál, 1997, букв. *Курс интеграции детей со специфическими потребностями,* пособие ЮНЕСКО для образования учителей, Прага: Портал, 1997). Следующим значительным документом являются стандарды ООН о равенстве возможностей инвалиов (1993), заключения Мировой конференции специального образования в Саламанке (1994), подчеркивающие право на образование в нормальных школах с респектом к способностям учащихся и Харта 1996 (Helios II программа). Международные отчеты и рекомендации организации ЮНЕСКО, OECD, Европейского сообщества и Европейского совета подчеркивают право каждого на участье в общем и открытом образовании. Приведенные требования закреплены в *„Национальной программе развития в Чешской Республике Белой книге"* (2001).

В рамках Европы была создана так называемая „Европейская рамка квалификаций" „The European Qualifications Framework" (английское сокращение EQF). Речь идет о референциальном средстве, которое помогает осуществлять коммуникацию между отдельными системами квалификаций в Европе и их сопоставление. Его восемь референциальный уровней описаны с точки зрения результатов образования: знаний, способностей и компетенций. Это позволит соотнести национальные системы квалификаций, национальные рамки квалификаций (имеем в виду внутригосударственные рамки квалификаций) и квалификации в Европе к уровням EQF. Студенты, выпускники, посредники при поиске работы и работодатели могут данные уровни использовать для понимания и сопоставления квалификаций, приобретенных в разных странах и разных системах образования и областях специальной подготовки для работы. Главной целью EQF для пожизненного образования является поддержка мобильности рабочей силы и доступности пожизненного образования для более широкого общества.

Заключение

Статья приносит теоретический обзор пожизненного образования индивидов с проблемами зрения в связи с инклюзивными тенденциями современного общества. Количество, но, прежде всего, качество процесса образования значительно влияет на целую палитру областей будущей жизни приведенных лиц. Нашим скромным желанием является, чтобы стремления образовательных институций направлялись к доступности как можно более высокой степени образования не только для людей с проблемами зрения, а к людям со специфическими потребностями в общем.

Summary

This contribution provides theoretical insight into the field of lifelong education of individuals with visual impairment in connection with inclusive tendencies of modern society. Quantity but also the quality of the educational process greatly determines the whole range of areas of future life for these people. It is our humble wish that the efforts of educational institutions strive to access the highest level of education not only for individuals with visual impairments, but also to people with special educational needs in general.

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DISLEKSIJAS RISKA FAKTORI PIRMSSKOLAS VECUMA BĒRNIEM

Risk Factors of Dyslexia in Pre-School Children

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Abstract. *The article is devoted to actualize early risk factors of dyslexia in pre-school children.*
There are a lot of research about dyslexia and its impact on the child/pupil's development, learning and other areas of life. Part of the research concerns the development of a child in pre-school age determining, what factors influence acquisition of reading skills and predict potential difficulties. The article is devoted to reveal early risk factors of specific reading disorder (dyslexia), touches diagnostic possibilities and states what is the role of early intervention in the development of a child. Risk factor groups are described previously, but still the practical activities are far behind the need. Risk factor groups are analyzed in this article as well as necessity for early intervention.

Keywords: dyslexia, risk factors, pre-school children.

Ievads
Introduction

Par disleksiju un tās ietekmi uz bērna/skolēna attīstību, mācību procesu un citām dzīves jomām ir samērā daudz pētījumu (Gorman, 2001; Hartas, 2006; Kauliņa, Tūbele, 2011; Swensson et al., 2003). Daļa pētījumu skar bērna attīstību pirmsskolas vecumā, nosakot, kādi faktori ietekmē lasītprasmes apguvi un prognozē iespējamās grūtības (Adams, 1995; Визель, 2005; Егоров, 2006; Кондратенко, 2005). Raksts veltīts specifisku lasīšanas traucējumu (disleksijas) agrīno riska faktoru diagnosticēšanas iespējām (Eklund, et al., 2013; Jacobson, Lundberg, 2000; Nunes, Bryant, 2009; Tubele, 2012) un tam, kāda ir savlaicīgi uzsāktas koriģējoši attīstošās darbības nozīme (Shaywitz, 2003; Ахутина, Пылаева, 2008; Иншакова, 2008). Riska faktoru grupas ir raksturotas jau daudzkārt, tomēr praktiskās iespējas ievērojami atpaliek no nepieciešamības.

Rakstā analizētas riska faktoru grupas un to atpazīšana jeb diagnostika, testēšanas nozīme un agrīnas koriģējoši attīstošās darbības nepieciešamība.

Pētījuma mērķis – analizēt teorijas par disleksijas riska faktoriem un sniegt ieskatu agrīnas diagnostikas priekšrocībās un agrīnas korekcijas iespējās pirmsskolas vecuma bērniem.

Pētīšanas metodes – zinātniskās literatūras analīze.

Disleksijas jēdziens
Concept of Dyslexia

Lasītprasme ir viena no nozīmīgākajām prasmēm, kas nosaka cilvēka dzīves kvalitāti un veiksmīgu funkcionēšanu sabiedrībā. Skolas vecumā skolēns smagi izjūt grūtības lasītprasmes apguvē kā traucējošu faktoru visā mācību procesā. Mācību programmas apguves veiksmi galvenokārt nosaka lasītprasme, kas nepieciešama visos mācību priekšmetos (dabas zinībās, vēsturē, ģeogrāfijā, latviešu valodā un literatūrā u. c.), jo skolēnam ir jālasa, jāuztver lasītais, jāizprot būtība un nozīme un vēl jāprot par to pastāstīt. Vieniem skolēniem tas padodas bez grūtībām, bet citiem – grūtības šķiet pat nepārvaramas. Līdz ar to – loģisks ir jautājums, vai par to nevar sākt domāt jau pirmsskolas vecumā?

Disleksijas jēdziens tiek lietots atšķirīgi dažādās valstīs un dažādu zinātnieku skatījumā. Tomēr, runājot par bērnu lasītprasmes apguves objektīvām grūtībām, vajadzētu runāt par attīstības disleksiju vai par specifiskiem lasīšanas traucējumiem, kas nosaka, ka traucējums ir neirobioloģiskas izcelsmes, atšķirībā no mutvārdu runas traucējumos balstītiem lasīšanas traucējumiem. Vienā no specifisko lasīšanas traucējumu/disleksijas definīcijām teikts, ka tas ir specifisks mācīšanās traucējumu veids, kas saistīts ar lasīšanas, rakstīšanas, reizēm arī skaitīšanas grūtībām; tas ir saistīts ar smadzeņu struktūras un funkcionēšanas īpatnībām kopš dzimšanas un tam ir cieša ģenētiskā saistība (Turkington, Harris, 2006). Līdzās šiem simptomiem vērojamas arī grūtības fonoloģiskajos procesos, īstermiņa jeb darba atmiņā un citās jomās.Būtiskā pazīme ir tā, ka tas ir lasīšanas traucējums, kas izpaužas noturīgās atkodēšanas grūtībās un problēma vērojama kopā arī jau minētiem citiem simptomiem, kas ietekmē bērna turpmākās dzīves kvalitāti. Daudzus no šiem simptomiem var pamanīt jau pirmsskolas vecumā un agrīni uzsākta koriģējoši attīstošā darbība var mazināt simptomu izpausmes smaguma pakāpi, kaut arī novērst specifiskos lasīšanas traucējumus/disleksiju nav iespējams. Neirobioloģiskie traucējumi saglabājas visas dzīves laikā, tomēr reālā situācija ir tāda, ka Latvijā neiroloģiskie objektīvie izmeklējumi tādā kontekstā (lai noteiktu disleksiju) plaši veikti netiek un līdz ar to mazāka ir iespēja bērniem agrīni palīdzēt.

Bērna attīstība pirmsskolas vecumā
The Development in Pre-school Children

Pirmsskolas vecuma bērnu attīstībā nozīmīgs ir katrs mirklis, kas nosaka visas turpmākās dzīves kvalitāti un labizjūtu (Эльконин, 2008). Skatot bērna attīstību veselumā, nozīmīga ir visu jomu (fiziskās, sociālās, emocionālās attīstības, gribas un kognitīvo procesu) attīstība. Bērnu ar specifiskiem lasīšanas traucējumiem attīstība kādā no jomām var būt nedaudz atšķirīga. Tiek uzskatīts, ka bērniem ar disleksiju bieži novēro kustību koordinācijas traucējumus, ko sauc arī par dispraksiju; fonemātisko procesu nepietiekamu attīstību salīdzinājumā ar vienaudžiem. Tiek runāts arī par vizuāli telpiskās uztveres, laika uztveres

traucējumiem un samazinātu darba atmiņu. Tas nenozīmē, ka katram bērnam ir pilns pazīmju spektrs, savukārt tikai viena pazīme noteikti neliecina par traucējuma esamību.

Raksta ierobežotā apjoma dēļ nav iespējams plašāk runāt par bērna attīstību pirmsskolas vecumā, šī informācija atrodama attīstības psiholoģijas darbos. Tomēr zinot šīs pamatnostādnes, var runāt par tām jomām, kuru veiksmīga un savlaicīga attīstība nosaka sekmīgu lasītprasmes apguvi.

Vairāki zinātnieki runā par tām pazīmēm, kas agrīni var norādīt uz iespēju, ka vēlāk var veidoties noturīgi lasīšanas traucējumi (Gorman, 2001; McGuinness, 1998; Лурия, 2002). Tādēļ ir iespējams runāt par disleksijas riska faktoriem.

Disleksijas riska faktori
Risk Factors of Dyslexia

Disleksijas riska faktori ir vērojami vairākās attīstības jomās, kas ir svarīgi priekšnosacījumi sekmīgai lasītprasmes apguvei. Ņemot vērā to, ka neiroloģiskie izmeklējumi Latvijā nesniedz plašu atbildi uz disleksijas esamību, tad logopēdiem ir iespēja veikt pedagoģiski psiholoģisko un logopēdisko izpēti, kas dod pietiekami adekvātu priekšstatu par vairākām bērna attīstības jomām, kurās vērojami specifisko lasīšanas traucējumu riska faktori. Par attīstības disleksijas cēloņiem tiek uzskatīti šādi faktori: uztveres deficīts, atmiņas deficīts, valodas signālu apstrādes traucējumi, vizuālās uztveres apstrādes traucējumi un arī specifiski uzmanības traucējumi (Facoetti et al., 2000), kas vērojami jau pirms lasītprasmes apguves, un tos ir iespējams pilnveidot un stimulēt to attīstību.

Galvenās faktoru grupas, kas ietekmē lasītprasmes apguvi ir fonemātiskā uztvere, vizuāli telpiskā un laika uztvere, kā arī vairākas izziņas darbības jomas – uzmanība, uztvere, domāšana, atmiņa (īpaši darba atmiņa) (Adams, 1995; Gorman, 2001; Snowling, 2004; Tūbele, 2008; Корнев, 2003).

Viens no būtiskākajiem faktoriem lasītprasmes apguvē ir pietiekami attīstīta **fonemātiskā uztvere** – gan fonemātiskā analīze, gan fonemātiskā sintēze.

Fonemātiskā analīze ir prasme atšķirt runas skaņas un noteikt to secību vārdos, zilbēs (Корнев, 2003; Лалаева, 2002; Tūbele, 2002; 2008). Lasīšanas procesā īpaša nozīme ir fonemātiskajai sintēzei jeb prasmei saliedēt skaņas/burtus zilbēs, vārdos. Šai prasmei jābūt attīstītai gan mutvārdos, gan arī lasot.

Vairākos pētījumos ir akcentēta vizuāli telpiskās uztveres nozīme lasītprasmes apguves procesā (Iossifova, Marmolejo-Ramos, 2012; Facoetti, b.g.; Shovman, Ahissar, 2006; Tūbele, 2013; Иншакова, Колесникова, 2006; Семенович, 2002; 2008). Šīs uztveres saikne gan ar burtu apguvi, gan ar lasītprasmi kopumā ir cieša un nozīmīga (Корнев, 2003; Иншакова, 2008;

Лалаева, 2002). Bērniem ar disleksiju salīdzinājumā ar vienaudžiem ir vērojamas grūtības koncentrēt uzmanību gan telpas, gan laika aspektā (Visser et al., 2004). Laika uztverei un izpratnei ir nozīme gan bērna attīstībā kopumā, gan arī lasītprasmes apguvē (Iossifova, Marmolejo-Ramos, 2012; Иншакова, Колесникова, 2006). Šim faktoram ir būtiska nozīme tieši lasītā teksta uztverē un izpratnē, cēloņa un seku sakarību noteikšanā un līdz ar to arī stāstītprasmē un citos darbības veidos.

Lai arī tiek uzskatīts, ka izziņas procesi bērnam ar lasīšanas traucējumiem, arī ar disleksiju netiek traucēti, tomēr ir daži aspekti, kas liecina par atsevišķām grūtībām. Domāšana, atmiņa, uzmanība, uztvere – tie ir procesi, kas attīstās runai tieši līdzdarbojoties (Vigotskis, 2002) un atsevišķu runas un valodas traucējumu gadījumos šie procesi nav tieši tādi paši kā vienaudžiem. Tiek uzskatīts, ka bērniem ar specifiskiem lasīšanas traucējumiem ir samazināts darba atmiņas apjoms (Blakemore, Frith, 2005; Kauliņa, Tūbele, 2012; Sousa, 2005; 2007; Viser et al., 2004; Корнев, 2003;), kas kavē paturēt prātā informāciju par pirmajiem burtiem garā vārdā vai par vārdiem teikumā. Tas liedz pilnībā uztvert lasītā jēgu un atcerēties teksta saturu (Gathercole, Alloway, 2007). Tomēr tie ir bērni, kam ir veiksmīgas attiecības ar vienaudžiem, lai arī grupas aktivitātēs reizēm ir grūtības atbildēt uz tiešiem jautājumiem, sekot virzieniem un paturēt prātā vairākus uzdevumus. Bērniem ar valodas sistēmas nepietiekamu attīstību (VSNA) ir ierobežota verbālā domāšana, kas ir specifiski kavēta (Høien, Lundberg, 2000; Kauliņa, Tūbele, 2011). Nenoturīgā uzmanība un nespēja koncentrēties veicamajam uzdevumam arī ir viena no specifiskām lasīšanas traucējumu pazīmēm, ko zināmā mērā var novērot arī jau pirmsskolas vecumā. Apkopojot iepriekšminētās atziņas un teorijas, tiek raksturoti specifisko lasīšanas traucējumu riska faktori (sk. 1. tabulu).

Tabulā ietvertie kritēriji ir sagrupēti lielās kategorijās, kas varētu būt vēl sīkāk sadalīti. Rādītāju skaidrojums nepieciešams izvērsts ar konkrētiem uzdevumiem, bet tas rakstā netiek ietverts. Nav norādīti arī līmeņi, kā izvērtēt konkrētos rādītājus. Daļa no piedāvātajiem faktoriem pētīti un analizēti iepriekš (Tūbele, 2013).

Pilnveidojot izpratni par specifisko lasīšanas traucējumu simptomiem un norises gaitu, veicot korekciju, var prognozēt, ka tiktu mazināta iespēja, lai veidotos sekundāri uzvedības traucējumi – emocionālie, uzvedības vai citas psiholoģiska rakstura problēmas, kas noved pie zemas mācību motivācijas, skolas kavējumiem un psihosomatiskām saslimšanām (Kauliņa, Tūbele, 2012), kas nereti ir vien no lielākajiem šķēršļiem skolēna labizjūtai skolā un visā turpmākajā dzīvē. Lasīšanas traucējumi (gan specifiskie, gan mutvārdu runas traucējumos balstīti) ir viena no mācīšanās traucējumu cēloņu grupām, kas ir jau sekundāra izpausme.

1. tabula. Specifisko lasīšanas traucējumu/disleksijas riska faktori
Risk factors of specific reading disabilities/dyslexia

Kritēriji	Rādītāji
Fonemātiskā uztvere	• Fonemātiskie priekšstati ○ Zilbju rindu atkārtošana ○ Sarežģītas zilbju struktūras vārdu izrunāšana • Fonemātiskā analīze ○ Īso, garo patskaņu atšķiršana ○ Balsīgo, nebalsīgo līdzskaņu atšķiršana • Fonemātiskā sintēze ○ Skaņu sapludināšana zilbē ○ Zilbju sapludināšana vārdā
Telpiskā uztvere	Telpiskās attiecības (attālums, proporcijas) Labās un kreisās puses noteikšana Orientēšanās papīra lapā, telpā Ģeometrisko figūru šķirošana (krāsa, lielums, forma) Modeļa atveidošana pēc parauga
Vizuālās funkcijas	Priekšmetu atpazīšana Vizuālā analīze, sintēze Vizuālā uztvere Vizuālā uzmanība Redzes motorā funkcija
Laika uztvere	Izpratne par diennakti, nedēļu Vai izprot jēdzienus *vakar, šodien, rīt* Ko var izdarīt vienā stundā, vienā minūtē Cēloņa un seku sakarības (pirms, pēc)
Motorās prasmes/koordinācija	Divu priekšmetu savienošana ar abām rokām Varavīksnes uzzīmēšana pēc parauga Punktētas līnijas savienošana zīmējumā Lēkāt uz vienas kājas ar paceltām rokām Pirkstiņrotaļas atveidošana pēc parauga
Vizuālā/audiālā atmiņa	Daudzpakāpju instrukcijas atcerēšanās Skaņu virknes atkārtošana (5 skaņas) Vārdu virknes atkārtošana (5 vārdi) Nosaukt priekšmetus pēc to paslēpšanas Atrast 3 burtus starp citiem pēc parauga
Vispārējās prasmes	Krāsu atpazīšana Skaitīt uz priekšu un atpakaļ (1-10) Sakārtot gadalaikus secībā un nosaukt to raksturīgās pazīmes Virzienu izpratne un atcerēšanās

Diagnostika un agrīna koriģējoši attīstošā darbība
Diagnostics and Early Intervention

Savlaicīga diagnostika būtu nepieciešama jebkurā attīstības traucējuma gadījumā, bet jo īpaši nozīmīgi tas ir specifisku lasīšanas traucējumu/disleksijas gadījumos. Jo agrāk bērns saņems palīdzību, jo labāka izveidosies viņa stratēģija

un taktika mācību procesā skolā un arī vēlākajā dzīvē. Diagnostikai vajadzētu būt kompleksai, kas aptver lasīšanas un rakstīšanas prasmju izpēti, vecāku aptauju, psiholoģisko izpēti, koncentrēšanās spēju izpēti un tādu izvērtējumu, kas ļautu noteikt bērnu stiprās puses. Tikai tā var pavērt ceļu attīstībai un kompensatoro mehānismu iedarbināšanai. Diagnostiskie materiāli tiek lietoti dažādu testu veidā (Høien, Lundberg, 2000; Kauliņa, Tūbele, 2012; Snowling, 2012; Корнев, Иишмова, 2010), bet Latvijā konkrēta testa disleksijas diagnostikai vēl nav. Tiek izmantota runas un valodas novērtēšanas sistēma (Tūbele, 2002), kas ļauj logopēdam precīzi noteikt lasīšanas traucējumu esamību un diferencēt tos no specifiskiem lasīšanas traucējumiem (Tūbele, 2008). Ģimenes anamnēzei ir nozīme, izvērtējot riska faktorus un precizējot diagnozi, jo vairākkārt tiek akcentēta augstāka disleksijas sastopamība ģimenēs, kurās arī vecākiem ir bijuši disleksijas, mācīšanās traucējumu un līdzīgi gadījumi (Snowling, et al., 2007). Kopš 2013. gada Latvijā agrīnas lasītprasmes diagnostikai tiek lietots DIBELS Next tests, kas ir objektīvs mērījums, nosakot lasītprasmes izvērtējumu arī dinamikā (Raščevska, u. c., 2013), tomēr tas nedod iespēju diagnosticēt specifiskos lasīšanas traucējumus. Pagaidām izstrādātie materiāli ir skolēniem no sagatavošanas klases līdz trešajai klasei; tests ir adaptēts Latvijas kultūrvidei un latviešu valodai un ļauj noteikt lasītprasmes attīstības līmeni, ieteikt atbalsta pasākumus, ja nepieciešams un vērot lasītprasmes uzlabošanos dinamikā. Ir vairāki testi, kas ļauj precīzi izvērtēt bērna prasmes dažādās jomās (Bangor disleksijas tests, Logos, Korņeva testi), tie sastāv no vairākiem subtestiem (mutvārdu runa, vārdu atpazīšana, fonoloģiskie procesi, burtu pazīšana, skaitīšana, labās, kreisās puses noteikšana, fonēmu sintēze, fonemātiskā analīze, ātrā nosaukšana, vispārīgās zināšanas u. c.) (Tūbele, 2008; Корнев, Ишимова, 2010). Subtestu rezultāti sniedz informāciju par to, kuras jomas ir bērna stiprās puses un tās, kurās vēl ir jāpacenšas, tādēļ būtu vēlams ieviest kādu no šādiem testiem arī Latvijā. Lai mazinātu specifisko lasīšanas traucējumu izpausmes, nepieciešams uzsākt agrīnu koriģējoši attīstošo darbību, (Eklund, et al., 2013; Hellwig, 2007; Philipp, 2013; Snowling, 2012; Кондратенко, 2005). Agrīnas palīdzības nozīme ir nozīmīga arī bērna smadzeņu plasticitātes dēļ, kas ļauj "iedarbināt" kompensatoros mehānismus (Sousa, 2005; 2007; Kolb, Gibb, 2011; Michelon, 2010). Jo agrāk mēs pamanīsim, kurās jomās bērnam nepieciešama palīdzība un atbalsts, kuras ir viņa stiprās puses un kādas ir bērna intereses, jo vairāk varēs veicināt panākumus, sekmēt pašapziņu un veiksmīgāks būs katra bērna dzīvesstāsts.

Diskusija
Discussion

Specifisko lasīšanas traucējumu/disleksijas diagnoze tiek noteikta tikai otrajā mācību gadā skolā, kad skolēnam jau vajadzētu būt apguvušam lasītprasmi. Ja mēs tikai tad sāksim domāt par koriģējoši attīstošo darbību, tad

daudzu simptomu izpausmes jau vairs neizdosies mazināt un cilvēka nākotnes iespējas vairākos aspektos būs ierobežotas. Jo agrāk tiek uzsākta bērna attīstības stimulēšana, veicināšana un traucēto posmu koriģēšana, jo veiksmīgāk varēs "sadzīvot" ar specifiskajiem lasīšanas traucējumiem.

Secinājumi
Conclusions

Attīstības disleksija jeb specifiski lasīšanas traucējumi ir neirobioloģiskas izcelsmes problēmas, kas var mazināt dzīves kvalitāti un labizjūtu, bet to riska faktori ir pamanāmi jau pirmsskolas vecumā; savlaicīgi uzsākta koriģējoši attīstošā darbība mazina negatīvo ietekmi un palīdz bērnam veiksmīgāk apgūt lasītprasmi.

Darbojoties profilaktiski ar pirmsskolas vecuma bērniem – attīstot fonemātisko uztveri, pilnveidojot vizuāli telpisko un laika uztveri kā arī stimulējot un veicinot kognitīvo procesu attīstību, varēs mazināt specifisko lasīšanas traucējumu/disleksijas izpausmes.

Bērna smadzeņu kompensatorās iespējas un plastiskums vēl tiek pētīts, bet iespējas ir, ievērojot to, ka īpaši strauji neiroplasticitāte attīstās agrīnos gados.

Summary

Theoretical basis of dyslexia help us to understand the crucial meaning of early statement of risk factors and early intervention. Researches are done to reveal the impact of dyslexia on the development, learning process and other areas of a child. Some findings state the factors, which influence the acquisition of reading and predict possible difficulties. The article is devoted to reveal the possibilities of diagnostics of dyslexia early risk factors and the necessity of early intervention.

The aim of the study is to analyse theories of the dyslexia risk factors and to give an insight of the advantages of early diagnostics and intervention.

Methodology – the analysis of scientific literature.

Ability to read is one of the most important skills, which states the quality of life and successful functioning in society. At school age child is frustrated if his reading skills are not sufficient. Curriculum in Latvia is based on reading and writing skills and it is necessary to acquire knowledge and skills in all subjects such as geography, natural sciences, history, Latvian language and literature etc. Child has to read and understand the text. Some of them can do it without problems, some face real difficulties. May be it is possible to think about it in pre-school age?

The development of a child in pre-school age is very fast and all areas (physical, social, emotional, cognitive) are very important for further development. Many scientists speak about signs, which in this early development can point on later difficulties in acquiring reading skills. Therefore it is possible to speak about dyslexia early risk factors.

These risk factors manifest in different areas: deficits in perception, memory, language, visual-spatial and time perception, specific attention disorders and it could be seen before learning to read. If early intervention is carried out, the development of a child could be stimulated.

One of the most important areas is phonological awareness – phonological analysis and phonological synthesis. There are some authors who speak about the significance of visual-

spatial perception in the process of learning to read. Time perception also is important the same as cognitive areas – perception, attention, memory (especially short time/operational memory) and others. Motor coordination and features that we can call dyspraxia/apraxia are significant in acquiring reading skills. There are criteria and indicators pointed out in this article, but not all are highlighted because of size limit.

It is necessary to start early intervention to diminish manifestations of specific reading disabilities/dyslexia and to avoid secondary behavioural and learning problems.

Discussion. Diagnosis of specific reading disabilities/dyslexia is stated only in the second school year, when child must be able to read. If this will be the starting point of intervention, many symptom's manifestations will be impossible to diminish and future possibilities of this child will be limited. As early we start to stimulate the development of a child and promote the intervention, as more successfully it will be possible to "live together" with dyslexia.

Conclusions. Developmental dyslexia or specific reading disorders is the problem of neurobiological origin, which can diminish the quality of life and wellbeing but the risk factors could be seen in pre-school age; early intervention reduces the negative impact and helps to acquire reading skills more successfully.

With the help of preventive activities in pre-school children – developing phonological perception, improving visual-spatial and time perception as well as promoting the development of cognitive processes, it will be possible to diminish the manifestations of specific reading disabilities/dyslexia.

The compensatory possibilities and neuroplasticity of children's brain is still under research, but possibilities are, because this process (neuroplasticity) develops exceptionally rapid in the early years.

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ATTITUDES OF GIFTED CHILDREN TO PEOPLE WITH DISABILITIES

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Abstract. *Talent is characterized as asynchronous development, which combines accelerated cognitive abilities and increased intensity to create inner experiences and awareness that are different from their quality standards. Article reflects the results of research that aimed to describe the group of exceptionally gifted children aged in terms of their attitudes, opinions and concerns to people with disabilities. To obtain the data was specifically chosen method of focus groups and projective technique unfinished sentences. Target groups were presented unfinished sentences, so that on the basis of the replies received gave to identify topics that are relevant to it. One of the objectives was to find out the answers obtained from the opinions and attitudes towards the phenomenon of disability - to obtain information to enable understanding of the way in which this target group thinks about people with disabilities.*

Keywords: gifted children, attitude, people with disabilities.

Introduction

Children who are gifted may be difficult to define and identify without a clear concept of the complex factors and contexts that may be involved in their early development and their resulting characteristics and personalities. Freeman (2013) use the word „gifted" to mean outstanding cognitive ability and „talented" to mean outstanding artistic ability, though the two do overlap and many in this study enjoyed both. Theorists sometimes juggle with the terms, such as Gagné (1999) who describes „gifts" as the maturation of „talents" which he sees as potential, or Gardner (1983) who presents the idea of separate „intelligences" each of which can reach a gifted level independently of the others. There appears to be some agreement about two specific expressions of giftedness (Csikszentmihalyi & Csikszentmihalyi, 1993; Winner, 2000; Wellisch & Brown, 2013) and as has been demonstrated, they may be

accompanied by any number of diverse characteristics with a multitude of possible combinations. The first is the positive, well adjusted, resilient, intellectually gifted achiever, and the second may be anxious, introverted, creative, possibly mathematically or scientifically gifted, and susceptible to both positive and negative experiences that appear to determine level of adjustment and achievement (Belsky, 2005; Dabrowski, 1972; Winner, 2000; Wellisch & Brown, 2013).

The aim of this study is to outline the attitudes of gifted students towards people with special educational needs. The focus of the research probe just to a group of gifted students was motivated by a high potential of the group and also by the fact that gifted students themselves form a group of people with special needs. The particular research strategy has been chosen with regard to specifics of the target group (age, gift), research goal and characteristics of the observed field. The intention was to create a platform for applied research, to carry out a primary probe along the lines of the selected issue and to verify the options of exploring the attitude of the target group using the selected tool. For this purpose, a specific variant of questionnaire with open unstructured items or unfinished items was created, providing space for free associations in the context of persons with specific needs which were the object of our interest within the research. Using the open form as well as formulating the items through aposiopesis, we tried to eliminate suggestiveness. The method was aimed at having an a priori projective character.

Attitudes toward people with disabilities from perspective of majority population

Disability is the source of many myths, prejudices and stereotypes. A similar situation is in the field of gifted people, but usually these prejudices have positive message. It's basically a natural - things that people do not understand and which they fear, they try to avoid or downplay it into prejudices and stereotypes. Disability is for society subconsciously threatening - is proof that something can go wrong; is a reminder that good health is not unchanging state (Požár in Regec, Stejskalová et al., 2012). Prejudice and stereotyping is a certain leakage and simplifying subjectively unfavorable situation. Is typical and natural, that the society perceives peculiarities and exceptionality a priori as disturbing, threatening or dangerous - they threaten the need for safety and certainty. Relationship to persons with disabilities is an expression of tolerance for differences, respecting to the individuality of each person and partly a measure of internal quality of individuals and society as a whole. Only if the company, including its individual members, be able to exceed conventions and stereotypes, people with disabilities will not be perceived only from the perspective of disability, whether with a rejection or compassion (Vágnerová, Hadj-Moussová, Štech, 2000). Is this situation also typical for view from

perspective of gifted children? Perceive them themselves from a similar angle of view?

In attitudes towards persons with disabilities dominates emotional component. For it is characteristic ambivalence - contains both positive and negative emotional experiences. Typical emotional symptoms of laic population include mercy and at the same time awe and aversion. Persons with disabilities acquire, in a social context, the specific role of a disabled person. This role brings certain privileges, but also certain restrictions and limitations. This role is significantly determined by stereotypical attitudes and expectations of society. Rejection of the contents of this role is at odds with generalized social assessment and is socially sanctioned (Vágnerová, Hadj-Moussová, Štech, 2000). The natural tendency of the major population is to reduce the personality of an individual with disability solely on their handicap. Disability becomes the dominant characteristic of the person. This situation is reflected also in self-perceptions of individual, also identity of a person with disability is changed. Attitudes of society, in a certain extent, predetermine role, status and level of integration of this person into society (Vágnerová et al., 2008).

The criteria of beauty and physical fitness, which are set in the society, become an integral part of the self-esteem of a person with disability and the standard by which one measures themselves and others (Matějček, 2009). The socio-psychological dimension takes the form of stigmatization. Stigma is not true quality of human, but is attributed only in the context of attitudes which are typical for the society (Vágnerová, Hadj-Moussová, Štech, 2000). How is this in the context of the young generation, and generation of gifted children? What is their perspective and self-perception in conjunction with persons with disabilities? As part of our research, we attempted to probe the primary intentions of the chosen problem.

It is clear that change in attitudes of lay society towards people with disabilities is a matter of long-term development, which assumes raising awareness in the future generations, so that the issue of disability has ceased to be a source of various taboos, unknown and threatening feelings. Our goal was explore the current situation within the population of gifted children - a population that has significant potential and at the same time is itself a specific group. The main research question was oriented to attitudes of gifted children to the persons with disabilities. In concept of "open area of free associations" we should provide space for semantic analysis of associations related to people with disabilities. It is clear that the findings can not be generalized; however, the data are a source of interesting ideas for applied research.

Methodological Aspects

In terms of methodology, the non-probability sampling method was used to select the research sample - the method of intentional (purposeful) selection,

where participants possessing certain features are targeted. The sampling criterion has been a selected feature or an expression thereof, or a condition. On the basis of the parameters determined, respondents were targeted among children (pupils of the primary school first level) with gift (classes for gifted pupils), who were willing to participate in the research. In particular, a simple intentional sampling was used, i.e. selection of willing participants from the group meeting the criteria in question. The resulting research sample comprised 87 respondents. The age structure of the research group corresponded to the first level of primary school with the majority of respondents being between the age of 8 and 10; in terms of gender, the research group contained a majority of boys (62, 1%). The age and gender structure is illustrated in Table 1. The presented age structure shows that most of the respondents were aged 8 and 10 years old. In a given age category we expect some awareness about people with disabilities. At the same time we expect a lower level of influence of stereotypical reactions of the majority population.

Table 1. Research group age structure

Age (in years)	Number of responses	Percentage
6	4	4.7 %
7	9	10.5 %
8	24	27.9 %
9	16	18.6 %
10	22	25.6 %
11	7	8.1 %
12	1	1.2 %
13	1	1.2 %
14	2	2.3 %

Data Analysis and Interpretation

The free association area focused on associations connected with disabled persons in general has shown certain attitudinal characteristics of contemporary society which are already projected into perception of the youngest population. It is encouraging that some of the responses have a desirable form: „they are often deprecated or underestimated in our society. Disability is not their fault and in most cases, they have learned how to live with it, so we shall not think anything bad about them"; „they are the same as us but the people see them differently because of their disability"; „they are often more humble and appreciate things like hearing, health and sight"; sometimes they are nicer than some people without disability"; „the same as us, but they are still discriminated"; „sometimes they are pushed out of the society".

Furthermore, there were several quite concise answers, corresponding to the specific state of thought in the particular age („people with some illness or

fracture"; „normal people who are limited by their disability, often underestimated but they can achieve a lot"; „totally normal people who have some restrictions"). However, several reactions appeared suggesting a strong cognitive component of the attitude (even if sometimes with persisting inappropriate terminology) - „people with mental, physical or sensual disability"; „for example blind, deaf, in a wheelchair"; „invalid"; „blind, deaf-and-dumb, etc."; „they were born like that". Within this component, it is also possible to trace several typical mistakes in social learning - e.g. implicit personality theory („good and polite"). In the semantic structure, also terms from the opposite pole of the spectrum appeared which we are currently trying to eliminate in the majority society (poor, helpless, vulnerable, wretch, restricted). However, misunderstanding was considerably reflected in this item, which resulted in answers such as „handicapped, disabled, ill, disadvantaged". In seven cases, this situation was manifested by omitting the item. How is otherness perceived by the gifted children? This may be suggested by the polarity responses - „other than normal" versus „the same as us"; „normal" versus „different". However, one of the response variants has a very positive tone - people with disability are perceived simply as „people".

The next item (I think that people with disability…) has further extended the circle of free associations, inter alia, by interesting positively toned responses emphasising the aspects of equivalence, equality, tolerance, social inclusion, frequently accenting the issue of help: „are a bit different, but you can have a lot of fun with them"; „are not different and have the same rights as others"; „are often excluded from society"; „shouldn't be underestimated"; „shouldn't be educated in special institutions"; „should be given more respect"; „shouldn't be deprecated". Also, a differentiated perception of the disability situation appeared, presented by the response „have both, advantages and disadvantages". The opposite pole of the association spectrum presents the generalizing responses such as „are very unhappy"; „do not have a good life"; „do not have an easy life"; „are weird"; „it's bad for them". We will leave the following answers uninterpreted: „should try to be like normal"; „should receive presents"; „see the world differently".

The next items focused on perception of people with specific type of health disability. Along the lines of associations connected to hearing impairment, a broad spectrum of responses was recorded with a number of them having a very positive character, not only in terms of attitude but also the information contained (regarding the cognitive component of the attitude): „I guess they have great problems with communication"; „must focus on facial expressions and gestures"; „often can't learn to speak and have problems to communicate (most people can't use the sign language"); „have to learn the sign language - I guess it is, more difficult than written alphabet"; „may learn how to lip-read and thus communicate with others"; „it's difficult for them but for the others talking to them as well". Most frequently, connection with the „Sign Language"

appeared along with necessity to master it. In this item, the persistent inadequate terminology was reported - deaf, deaf and dumb. Also here, we leave it to the reader to interpret two specific entries: „will never be able to hear music”; „I'm sorry for these people even if I think that sometimes it is better not to hear what people say.”

The item dedicated to unsighted persons has brought answers very similar to the previous item in terms of structure: „can't see the beauty of this world but on the other hand, can't see the bad, evil, either”; „need a guide dog, white stick and help of the sighted people”; „it's very difficult for them because sight is the main sense of our body”; „need to walk with a white stick outside”; „are blind”; „are unsighted (visually impaired)”; „hear well and have good sense of touch”; „read using the Braille alphabet”; „are happy they can hear”; „are blind forever”. To summarize the statements above, especially the issues of space orientation, utilization of compensation mechanisms and necessity to use guide services were mentioned. We can also register the occurrence of several deep-rooted myths - „have excellent musical ear and they should play violin, for example”; „live in eternal darkness and therefore we have to help them”.

The next item observed the associations connected to a person in a wheelchair. Likewise, the impacts of limited mobility on the person's everyday life were accented here, mentioning the spare time activities, especially sports and options of applied physical activities („can do different sports thanks to special equipment”), the questions of help appeared as well („I should help them”; „need someone by their side” etc.). The structure of the following answers was more or less similar to the previous item. Again, we provide several statements which stand out of line: „movement is difficult for them, however they can manage everything else like others”; „can be great people even without legs”; „are in a wheelchair but otherwise they are completely normal”; „can have skilful hands”; „are no different from us”; „need to have fun”.

Attitudes toward persons with communication disorders were also included in the frame of reference. According to the addressed gifted children, what is a person who stutters like? It should be noted that in 17 cases, the respondents were not sure how to answer, with the remaining answers referring to the impairment of speech, not the person's dignity - „definitely do not deserve contempt. If other, normally speaking people, will behave nicely to them, their condition may improve”; „it is difficult to understand them but we have to behave so that they don't feel like ill”; „can try to tackle it and eliminate it”; „are often mocked because they speak unclearly”. Here, too, we see a relatively strong cognitive component of the attitude - „experienced some shock or they were born like that”; „are completely normal, stuttering is the same as if someone can't pronounce „r”; „need more time for speaking”; „should visit a speech therapist”; „can't speak fluently”. The remaining statements repeated the characteristics such as speech disorder, speech sound disorder, fluency disorder,

along with normality and necessity of patient approach. We also mention two specific reactions to the unfinished sentence „A person who strutters ... „is funny but I won't laugh at him"; „is not disabled for me". We also recorded innovative terminology - a person with balbuties according to some gifted children is a „koktalín" or „koktavec" (it could be translated as "stutterer").

In the next item dedicated to persons with autism, unfamiliarity with this term was manifested - 68 respondents could not react to this item and 5 others did not know what the term means. However, if the gifted respondents did react, their responses were very mature: „are exactly the same as us, only have their habits they sticks to"; „often have different abilities in which they are better than others"; „it is difficult to answer because each autistic person is different"; „can't accept changes, they want to have everything as it is"; „have problems talking to people"; „have problems to make friends"; „it's not their fault". Next, we provide three humorous interpretations corresponding to children's fantasy and spontaneity - an autistic person is an „autismist", „someone who drives a car" or „has a car" (note: „auto" means a „car" in Czech).

The difficulty and help aspects were emphasized in the item aimed at making the respondents' answers subjective. Their reactions corresponded to our assumptions - in a substantial majority of cases, the personality of a disabled individual is reduced to the need for help (however, in one case in a surprisingly broad meaning - „we should definitely help them to integrate into society"). The second most frequent tendency of the participants was an assumption of difficult life. The following three statements are left without interpretation, for the reader's subjective reflection: people with disability ... „often encounter misunderstanding and stupidity of others"; „I wish them that their disability didn't exist"; „I wish them good luck".

The last item observed, what the people with disability should (People with disability should ...). From the broad spectrum of answers which in general emphasized the necessity to help, to use help as well as the need of respect and equal approach, we select those, the tone of which went beyond our expectations or were specific in some way: „stop being ashamed of their condition and try to mix with others"; „be considerate to others and show that they really need help"; „stop using their handicap to avoid responsibilities"; „be in a hospital or at home in bed"; „have the same recognition as other people"; „have opportunity to live a full life"; „enjoy life whatever it is like"; „be protected against maltreatment"; „have the feeling that they are normal"; „stay as they are"; „respect the world around them"; „take care of themselves"; „discover their talents"; „be recognized"; „be happy" or „have a minister".

Last but not least, we were interested in self-reflection of the respondents, their attitude to themselves, as the category of gifted („The biggest problem of gifted children is ..."). Intentionally, we included this item as the penultimate one, to have it perceived in the context of persons with specific needs. The structure of responses was very heterogeneous, mostly emphasizing the aspects

of behaviour and social dimension of the gift:"that even if they are brilliant in various fields, they have troubles with ordinary things"; „I don't know about any problem concerning gifted children only"; „that they can't realize how lucky they are"; „to love themselves for being healthy"; „that they want to be the same as others"; „communication with other children"; „to find a friend"; „the presentation of their gift"; „to socialize"; „different for each one of them"; „boredom" and very concisely said „IQ". However 32 children could not react to this item.

TOLERANCE

RESPECT FOR EXCEPTIONALITY

ASSESSMENT OF NORMALITY

EQUIVALENCE AND EQUALITY OF PEOPLE

VERSUS

MISFORTUNES, BAD LIFE, STRANGE PEOPLE

Gifted children and their attitudes toward people with disabilities

STRONG COGNITIVE COMPONENT OF ATTITUDES

VERSUS

POOR TERMINOLOGY

COMPASSION

REMORSE

ABNORMALITY

People with hearing impairment	• Communication (sign language, lipreading, interpreting) • Wrong terminology (incorrect labeling of people with hearing impairment) • Strong cognitive component of attitudes (the need for lipreading, difficulty of sign language, role of gestures and facial expression) • "Sometimes is better, when we don´t hear, what other people say."
People with visual impairment	• Orientation and mobility (including guiding) • Compensatory mechanisms • Deeply rooted myths (excellent tone deaf) • "They can not see all the beauty of this world, but at least they can not see evil and bad."
People with physical disability	• Limits in activities of daily living • Leisure activities (especially sports) • Need for help • "Person in a wheelchair can be a big one despite has no legs."
People with speech disorders	• 19,5 % of respondents don´t answer (they probably don´t understand) • Emphasis on human dignity and patience • Strong cognitive component of attitudes (articulation disorder, inability to fluent speech, a speech therapist care, longer time to talk) • "This person is not disabled for me."
People with autism	• 78 % of respondents did not answer (they probably didn´t understand), additional 5.7 % did not know, what the term means • Strong cognitive component of attitudes • Cognitive component of attitudes - problems in social contact, stereotypical behavior, exceptional abilities, hypersensitivity to changes • Creative responses with the imaginative component
Gifted children	• 36,8 % of respondents did not answer • Problems with social communication, social interaction, behavior, problem of exceptionality • Emphasis on social dimension of gifted children • "Although they are genius in various fields, ordinary things are difficult and they have with them trouble."

Conclusion

The aim of this study was to outline the attitudes of gifted students towards people with special needs. The focus of the research probe just to a group of gifted students was motivated by a high potential of the group and also by the fact that gifted students themselves form a group of people with special needs.

In the field of attitudes of gifted children toward people with disabilities we are striving for recognition of specific features. We are interested in how people with disabilities are viewed from the perspective of gifted children and also whether they consider themselves to be people with special needs. Character of their responses is shown in the chart above.

Qualitative data analysis shows many positive aspects. In the target group was, in general, very strong cognitive component of attitudes towards people with disabilities. By contrast of expression of sympathy were given aspects of tolerance, respect and normality. However, we have also encountered with persistent myths and inappropriate compassion and generalization.

We can say that the target group has significant potential to improve the overall attitude of society towards people with disabilities. However, it must be consistent effect not only on gifted children, but on society as a whole.

Attitude of the general public towards persons with disabilities and their transformation is a question of long-term development, which assumes raising awareness of future generations. Is there diference in this question between gifted and non-gifted students or goes development in this area hand in hand with the situation in the entire society?

Outcomes of our research can not be fully generalized, so we present here also a relationship to theory and further research activities.

Free associations of gifted students pointed out some of the attitudinal characteristics of contemporary society - focus on the medical aspect and a tendency to pity or compassion. This persistent attitude is also mentioned by Kaffemaniene & Jureviciene (2013). In the free association, there are also reaction, which indicates a significant cognitive aspect of personality, as well as positive statements emphasizing aspects of equivalence, equality, tolerance and social inclusion. Respondents accentuated the question of aid and expression of empathy with people with special needs very often. In keeping with associations' related hearing impairment, visual impairment and limitation of motor skills, reactions have a positive character, not only in quetion of attitude, but also in question of the contained information. Again, there is showen a significant cognitive aspect of personality of gifted student. In case of the association on the issue of communication disorder and autism spectrum disorders, there was mainly reflected a lack of information about the issue and the impossibility of expressing it. On the other hand - if the students had awareness about autism, this awareness was very apt. These associations reflect not only cognitive, but also attitudinal maturity. In the case of communication

disorder, as well as associations related to visual impairment, hearing impairment and limitation of motor skills, there are showen mostly positive attitudes and effort to support. Finally, we were interested in self-respondents, their attitude toward themselves, the gifted category. The structure of the answers were very heterogeneous, most were highlighted aspects of behavior and the social dimension of talent. The associations were again very mature and poignant. But not all students were able to reflect this.

Overall, we can interpret attitudes of gifted students towards people with special needs in our study as a thoroughly positive, although with occasional persist of medical perception. Evident is, however, a significant cognitive aspect of personality and high degree of empathy of gifted students (as confirmed Shechtman & Silektor, 2012; Eklund et al. 2014), due to which many associations gifted students are mature, concise and pertinent, expressing a certain level of sensitive perception and approach, but not in the sense of unwanted sympathy and pity.

Instead of final summary, we would like to use a quote from one of the participants - „In our society, people with disabilities are often deprecated or underestimated. Disability is not their fault and in most cases, they have learned how to live with it, so we shall not think anything bad about them." The aim of this study was not to provide a comprehensive survey about attitudes of gifted pupils but to open space for further exploration of attitudes of gifted people to other groups of individuals with special needs. We believe that this is some sort of prototype of further development of attitudes of healthy population towards person with special needs.

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PRAGMATIC LANGUAGE LEVEL IN AUTISM SPECTRUM DISORDERS FROM THE PERSPECTIVE OF SPEECH AND LANGUAGE THERAPY IN THE CZECH REPUBLIC

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Abstract. *The objective is an overview of the partial research outcomes aimed at evaluating the pragmatic level of communication (PCL) in persons with autism spectrum disorder (ASD) from the perspective of speech and language therapy (SLT) in the Czech Republic, where the SLT system is divided into three different sectors bringing specific views on their concept. A partial objective is to highlight the need to create specific SLT diagnostic materials for national- relevant use and outline their concept. It is based on a brief theoretical analysis of the current state of knowledge, and presents the quantitative and qualitative outcomes based on a mixed research design. Partial results confirm the lack of practical SLT´s focus on the area of PCL diagnosis in ASD, the lack of relevant diagnostic materials as well as effective options of SLTintervention in PCL of people with (ASD) focusing on selected individually impaired factors.*

Keywords: *autism spectrum disorder; speech and language therapy; pragmatic language level; diagnosis; assessment; special education.*

Introduction

Pragmatic language level, i.e. the level of social application, social utilization of communication skills accentuating social aspects of communication (cf. Lechta, 2003; Newman, 2007; Grigorenko et al., 2003; Wallace, 2008), is preferred and emphasized in the current speech and language therapy (SLT). The above is seen in the emancipation process of the 1990s referring to the so-called pragmatic-linguistic concept in SLT (cf. Lechta, 2011) as well as in the current classification of communication disorders according to ASHA (*American Speech-Language-Hearing Association*, 1993) that categorizes pragmatics disorders among language disorders featuring disruption of the language function. This fact can also be detected in the new DSM-V (2013) classification, which, in this context, has established a separate group of disorders for inclusion in SLT and associated with pragmatic language disorder (PLD) – *social pragmatic communication disorder* (SCD, SPCD) or *pragmatic language impairment* (American Speech and Language Association, 2015). PLL is addressed in more detail by Watzlavick (1999), who cites that the pragmatics of human communication as a science deals in the broader sense with the effects of human communication and its action at the level of behaviour. Disruption of PLL has a significant impact on interpersonal interaction and socialization in the global aspect (Greenspan, Shanker, 2004).

The objective is an overview of the partial research outcomes aimed at evaluating the pragmatic level of communication in persons with autism spectrum disorder (ASD) from the perspective of speech and language therapy (SLT) in the Czech Republic, where the SLT system is divided into three different sectors bringing specific views on their concept. A partial objective is to highlight the need to create specific SLT diagnostic materials for national-relevant use and outline their concept. It is based on a brief theoretical analysis of the current state of knowledge, and presents the quantitative and qualitative outcomes based on a mixed research design. Partial results confirm the lack of practical SLT´s focus on the area of PLL diagnosis in ASD, the lack of relevant diagnostic materials as well as effective options of SLT intervention in PLL of people with (ASD) focusing on selected individually impaired factors.

Pragmatic language level in individuals with ASD

Deficits and striking differences in PLL are characteristic of the diagnostic category of autism spectrum disorders (ASD). The specifics of disruption of this language level are evident already at early age (inpreverbal vocalization); they manifest in the use of gestures (absence of declarative gestures), in a variety of non-verbal communication, and also determine its verbal component and affect the possibilities of communication application (Bondy, Frost 2007, Boyd, 2011). Disorders of pragmatic language level affect all diagnoses falling with in ASD. The research conducted by Ramberg, Ehlers and Nydén (1996) adverts to the fact that pragmatics of communication in people with Asperger's syndrome shows significant specifics disadvantaging social interaction, despite the possible absence of problems affecting the phonetic-phonological language level and active vocabulary. The mentioned experts mapped the presence of differences in vocabulary, comprehension and pragmatics in three heterogeneous probands. The study results suggest that Asperger's syndrome, due to highly functional autism and SLD, provides significantly higher achievements in verbal IQ, which is a reflection of good active vocabulary, verbal memory and imitation abilities in people with this condition, but also of the homogeneously detected deficits in the social aspects of communication, i.e. in the PLL. The PLL as the basal problem in communication skills in individuals with ASD is also mentioned by Howlin (2005); according to this author, the main problem in the vast majority of people with ASD does not consist in the words they use but in the way how they use them. A significant aberration related to interference in functional communication is the lack of reciprocity and mutuality in communication. This is reflected in reduced ability or even inability to listen to communication of other people, absence of joy in conversation, adaptation problems and associated "jumping into speech", disregard for personal zones or adhering to a popular, one-sided focused topic (Howlin, 2005). Inflexible cognitive style and adaptation problems are addressed by

Jelínková (2009) who also states that the impact of these problems is evident in the inclination for verbal stereotypies, verbal rituals logorhea or the preference for scientific issues and specific themes at the expense of functional communication. Difficulties associated with PLL in people with ASD have a neurobiological basis, which is evident in the results of a study carried out by Tesinget al. (2009). According to the partial results of this research, individuals with ASD (especially people with Asperger's syndrome) show increased activity in right frontal gyrus – Brodmann area 47 (mapped via fMR); according to the authors of the investigation, this is perceived as compensation force rebellar deficits. Differences in the processing of emotional facial expressions were researched by Critchleye et al. (2000 in Koukolík, 2002). In individuals with ASD, the cerebellum area, the middle parts of the limbic system and the temporal cortex were activated differently relative to the intact persons when processing emotionally saturated information. Unlike the control group, persons with ASD did not activate the left amygdala region in the left half of the cerebellum (in ibid.).

Diagnosis and stimulation of pragmatic language level in individuals with ASD

Effective stimulation of PLLis preceded by detailed diagnosis and differential diagnosis of the partial symptoms, which are in a reciprocal relationship with functional use of communication in the social context. PLL can be diagnosed using a variety of methods and procedures, including test materials, interviews, and observation and analysis method focusing on spontaneous speech samples (Jehličková 2012 in Vrbová, 2012). In the Czech Republic, a diagnostic material primarily targeted on the assessment of PLL in individuals with ASD is currently missing. This fact was an incentive for the intention of its creation, which is represented by the planned output of the project titled *Pragmatic language level in individuals with autism spectrum disorders*, supported by the Grant Academy of the Czech Republic (14-31457S, 2014/2016, researcher: Vitásková), the results of which are discussed in the following part of this paper. For now, we will present some possibilities of diagnosing this language level with references to both domestic and foreign eventualities. Due to the variability and perfuse nature of the symptoms reflecting mainly on impaired communication skills, the diagnosis of PLL should be primarily the role of a speech therapist. Of course, a comprehensive insight into the given area can be created just in the case of interdisciplinary cooperation with a psychologist, psychiatrist or neurologist and a special education teacher (Vitásková & Říhová, 2014).

Mikulajová (2003) states that high-quality diagnosis alsorequires using anamnestic data of the child, analysis of the child's spontaneous expression, observations and interviews. Pragmatics should also be studied together with

shooting a video, preferably in the child's natural environment (home, school); only then can we objectively capture all signs of the disruption. The general procedure for the diagnosis of impaired development, which can be modified also for the examination of pragmatics, is presented by Bernstein and Tiegermanová (in ibid.). Other auxiliary diagnostic instructions may include the Heidelberg test of speech development (HSET; however, the results are not quite significant due to the lack of Czech standardization (Grimmová et al., 1997). Currently, the research activity of experts participating in the creation of a completely new diagnostic tool called Functional Communication Questionnaire (DFK) (*Functional Communication Questionnaire*, 2014) is certainly worthy of consideration.

In Slovakia, another example is the test from 1998 called Examination of Functional Communication (VFK) (Cséfalvay & Demovičová) (Mikudová, 2014). A relatively new and practically conceived publication, focused on diagnosing not only pragmatic language level but also other areas, is presented by a team of authors under the name Diagnostic Domains for Pupils with Impaired Communication Skills, mainly for SPC workers. The material provides assessment of pragmatic language level and specifically also of non-verbal communication in children using a five-stage scale. In the same context, it also lists other ancillary diagnostic materials: the Munich functional developmental diagnosis for children from 0-3 years (1990), Bayley's standardized scale of child development (1983), Kovařík's developmental screening (1979), and the Vineland adaptive behavior scale – VABS (1965) (Jehličková in Vrbová, 2012, p. 39). Diagnosis of pragmatic language functions is addressed, for example, by the Test of Pragmatic Language (TOPL), Phelps-Terasaki, Phelps Gunn, 1992, as well as by the Test of Language Competence-Expanded Edition, Secord E. (1989) (Čadilová et al., 2012). There are ASD screening techniques that do not lend close focus on pragmatic language level, such as DACH (Children's autistic behaviour) detecting disruption of verbal communication, non-verbal communication and social behaviour, or structured examination using ADOS (Autism Diagnostic Observation Schedule) testing (Thorová, 2006). However, the genesis of evaluation and selection of the most appropriate and pragmatic-linguistically sensitive as well as relatively reliable test confirms that our knowledge of this area is still insufficient. A certain limitation and criticism of TOPL in favour of using CCC-2 test material better reflecting the degree of pragmatic disorders is noted in the study by Volden & Phillips (2010), for example. Evaluation of children's communication – CCC-2 (Children's Communication Checklist) is a screening of all communication problems, including the identification of pragmatics disorders. The first testisimplemented by a parent or another adult who is in the immediate vicinity of the person with ASD. Evaluation categories include the start and scenario of the speech, the language used, the context, non-verbal communication, repetitive interests, the frequency of speech, the use and understanding of social rules, the ability to

steer the conversation, understanding humour, etc. Evaluation takes 15 minutes; after this time, the recording sheet is passed on to a specialist who makes the final evaluation (Volden & Coolican et al., 2008; Reisinger et al., 2011).

Professional, scientific-popular as well as fiction literature focusing on the issues of persons with ASD provides practical guidance that can stimulate the skills vital for seamless communication with the mainstream society. Here, we will present several examples of how each area can be developed (Mikudová, 2014). Disruption of eye contact, quantitatively as well as qualitatively, is usually the primary symptom of ASD (Říhová&Vitásková, 2012). An element for its mediation may be a verbal instruction, such as "Look at me", along with a reward (gradual modification of the reward into a social reward is necessary) located at the level of the patient's eyes. Another means, already more demanding, is temporary inactivity and silence. Addressing and initiation of conversation should be carried out without undue manifestations or even unpleasant physical touches. Given that people with ASD may have an increased need for tactile stimulation, we can commonly come across inappropriate behaviour and the failure to observe suitable proxemics. For this training, we use role play, group training of social skills or drama lessons (Howlin, 2005). According to Attwood (2008), the positive results of training that focuses on commenting upon the given fact, expressing agreement or disagreement or compliments, are manifested by repeated use of sample situations, picture attachments, etc.

In people with ASD, the inability to express own emotions and recognize feelings in others is a specific and significantly disadvantaging symptom. It is important that persons with ASD are first familiarized with the detailed characteristics of emotions that are to be understood, i.e. they should know what happiness or sadness means, etc. Even in this case, positive results were confirmed when using model situations (through images, photographs, video or audio). The patients describe the phiz of characters, what they experience, how they feel, what caused these emotions, etc. Initially, people with ASD learn to distinguish discrepancies between sadness and joy, and then they select from a wider range of emotions (angry, disgusted, etc.). The basis of functional communication is the development of the ongoing topic of conversation as well as the ability to ask additional questions and show interest in the utterance of the communication partner (Attwood, 2008). Regarding the development of reciprocal conversation, Richman (2008) mentions the following example of utterance of an adult and the answers of a child at play, when walking outside or looking in the mirror.

Methodological aspects of the research

This part of the paper will introduce the particular results of the research conducted within the project titled *Pragmatic language level in individuals with*

autism spectrum disorders (14-31457S, 2014/2016, researcher: Vitásková), supported by the Science Fund of the Czech Republic (GAČR) and implemented at the Institute of Special Education Studies, Faculty of Education, Palacky University in Olomouc.

We will discuss a component part of the research using the method of questionnaire survey as the main research method of choice. The questionnaire consisted of 20 items, predominantly (n=17) having a semi-structured nature. It includes entry information about the research, the assurance of anonymity and final space for any comments and suggestions. During its construction, we preferred the online version made through Google Drive service. The questionnaire was then distributed electronically; contacts of individual respondents, i.e. speech therapists working in the Ministry of Health, Ministry of Education and Ministry of Labour and Social Affairs, were obtained using the online freely accessible e-mail addresses. This mainly relates to the web address of the Association of Clinical Speech and Language Therapists of the Czech Republic, the directory of special education counselling centres for children with communication disabilities; other contacts were found individually.

The questionnaire was distributed on 15 March 2014, and the total number of distributed questionnaires was 745 (n=421 for clinical speech and language therapists, n=257 for speech and language therapists in schools, n=67 for speech and language therapists in social resorts).

Research objectives

In this paper, we focus on the following research objectives:
1. To find whether the addressed respondents perceive the importance of focusing on PLL
2. To analyse whether speech and language therapists in the Czech Republic apply diagnostic tools for PLL in the context of speech and language therapy intervention in individuals with ASD, and to identify what kind of diagnostic materials are involved.
3. To detect communication areas on which speech and language therapists in the Czech Republic subsequently focus in individuals with ASD

Research questions

The research questions include:
1. Do the addressed respondents perceive the importance of focusing on PLL?
2. Do speech and language therapists in the Czech Republic apply diagnostic tools for PLL in the context of speech therapy intervention in individuals with ASD? What specific materials do they use?

3. On which communication areas do speech and language therapists in the Czech Republic focus in patients with ASD?

Results of the research

The first area discussed relates to the question whether the addressed respondents (speech and language therapists in the Czech Republic) perceive the importance of focusing on PLLin individuals with ASD.
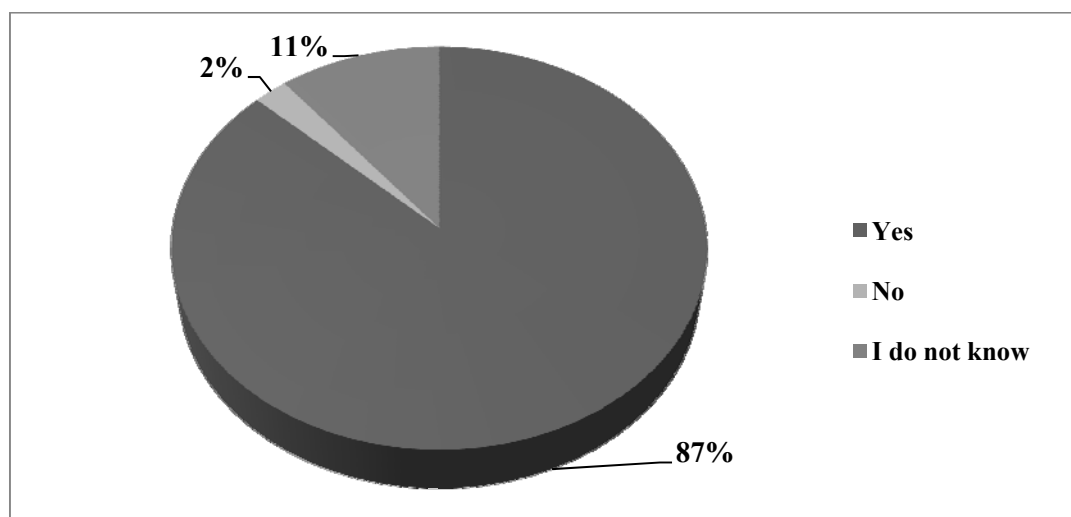
Figure 1. Reflection of the importance of focusing on pragmatic language level in individuals with ASD

Fig. 1 shows that the main representation is of the positive opinion on the diagnosis and stimulation of PLL – 87% of the respondents. Negative reflection is represented by 2%, i.e. 4 respondents indicate that the diagnosis and stimulation of PLLis not significant. Higher percentage representation appertains to the category of "I do not know", which was chosen by19 respondents (11%) and which cannot be seen as negligible; on the contrary, it reveals insufficient awareness of the field.

The answers to this questionnaire item were subsequently justified – see the following selection from individual responses:

R1: *"In order to achieve mutual understanding, evaluation of the current abilities to communicate and the communication barriers is necessary. Also, improvements in the quality of life using all means of communication must be applied. The language is essentially worthless to communication without understanding the pragmatic level."*

R2: *"Because this level is impaired in all people with ASD and because these people are actually not able to communicate, there is a lot of misunderstanding, stress, etc. Within the confidence gained in the successful development of this language level, communication skills might also develop as well as the social self-fulfilment of persons with ASD."*

R3: *"It allows us to focus the therapy in a targeted manner and thus develop pragmatic language level. In our practice, there is no time for it, but it is important for life (kindergarten, family, school, etc., should think of it permanently)."*

The recorded answers are factually correct and well describe the essence of the importance of focusing on PLL in individuals with ASD. Unfortunately, the negative responses were not properly specified.

The data below relates to areas of communication that are subsequently intervened by speech and language therapists in the context of speech and language therapy intervention in individuals with ASD. Focusing on these areas is also perceived as a reflection of knowledge of the basal language problem in people with ASD, i.e. deficits inPLL, which is also directly associated with recognising the significance of diagnosing PLL in individuals with ASD.
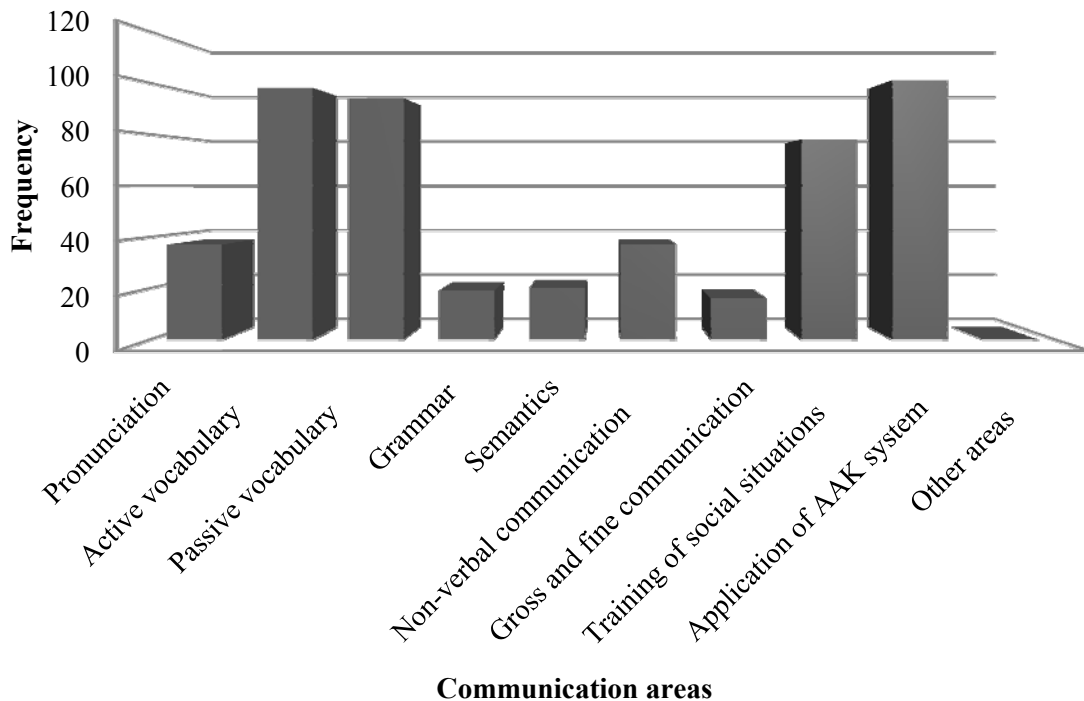
Figure 2. The focus of speech therapists (communication areas)

Fig. 2 shows the areas of communication on which speech and language therapists focus during speech therapy interventions. The results clearly demonstrate that speech and language therapists apply the elements of augmentative and alternative communication at the highest frequency (N=101; 20.2%). The following positions belong to the development of active vocabulary (N=98; 19.6%), the development of passive vocabulary (N=94; 18.8%) and training of social situations (N=78; 15.6%). When looking at the antagonistic position, the least used speech therapy interventions are those focusing on gross and fine motor skills (N=16; 3.2%), grammar (N=19; 3.8%), semantics (N=20; 4%) and pronunciation (N=37; 7.40%).

It is possible to say that we register insufficiently addressed spheres also in the area of targeted development, i.e. those associated with gross and fine motor skills (the respective area was recorded only by 16 respondents). According to the statements of individual respondents, another insufficiently addressed area is the development of grammar, which is critical due to difficulties with generalization and cognitive flexibility. Low frequency saturation is also seen in the case of non-verbal communication, which again represents striking differences in individuals with ASD.

Now we will mention the aspect of reception of communication perceived as impaired in people with ASD by speech and language therapists, and consequently, the diagnostic materials that they apply in individuals with ASD for diagnostic purposes. Knowledge of aberrant language level is the primary prerequisite for properly oriented speech and language therapy interventions and adequately selected intervention content.

Table 1. Reception of impaired communication abilities in individuals with ASD

Communication area	Frequency	Percentage frequency
Phonetic-phonological language level	56	9.44
Morpho-syntactic language level	74	12.48
Lexical-semantic language level	82	13.83
Pragmatic language level	132	22.26
Non-verbal communication	92	15.51
Gross and fine motor skills	34	5.73
Oromotor skills	28	4.72
Specifics in visual and auditory perception	86	14.50
Other	1	0.17
I do not know	8	1.35
Σ	**593**	**100**

The above Tab. 1 clearly shows that the area perceived as impaired is mainly that connected with PLL (N=132; 22.26%), which can be considered as a positive results ince the deficits in this sphere are typical of people with ASD. PLLis in close reciprocity with non-verbal communication, which was recorded by 92 respondents (15.51%). In case of this category, the frequency is already lower but it occupies second frequented position. The following frequency is specific for other variable symptoms that include the specifics of visual and auditory perception (N=86; 14.50%), followed by lexical-semantic language level (N=82; 13.83%) and morpho-semantic language level (N=74; 12.48%).

One of the lowest saturated areas can be considered aberrations in gross and fine motor skills (N=34; 5.73%) and the aspect of or motor disorders (N=28; 4.72%). Despite the fact that these difficulties are detected in the smallest

numerical representation, we can record them in the context of clinical ASD picture, especially in the diagnosis of Asperger's syndrome or atypical autism, and their presence may complicate the implementation of speech and language therapy intervention and may imply contraindication in the application of intervention procedures requiring fine and precise or motor skills, and gross and fine motor skills.

Regarding the diagnosis of PLL, it is clear that 69 respondents out of the total of 118 speech therapists caring for people with ASD are specifically focused on diagnosing this level. These therapists represent 58.47%, which indicates slightly above-average inclination; however, this cannot be seen as sufficient due to the underlying problems of ASD.

Now, we will specify the diagnostic tools applied in the diagnosis of pragmatic language level in individuals with ASD. In order to map this area, the questionnaire contained an open item in which the interviewees should have noted instruments used for diagnosis of this area of communication. Below, we present some direct statements of the respondents.

R1: *"HSET test, I have no other diagnostic materials, own custom modifications, observations, interviews. Non-standard H-S-E-T, also some tests or their parts for aphatic patients, corresponding to age. Without tools, standard questions, situational questions and stories."*

R2: *"None, evaluation and description of symptoms and traits falling into pragmatic language level. Understanding instructions, images, selection of pictures, scenic pictures, pictures showing some specific situations – greeting, etc."*

R3: *"Understanding YES-NO sequences, selection of options. I appreciate it as I perceive it. Interview with accompaniment, observations, communication with the patient. Observations, qualitative evaluations. I would examine the level at which the person communicates with his/her close people or strangers, how the person is able to learn, how he/she maintains eye contact, whether he/she use some communication aids, etc."*

R4: *"PEP-R, I do not know about any. Unfortunately, I have no diagnostic tool; based on indicative logopedicex amination, we assess the area of impaired pragmatic language level (maintaining eye contact, keeping the theme, dialogue, jumping into speech, formal language, informal language, etc.). Observations, interviews with parents, medical history data, games."*

These replicas highlight the main problem concerning the absence of diagnostic tests for evaluating PLL in the Czech Republic. This fact is agreed by all of the above presented respondents who point out to this insufficiency and orient themselves in practice mainly based on their own observations or interviews.

Conclusion

The presented questionnaire survey is a partial outcome of the GAČR project (14-31457S, 2014/2016, researcher: Vitásková) where the central focus is on pragmatic language level in individuals with autism spectrum disorders (ASD). The reason for choosing this issue is ASD topicality, reflected in the increasing prevalence of people with ASD, in the increased costs of VZPby 21% (the biggest health insurance company in the Czech Republic) and preferred integration and inclusive trend in special education. A prominent and specific symptom determining the psychosocial development of children with ASD and their subsequent education as well as work self-fulfilment is represented by deficits affecting communication skills, primarily the pragmatic language level.

The central sphere of investigation is the issue of diagnosis. If we look at communication areas diagnosed in persons with ASD in the context of speech and language therapy intervention, they primarily include active vocabulary (15.90%) and passive vocabulary (15.61%). Other positions comprise pronunciation (15.03%) and training of social situations (15.03%). One thing is clear: although focusing on pragmatic language levelis considered significant by 87% of the addressed respondents, in practice they still focus primarily on active vocabulary, passive vocabulary and pronunciation, i.e. the phonetic-phonological language level. Furthermore, it is obvious that only 40% of the respondents apply specific diagnostic tools for evaluating communication disorders in individuals with ASD; specifically, only 58% of the respondents focus on the diagnosis of pragmatic language level whereas the individual responses show that these respondents advert to the absence of diagnostic material directed at PLL in individuals with ASD, and in practice primarily prefer their own observations or interviews. When implementing speech and language therapy intervention, the speech and language therapists mostly use aids related to alternative and augmentative communication, the so-called classic image materials ommonly available in speech and language therapy workplaces and speech therapy software programmes. Regarding the specific materials applied in the context of intervention, we may mention the TEACCH programme, VOKS, PECS, material obtained within the course completed in APLA Prague and the publication *Speech and language therapy intervention in individuals with autism spectrum disorders* (Říhová & Vitásková, 2012).

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SOCIĀLĀ PEDAGOĢIJA

SOCIAL PEDAGOGY

COLLABORATION OF FAMILIES AND TEACHERS AS A FACTOR OF ENCOURAGEMENT OF SOCIAL EDUCATION

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Abstract. *Article reveals peculiarities of collaboration between parents and teachers in the education environment and development of collaboration opportunities. Successive impure strategy of research combining quantitative and qualitative methods is presented. Opinion on collaboration attributes of family members and school teachers (N=176) is analyzed according to the semi structured interview data and applying method of Content analysis. Results of quantitative research that was done using questionnaire reveal peculiarities of collaboration in the process of social education highlighting successful and non-successful areas of collaboration discussed as well.*

Keywords: collaboration, participants of education process, social nurture.

Introduction

Dictionary of modern Lithuanian language (2006) collaboration describe as common activity, acting together, focusing intellectual strength, trying to help to each other, coalescing for main goals. Scientific community acknowledges that it is rather difficult to find common, universal definition and model of collaboration that could fit to different areas of human wellbeing. And it is not an exception for practice of educational institutions.

Modern society that experience global challenges in pupil's social education is full of beneficiate unexpected events and stresses. Community of education institutions faces with complex social and educational problems that became great challenges for them. Pedagogues are responsible for children's welfare but without family and colleagues support, effective inter-collaboration with other institutions it is difficult to satisfy social wellness needs of all participants of educational process. Scientist's points that process of social education could be more effective when, on the one hand, pedagogues and other participants of education process are active, and on the other hand, when pedagogues professionally are able to manage process of social education both in institution and outside (Alifanovienė, Vaitkevičienė & Musvicienė, 2014, Kontautienė, 2010, Merfeldaitė, 2009, Indrašienė, Kvieskienė & Merfeldaitė, 2007).

Documents regulating education system of Republic of Lithuania indicate development, collaboration and constant reshaping attitudes between specialists

and other societal groups concerning activities of education institutions (LR Švietimo įstatymas, 2011, Valstybinė švietimo strategija 2013-2022m.). In new documents that foreseen advancement in social and educational wellness of the country societal group of social exclusion, assailable stratum problems (especially neglecting of children's rights) are discussed, and the ways of solution of these problems are designed: bettering life quality, safeguarding equal rights and social welfare (Lietuvos pažangos strategijoje „Lietuva 2030").

Child Welfare Program for 2013 – 2018 year points out necessity and satisfaction of pupil's needs and interests, creating for children conditions to be upbringing in the family, at the same time developing close relationships with institutions and specialists, to insure miscellaneous preventive, complex support and service accessibility in order to decrease social alliance and to create conditions for qualitative social education.

Purposeful and effective organization of the process of social education, collaboration of participant's of educational process is discussed in the documents regulating main activities of social educators of Lithuania as well: Social Educator Training Requirements (2001), Official Instructions of Social Educator (2001), and Regulation of Social Support Render (2011). Mentioned documents describe that seeking societal progress it is important to initiate changes in the main environments of person's development – family, educational system, community, public and cultural areas.

As Aramavičiūtė (2009), Leliūgienė &Terechovienė, (2011), Vaitkevičiaus (1995) says in this context all participants of education process become important significantly: child and his/her family, school, community.

In this context the most important is perception of systemic- structural factors of social education that emphasize functions of participants of education process in different levels: involving collaboration and interrelations, which are the basis of integral system of social education (Aramavičiūtė, 2009, Vaitkevičius, 1995, Bitinas, 2000).

*How pedagogues and family members percept and assess attempts to collaborate and its importance in the whole education process? What forms of successful and unsuccessful collaboration they distinguish?*These questions define the area of current research.

The aim of the research – is to analyze peculiarities of collaboration process in the school environment and to reveal successful and unsuccessful forms of collaboration.

Object of the research – peculiarities of collaboration of participants of educational process: opinion of pedagogues and parents.

Methodology and sample of the research To answer the questions of research successive impure strategy combining quantitative and qualitative approaches was chosen. 176 school pedagogues of different age and gender took part in the inquiry procedure. Closed type of questionnaire based on theoretical studies (Kontautienė, 2010; Merfeldaitė, 2009; Vaitkevičius, 1995) and practical

experience was designed. Applying designed questionnaire collaboration abilities and collaboration attempts of respondents were revealed. Using Likert's type rank scale respondents were asked to assess statements according to their intensity from *exactly no* up to *exactly yes*. Empiric data was processed applying SPSS17 program version, descriptive statistics methods (unitary and percentage frequency, mean rank, standard deviation) were used, as well as statistic analysis according to Student's t criterion of ($t \leq 0,095$). To evaluate inner reliability of the questionnaire *Cronbach α* indicator was used (indicator of inner consistency is α coefficient) on the supposition that it is sufficient when exceeding quantity of 0,75.

Empiric data of qualitative research was gained applying semi-structuralized interview of for 15 families in order to learn their opinion on peculiarities of collaboration.

Questions of interview were composed according to the scientific studies of authors mentioned above. Interview reveals opinion on significance of collaboration, attempts, successful and unsuccessful forms of collaboration. Empiric data of qualitative research was processed applying method of content analysis and validated by experts. Data of qualitative research was divided into diagnostic areas and categories.

Analysis of collaboration peculiarities in the process of social education

Statements educing pedagogue's collaboration abilities and attempts in order to make process of social education more qualitative, were given to respondents. Analyzing data concerning respondent's abilities and attempts for collaboration the indicator of inner reliability *Cronbach α alfa* (α = 0,91) was set up, and this show high reliability of composed questionnaire (see Table 1).

Table 1. Analysis of Pedagogue's Ability of Collaboration

Collaboration Ability	Gender	Amount (N)	Mean (M)	Average of Standard Deviation (SD)	t meaning ($t \leq 0,095$)
I know how to collaborate effectively with pedagogues and administration	Male	23	2,26	0,864	0,518
	Female	153	2,14	0,851	
I collect and use professional information, I deepen my knowledge about positive collaboration	Male	23	2,35	0,885	0,317
	Female	153	2,23	0,885	
I'm participate in different events organized by administration and pedagogues actively	Male	23	2,35	0,885	0,548
	Female	153	2,23	0,885	
I feel that my decisions and opinion are meaningful for community of the institution	Male	23	2,61	0,499	**0,061**
	Female	153	2,38	0,707	

I'm able to plan and organize activities	Male	23	2,52	0,511	**0,019**
	Female	153	2,23	0,664	
I'm able to decree decisions concerning organization of education processes in the school	Male	23	2,35	0,885	0,548
	Female	153	2,23	0,885	
I'm go-ahead and independent collaborating with participants of education process	Male	23	2,74	0,449	**0,004**
	Female	153	2,41	0,711	
I'm able to solve conflicts and problematic situations	Male	23	1,91	0,848	0,856
	Female	153	1,95	0,857	
I have abilities of communication and management of information (collection, saving, analysis)	Male	23	2,87	0,344	**0,002**
	Female	153	2,57	0,714	
I can initiate school community's collaboration by myself.	Male	23	2,30	0,876	0,985
	Female	153	2,30	0,904	
I have personal features (activity, responsibility, ext.) that stimulates collaboration of participants of education process.	Male	23	2,87	0,344	**0,002**
	Female	153	2,58	0,714	
I'm able to share own experience with others.	Male	23	2,48	0,898	0,250
	Female	153	2,23	0,977	
I allot suggestions concerning development of effective collaboration	Male	23	2,48	0,898	0,250
	Female	153	2,23	0,977	

Pedagogues and family members collaborate solving various questions associated with social support. In this stage of research abilities and attempts of respondents to collaborate effectively in order to insure quality of social education process was analyzed.

Statistically significant differences of averages were revealed in the statements: *I feel that my decisions and opinion are meaningful for community of the institution* (*t ≤ 0,06*), I'm able to plan and organize activities *(t ≤ 0,019), I'm go-ahead and independent collaborating with Participants of educational process(t ≤ 0,004), I have abilities of communication and management of information (collection, saving, analysis) (t ≤ 0,002).*

Differences of averages in different groups of statements were major in the choices of men – pedagogue's group. Significant differences according to the age and work experience of respondents were not found as well as analyzing other statements, revealing pedagogue's abilities and attempts to collaborate with other participants of education process.

We can talk about tendencies that were revealed analyzing other choices. Pedagogues states that they are able to share own experience, to allot suggestions concerning development of effective collaboration, they collecting

and using professional information and deepen their knowledge about positive collaboration,pedagogues know how to collaborate with pedagogues and administration effectively, respondents indicated that they participate in different events organized by administration and pedagogues actively.

Collaboration areas between participants of education process that were revealed the research are mentioned in the main documents that define activity of social educator as well:Social Educator Training Requirements (2001), Official Instructions of Social Educator (2001), Regulation of Social Support Render (2011).

Opinion of family members about necessity of collaboration, development of its successful and unsuccessful forms was analyzed as well. Applying semi-structuralized interview gained empiric data was processed using method of content analysis according to foreseen diagnostic areas.Family members were asked to express their opinion on positive and negative collaboration, what collaboration forms are successful and which are not in the context of social education process. The analysis of empiric data let to single out semantic categories (see Table 2).

Table 2. Successful forms of collaboration (parent's opinion, N=15)

Category	Illustrating statements (example)	Number of Statements
Conversation	*Direct talk with class master; with subject teachers; warm and sincere conversation; up my mind arrangement of parent days, individual conversations with subject teachers and school events with parent's participation; dialogs supporting to confide and to express heart sores;*	8
Sharing of information	*Detail information; communication, sharing of information (example, TAMO, leaflets, non-formal sessions, developing collaboration, exp. It could be posters on different subjects, correspondence.)*	6
Discussions	*discussion; round table discussions, group discussions*	5
Common activity	*Common activities, events and ext.; trips and excursions; afternoon events with participant of patents; activities for pedagogues and children, other common events; when parents are involved into school events they meet each other, get acquainted with learning environment, teachers; meetings; consultations; various contacts with people.*	5
Objective evaluation of the situation	*While evaluating pupil teacher knows his strongest and weakest characteristics; use information about exceptional pupils and selects the most suitable teaching methods; assessment of pupils abilities and knowledge helps to motivate and enlarge student's attempts; „assessment must be objective"*	3

Research data reveal that successful forms of collaboration according to the informant's opinion are: *conversations (8), sharing of information (6), discussions (5), common activities (5), and objective assessment of pupils (3).* Parents want to talk with pedagogues, to get information (*during conversations, correspondents, TAMO*) about their children, their achievements, events taking place in the institution. Family members mentioned sincere and warm communication, conversations that support opportunity to express their sore feelings and at the same time to feel close members of institutional community. Parents wish and are ready for active collaboration forms: *to participate in group discussions, to participate in the round table discussions.* It means that participants of educational process are active, mature, and open to challenges to solve problems of pupil's social education. Common ideas were mentioned in the scientific studies of Kontautienė (2010) & Merfeldaitė (2009). As Ališauskienė & Miltenienė (2003) mentioned effective collaboration of participants of education process and creation of positive educational environment show their maturity that let to fee everyone equal and meaningful. It could be carried out presumptions that these findings create positive conditions for the organization of processes of social education.

Analysis of the research data shows that parents envisage other successful forms of collaboration as well. It is common activities of the community (common events, trips, excursions, meetings, discussions). During such activities children, parents and pedagogues could learn more about each other, they could know each other more objectively, and talk about problems and find ways of its solutions. Being involved into activities of school community family members could feel themselves not only as creators of general school wellness or "firemen's" of occurred problems. Parents become equal and full-value members of social education processes in school as well.

It was foreseen to reveal factors that conditions unsuccessful collaboration between participants of education process (see Table 3).

Analysis of research data indicate that parents pointed out five categories describing unsuccessful forms of collaboration. It is *lack of competencies (8), public talks (7), rigor collaboration (7) and personal characteristics that common for non-mature pedagogue's personality (7).* Incoherence, insufficient knowledge about pupils, bias solving children problems – these personal characteristics of pedagogues were mentioned by parents as well. According to the informants opinion pedagogues are not motivated for collaboration always, they don't want to hear negative information concerning pupil's or families' bothers, and usually the limits their collaboration informing parents about occurred problems without attempts to solve problematic situations.

Informants are not satisfied with pedagogue's behavior when children problems are discussed publicly during class meetings, by phone calls or even stopped in the street, they feel depressed when they hear eminently expressed

demand for collaboration; peremptory strain invitation to visit school due to the child problems which sometimes are not serious.

Table 3. Unsuccessful forms of collaboration (parent's opinion)

Category	Illustrating statements (examples)	Number of statements
Lack of competencies	*Teacher's lack of sequence working with pupils; tasks that are given without discussions in classroom, they are desultory... When teachers don't know pupils well; there is no collaboration when I didn't get answer; There is no wish to collaborate; reluctance to hear negative information; lack of competencies; the most unsuccessful forms of collaboration when parents are simply informed about problems without suggestion how to solve them; unfairness when one side has right to talk;*	8
Public talks	*Publicity, phone calls, to stop person in the street,temporal and public communication, public information during parent meetings, public talks in the stores, conversations about children in the streets;*	7
Rigor collaboration	*Eminently expressed demand for collaboration; when some problems in the school appear invited parents not be frightened; peremptory straininviting parents to visit school; prominent and strict request to come to the school due to the child problems which sometimes are not serious;*	7
Personal characteristics	*Lack of communicability, laziness, insincerity, spite, envy, there is no confidence in each other, tension and fear to insulted by othersonly, intolerance, vindictiveness, incoherence, prominence of own personality.*	7
Other forms of unsuccessful collaboration	*Questionnaires; researches; correspondence.*	5

The results of the research reveal that parents envisage features of non-mature personality of pedagogues as specialists. Family members mentioned lack of professional competencies, pedagogues insincere, virulence, jealousy, intolerant. These personal characteristics limits person's maturing process and at the same it creates barriers for person professional mastership (Rogers, 2005; Maslou, 2006).

Conclusions

1. Communities of education systems are not able to solve complex social and educational problems in the conditions of globalization and social integration. In order to satisfy pupil's needs and to insure their social

wellness, it is necessary to mass collaboration of participants of education process organizing effective social education. These processes are foreseen in the documents regulating education system of Republic of Lithuania including social education as well.

2. Data of quantitative research reveal abilities of pedagogue's to organize institutional social education. Statistically significant differences of averages show that pedagogues understand importance of their decisions in education communities (t ≤ 0,061), respondents are able to plan and organize social education (t ≤ 0,019), and they are initiative and independent collaborating with participants in the education process (t ≤ 0,004). Results of the qualitative research show that for successful forms of collaboration informants indicated discussions, sharing of information, common activities and objective evaluation of pupil's academic achievements.

3. Family members are open for such collaboration forms as round table discussions, and it show's their activity, readiness for changes. As negative forms of collaboration lack of professional competences of pedagogues, public discussions about pupil's social problems and strict communication were mentioned. These personal characteristics limits person's maturing process and at the same it creates barriers for person professional mastership.

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MODELLING OF TRANSITION TO ADULTHOOD FOR ADOLESCENTS AT SOCIAL RISK

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Abstract. *The transition from the education system to the adult labor market system is mediated by interacting subjective and structural factors specific to each country including its educational system structure and organization, social and cultural context, demographic factors, labor market and role of state in shaping labor supply and demand. The article reviews the theoretical analysis of transition to adulthood of adolescents at social risk attending day care center. Adolescents at social risk attending day care center have not enough social skills. According to the study, social risk adolescents attending day care center lack of self-awareness skills at most. Essay analysis revealed that these teens are unable to organize their nutrition properly, purchase foods themselves and rationally manage their money. After applying the social skills program the most obvious change in social risk teenagers attending day care center was better self-knowledge skills. These adolescents gained knowledge of healthy nutrition. They would consider before buying certain goods is it necessary. In their essay about personal finance savings social risk adolescents in day care center expressed a more rational approach to money.*

Keywords*: day-care center, the transition to adult life, social skills, social risk teenagers.*

Introduction

Teen is one of the most sensitive and vulnerable groups in society, since this age period they are confronted not only with physiological changes in the body, but there is a problem of self-realization and looking for personal identity. According to Gailius and others (2013), identity search is often associated with internal and external tensions, otherwise referred to as the state of crisis phenomena, and often filled with conflicts. Psychosocial development of personality is complicated by negative experiences, such as cognitive and emotional deprivation, insecurity and feelings of rejection in the family, outbreaks of physical and psychological violence in the family and in the environment, failures of learning and interaction with peers and teachers school and so on. These experiences certainly change the normal psychosocial development of person cycle and qualitative parameters (Bakutytė, Geležinienė et al. 2013). Obviously, due to the lack of social skills the transition to adult life period becomes very difficult for adolescents at social risk because they do not have enough knowledge about the self-life characteristics. Most social-risk adolescents fail to manage social situations, constructively deal with conflicts

and problems that arise. It should be noted that the transition from teen school age to adult life is determined by many factors and their interactions. So disturbed functioning of one link ruins the whole system performance. In this case, the social-risk adolescents do not have suitable example in their families, i.e. at the institute of primary socialization. For this reason, social risk teens are usually picked up by the in appropriate behaviors. It is due to interruption of the process of socialization they get into the social risk group. Smart and others (2008) (cit. Legkauskas 2013) suggests that adolescents with a good relationship with their parents are less likely to use drugs, learn better, are more independent and less experienced social and psychological problems. The authors stress that they have better social skills and are more optimistic about the future.

Looking for solutions of social problems of children at risk important role goes to non-governmental organizations that provide integrated social services and thus address not only the child problems but those of the whole family (Kvedaravičiūtė, 2007). According Griškutė and Masiliauskienė (2010), one of the institutional aid forms for social risk families and children living in is the children day care centers. It is assumed that attending children day-care centers promotes a healthy and productive personal development. These centers provide comprehensive assistance satisfying the children needs which are not met by their biological parents. In addition, it is necessary to mention that day care centers for children of problem families help to normalize disturbed relationships with the social environment. In order to ensure for teenagers from disadvantaged families the successful adaptation and integration in society, more attention should be paid to the problems of preparation to an independent life. Social skills training and preparation for independent living should become a priority for the public and attract considerable attention to the development of educational programs and activities for the organization of training to develop these skills, not only in the context of formal education, but also in non-formal education. Developing of the skills allows avoid of the various deviant behaviors, to change inappropriate behavior towards appropriate, to prepare for independent living (Vosylienė, 2009).

Scientific research and practical relevance. Recently, a number of issues on social skills examination have been researched. Vaitiekienė (2013) analyzed the social skills of children attending day service activities. Jančauskytė, Širiakovienė, Plaušinaitienė (2013) studied the social skills development opportunities for children from disadvantaged families using art activities in children day care centers. Malinauskas (2011) in his study evaluated the social skills of children at risk. Raudeliūnaitė (2007) revealed the peculiarities of expression of social skills of visually impaired teenagers studying in special and mainstream schools and the pedagogical assumptions of their education. Webster, Low, Siller and Hackett (2013), examined the influence of father's role in the child's social skills development process. Erozkan (2013), focused on communication skills arguing that communication is a key element in the

process of human development, which helps to make contact with others. However, there is still a lack of comprehensive research of the peculiarities of social risk teens transition from school age to adult life process. One of the first who began to examine aspects of the process were Hallahan and Kauffman (2003), but most of their studies examined the difficulties young people with disabilities experienced during the transition time. Bronte-Tinkew and others (2005) in the Report on transitory elements identified key areas related to the transition to adulthood. These are the independence, shaping the household and family, health area, preparation for work, entrepreneurial skills, civic participation, social and emotional development, social relationships. Brazienė and Mikutavičienė (2013) analyzed the Lithuanian young people's transition from education system to the labor market from the employment policies point of view.

The object of research: the peculiarities of transition from school age to adulthood of social risk children attending day-care center.

The research goal: to present the characteristics of transition from school age to adult life of social-risk teenagers attending day care center, by developing their social skills.

Methods of research: Theoretical: the scientific literature analysis; Empirical: action research. Data processing method: content analysis. The graphical representation of the survey data conducted using Excel XP program.

The research instrument. Social skills training program. Topics selected on the basis of lessons from practical work experience of one article's author and of Bart, KH Schindler (2001) Social behavior guidance.

Problematic questions. Do social risk adolescents attending day care centre experience more difficulties during transition from school age to adulthood because of lack of social skills? Which skills need to be developed to have influence on successful transition to adulthood of adolescents at social risk? The article is based on the pragmatism philosophy ideas. According to this concept the development is oriented towards life problem solving via the activities and the practical experience is particularly stressed as the background of education. Thus, the transition of social risk adolescents to adulthood could be based on ideas of pragmatism philosophy as the only development of practical skills would allow for those adolescents to become suitable members of changing society. The practical knowledge acquired could be brought by the adolescents to daily life. Dewey (1998) states that pupils shall be able adequately solve arising problems which often are integral part of the life of adolescents at social risk attending the day care centre.

The representative of modern pragmatism Rorty (1999) stresses the importance of socialization in the life of the person. He states that *at first, the process of socialization is related with the truth as adequacy of public norms and conventions*. According to Rorty (1999), person until 18 or even 19 years acquires knowledge and is socialized. During the process of socialization the

individual by interacting with environment takes certain social experience, values which form the background for the shaping of main attitudes.

The methodology and organization of the research

The empyrical research has been performed using the qualitative approach. This approach is closer to the objectives of the research as it provides the possibility to investigate the particularities of transition from school age to adult life of social risk adolescents without giving too much importance to the quantitative indicators. Kardelis (2002) describes the qualitative research as the systematic non-structured study of case or group of individuals, of situation or event in the natural environment with the view to understand the investigated phenomena and provide the interpretation and holistic explanation of them. Applying only quantitative research makes it more difficult to examine everything what took place during the planned and organized exercise of development of social abilities (Vyšniauskytė – Rimkienė, 2008).

The action research is selected for this study. According to Charles (1999), action research is related with the creation of new plan and procedure and verification. Action reserach was done using the Social skills development program adapted by one of the authors which helps prepare properly for the transition from school age to adult life and for the independent life.

Preparation for independent life should be comprehensive and for this both practical as well as emotional and intepersonal communication skills are important (Independent living minimum standards recommended for children in foster care, 2004). For this reason, the concept of social skills is used as broath as possible in order to include not only emotional and interpersonal skills but also those skills which are important for daily life. According to Vaitiekiene (2013), social skills in narrow sense are those which help people easier adapt and communicate with each other. Social skills in broather sense mean the ability to acquire profession, find a job, deal with money, buy reasonably only what is necessary, maintain your own environment, keep clean facilities, follow norms of hygiene. Therefore in the first part of Social skills development program the interpersonal communication skills such as self-knowledge, management of anger etc.are stressed. Second part is focused on daily life skills such as personal financial savings, preparation of food, personal hygiene etc. The program is composed from 12 exercises: 1) Presentation of the program, knowing each other, building up of agreements; 2) Expression of feelings, anger management; 3) Self-knowledge; 4) The world where I would like to live; 5) Compliments and saying of them; 6) Body language; 7) A healthy diet; 8) Food preparation; 9) Shopping at the grocery store; 10) The personal hygiene; 11) Personal Finance; 12) Lessons learned, summary of expressing feelings. Central method of research data collection method is the analysis of essays of social risk teenagers attending day care center. Essays topics are following:

„How do I express my feelings and manage anger?" „How well you know yourself?", „The world in which I would like to live", „How I say compliments and respond to them?", „Nonverbal language in my life", „My eating habits", „Food preparation", „Shopping at the grocery store", „How do I care my hygiene?" „My personal finances".

The obtained material processed using content analysis method that was used according to Straus, Korbin methodological justification (Страусс, Корбин, 2001). Data categorized by semantic links and graphically depicted using Microsoft Office Excel.

The action research have been applied, which according to O'Brien (1998) is used in real life, but not for unreal situations, since the main focus is on solving the real problems and on the holistic approach, because it is more focused on problem-solving, and not only to data collection and analysis. The study included classes and observations of social risk teenagers attending day care center behavior and the environment around them. „As the action research is done in the real context and involves close and open communication between related persons, the researchers should pay special attention to the ethical aspects" (O'Brien, 1998). Therefore, while performing action research in the day center, social risk adolescents, in particular, have been informed about the exercises, which would be organized. The study participants must know what will be the study and its tasks. Writing essays was guided by ethical principles such as confidentiality, democracy, fairness and privacy. The research participants also agreed to participate voluntarily in the study performed. Efforts have been made to highlight the desire of positivity and changes at the end of exercises.

Operational phases of the study

I. The assessment of social and life skills of social risk teens at the beginning of the program.

II. Evaluation of the effectiveness of the program at the end of the program. III. Applying the program on social risk adolescents.

Phase I. The first step was to figure out the social risk adolescent social skills level. Consequently, pupils were asked to write essays on the following topics: „How I express feelings and manage my anger?" „Do you know yourself well?", „The world in which I would like to live", „HowI say" compliments and respond to them?" „Nonverbal language in my life", „My eating habits", „Food preparation", „Shopping at the grocery store", „How do I care about my hygiene?" „My personal finances". Essays topics coincided with the topics to be covered during the classes foreseen in order to assess the social and life skills development after completion.

Phase II. At this stage, it was planned 12 sessions (the introductory part, 5 classes for the social skills, 5 classes for life skills, summary of sessions). Social

and life skills education was organized on average twice a week. According Vyšniauskytė - Rimkienės and Liobikienė (2012), social skills training sessions recommended to be organized at least once a week, and the optimal solution is two times per week. The exercise time is 1.5 hours. Since for some of the topics tackled was not enough time for the pursuit of one, they were divided into two parts. The first part presents the theoretical part, the second covers the practical. Each session began with a introductory theoretical part, then led a practical exercise, and the session ends with a summary of the discussion and the expression of feelings of participants. A lot of attention is paid to pupils' needs and purposeful time spending.

Sessions were led by the Social skills development program based on Snir and Malinauskas (2006) practical exercises that develop social skills, as well as on Orphans and children without parental care independent living skills training program implementation recommendations (2007), on elaborated by Bučinskienė, Baranauskienė, Butvilienė, Grėbliūnienė, Kasperavičienės, Lapienis (2001) Chef's of cooking guide, and Bart and Shindler (2001) advices in the Social behavior guide for development of life skills. During this phase, so called „Spiral" approach was used, i. e. constant checking up how adolescents perceive training material and how they accept it.

Phase III. This is a very important step, as it provides the opportunity to evaluate the effectiveness of the program. In order to assess activities performed and social skills training program influence on social risk adolescents, the learners were again asked to write essays on topics already mentioned above. During this phase, experience is summarized, which makes it possible to adjust the program and to develop a project.

Sample and local characteristics. The study was conducted in children and youth day center in Kelme, from December, 2013 until February, 2014. The convenience sample was used in the study. The participants were 12 teenagers at social risk attending the day care center. Since all the participants of the research were minors (aged 13 to 17 years), the study was carried out having social risk teenagers attending day care center, their parents or guardian's permission. In the study, data was collected on the demographic situation of the respondents (i.e, gender, age). From the 12 respondents to the survey 8 were girls and 4 were guys.

The analysis of essays written by social risk teenagers attending day care centers before classes

In order to structure the responses of social risk adolescents attending day care centre about expressing feelings and anger management six categories were created: 1) Adequate anger management techniques; 2) The positive expression of feelings; 3) Lack of knowledge as to express feelings; 4) The expression of feelings according to the situation; 5) The physical expression of anger;

6) Bullying as reason to be angry. We can assume that these are only theoretical answers, because in reality the majority of adolescents belonging to social risk group are not able to properly express their feelings and manage anger but. They lack the skills that help manage anger and express other feelings, positive or negative feelings expression depends on the current situation, being unable to properly manage and express anger in words, they do it by using force. Bullying prevails among the disadvantaged teenagers and that cause negative emotions, including anger.

Peforming the analysis of social skills of social risk teenagers attending day care center there was extremely important to find out how these teens know yourself. Proper self-knowledge enables better understanding and feelings of others, developing empathy. Analysis of essays allowed to distinguish three categories regard the issue of self-knowledge. These are: 1) the lack of self-knowledge; 2) proper self-knowledge; 3) the effort to get to know yourself better. From the analysis of the respondent asnwers it can be assumed that the respondents lack of self-knowledge skills.

Respondents were asked to write an essay on topic „The world in which I would like to live." Four categories were distinguished: 1) expectations related to spiritual values; 2) expressing of unrealistic wishes; 3) emphasis on material things; 4) the need for a sense of security. From the analysis of the respondent answers it can be assumed that the respondents lack of self-awareness skills. Respondents would like to live in a world without anger, but they have unrealistic desires and fantasies associated with impractical things and their dream world is related only with material things. Not everyone feels safe.

In order to find out the peculiarities of communication skills of social risk teenagers attending day care center, they were asked to write an essay on topic „How I say compliments and respond to them?" Four categories wre distinguished: 1) Adequate reaction to the compliment heard; 2) A positive effect of compliments; 3) Telling often comliments to others; 4) Not willing to tell a compliment. From the analysis of the answers it can be said that the respondents properly react to compliments heard, they affect them positively and encourages to say compliments to others, and only a small percentage of the respondents do not want to say compliments to others.

It is necessary to mention the fact that communication skills are expressed not only the exchange of verbal information, but also through non-verbal communication. According to Pease (2003), during interpersonal communication process less than 10 percent information is transmitted by words, voice (tone of voice modulation, additional sound) transmits about 30 per cent, and nonverbal signals provide even about 60 percent of information. The structuring of the survey responses revealed three categories: 1) frequent use of non-verbal language in communication; 2) nonverbal language as an expression of feelings; 3) a rare use of non-verbal language. It can be assumed that their non-verbal language is primitive, as most of them are not properly mastered the

language of the body. Part of the study participants stated that the use of non-verbal language makes it possible to properly express their feelings without using words. The respondents claim that for them verbal communication between them is much more acceptable.

In preparation of social-risk adolescents for transition from school to adult life an important issue is their eating habits. Recently it has been observed that more and more teenagers choose fast food, which does not provide the essential nutrients. It can be assumed that having poor eating habits they transmit them to their children.

From the analysis of answers of the respondents about their eating habits three categories are distinguished: 1) unhealthy eating habits; 2) efforts to eat a healthy food; 3) food as a source of life. It can be argued that the biggest category is first one showing that respondents lack the skills associated with a healthy diet. Most of them not only fail to realize that the body must be equipped with the necessary nutrients but also fail to comply with any nutritional regimen. They don't follow the dietary regimen and don't eat in the morning and overeat in the evenings or even at night and only a small proportion of respondents try to take care of their diet and perceive food as material needed for survival.

From the analysis of essays of social risk teenagers attending day care center on theme „Food Preparation" five categories are distinguished: 1) Food preparation as a hobby; 2) do not wish to cook; 3) put emphasis on the aid for mother during preparation of food; 4) lack of time for cooking; 5) promise to start prepare food in the future. Respondents argue that they are interested in the preparation of food, they love it, but most of them do not prepare food themselves and can only help mother in this. However, neither one of them was not mentioned in an essay that food preparation requires not only produce a certain dish, but also to lay the table properly. Therefore, we can assume that they lack full-fledged cooking skills and are not interested to spend their time cooking, but all brings the promise in the future to begin food preparation.

From the analysis of essays of social risk teenagers attending day care center on the shopping skills three categories are distinguished: 1) Lack of independent shopping skills; 2) purchases o „unhealthy food"; 3) grocery choice considering the prices. It can be argued that adolescents belonging to a social risk group do not have adequate skills to independent shopping in the store, unable to choose suitable products, so they often use the list of foods drawn by mothers and due to lack of financial resources in their families respondents pay big attention to the price of goods.

The very actual problem for social risk adolescents is saving of money. Most of them do not have adequate skills that enable optimal use of the money. Therefore, it is essential to develop a rational approach to their money and their savings. The structuring of the survey responses revealed five categories: 1) lack of money saving skills; 2) lack of personal money; 3) efforts to save money;

4) efforts to earn money; 5) the targeted use of the family budget. It can be argued that the respondents don't have money-saving skills. Most of them are not only unable to save money, but also do not realize their value. So often they spend money for entirely unnecessary things, mostly sweets. It can be assumed that the respondents are not able to save money on the fact that they do not have personal finances they can manage. They seek not only save money, but want to try to make money themselves. Since the families of majority of respondents have very modest income, it tries to use the income for a meaningful and purchase only the minimum and most needed. It proves that the family develops money management skills, as the children are learning for targeted use of available funds.
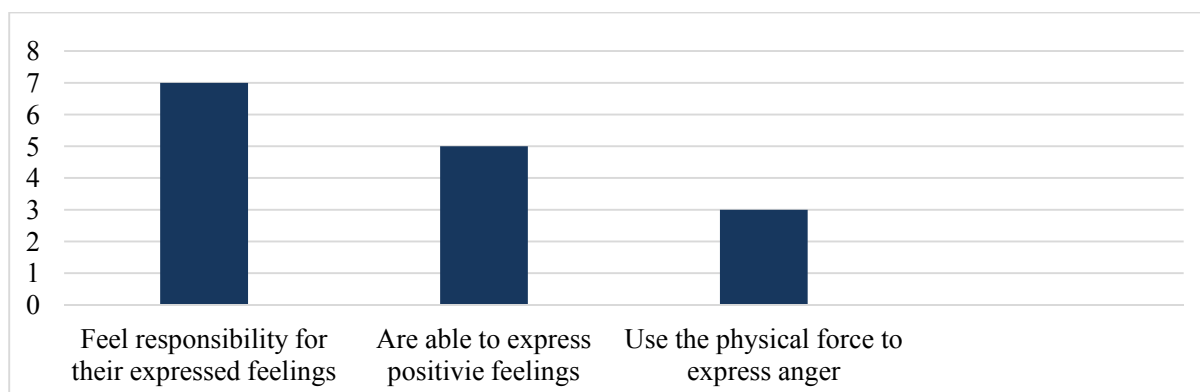
Figure 1.The ability to express feelings and manage anger of adolescents at social risk attending day care centre

The analysis of essays of social risk teenagers attending day care centre on theme „My personal hygiene" made it possible to distinguish the following categories: 1) Recognize the importance of personal hygiene; 2) Dental care as part of personal hygiene; 3) Emphasized the importance of hand washing; 4) Hair and scalp care as part of personal hygiene; 5) Lack of knowledge about personal hygiene skills. It can be argued that teens recognize that personal hygiene is very important and as one of the most important parts of personal hygiene identified by respondents is dental care. Most of them mentioned only that wash the teeth, but it is to be noted that the information about all the peculiarities of oral hygiene available for them is far from the complete. Respondents thought underline the importance of washing hands, hair and head. Only a small proportion of respondents admitted that they lack knowledge about personal.
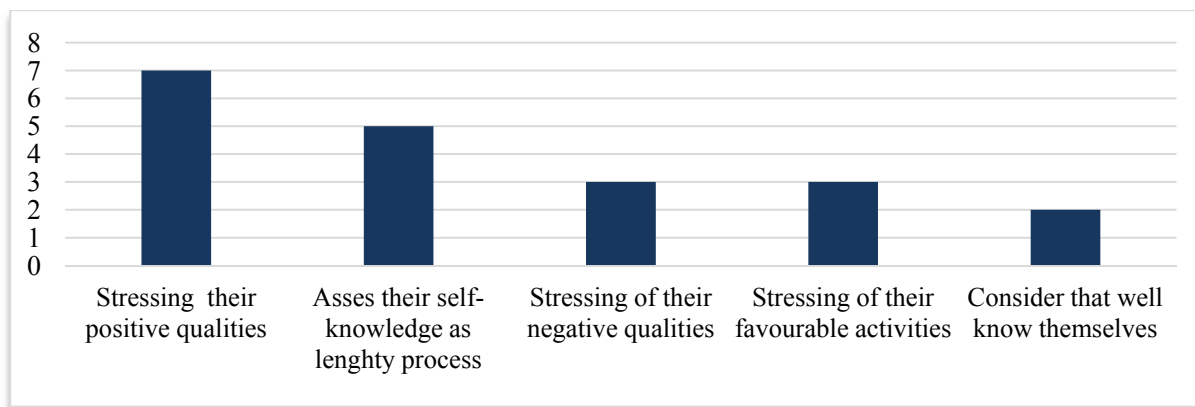
Figure 2. Self-knowledge of social risk teenagers attending day care centre

From the analysis of respondents answers it can be said that stressing positive properties shows that adolescents belonging to a social risk group are able to see positive qualities in themselves, which is the process of self-discovery component. Performing the analysis of self-knowledge, respondents identify it as a lengthy process. It is evident that the process of self-knowledge is associated also with negative personal qualities. Social risk adolescents are able to see in themselves not only positive but also negative qualities.

In order to find out how change the expectations of social risk teenagers attending day care center that are bound up with their living conditions, the exercise encouraging to discuss, express their own and hear other session participants' views has been organized. Discussion result reflected in respondents'essays which allowed the identify the following categories: 1) Drug and alcohol related harm and its perception; 2) Emphasis on the impact of the immediate environment; 3) Intimate topics avoidance; 4) The emphasis on spiritual values.
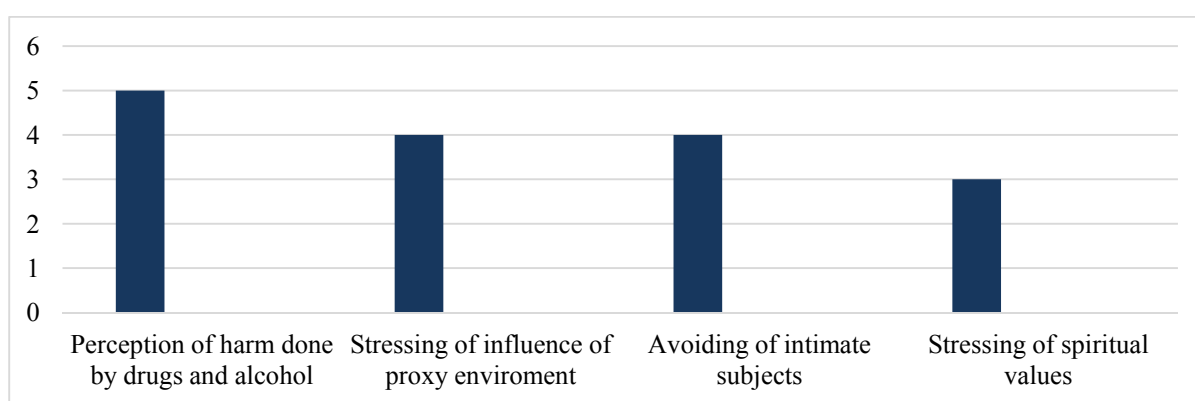
Figure 3. The expectations of social risk teenagers attending day care center, related to living conditions

From respondents thoughts in an essay on could notice that they are aware that alcohol and drugs have adverse effects on the human body. However, these

answers cannot be assessed unambiguously because often even realizing the damage they are unable to resist the use of psychotropic substances. From assessments of the respondents who identified in their essays the impact of immediate environment to personal socialization it can be assumed that they have a negative experience gained in their immediate environment. Child who has grown up in a socially unhealthy environment generally identify himself with the negative people surrounding him and form the respective image of his „I" (Eskytė, 2008). Social risk teens lack of information about sex education issues. This is what provokes avoidance of intimate topics. However, according to Obelenienė and others (2007), today's AIDS, alcohol, drugs, sex, and similar issues are not only sex education problems, but also show the lack of life meaning issues in school and society.

According Petrylienė and Smilgienė (2012), one of factors contributing to the child's proper conduct is the compliments and awards of parents. Therefore, it was intended to find out how social risk adolescents assess the compliment influence to the communication. Three categories are distinguihed: 1) mphasized importance of a compliments heard; 2) the importance of telling compliments to others; 3) Not willing to say compliments.
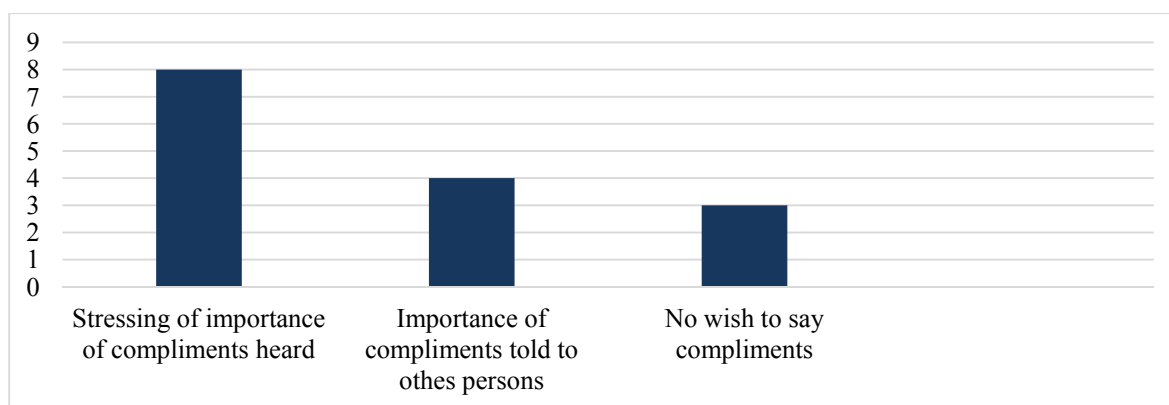
Figure 4. The ability of social risk teenagers attending day care centre to make compliments and respond to them

From the analysis of respondents' essays it can be assumed that compliments are very important for adolescents who have no self-confidence or have little self-confidence, as the positive opinion of others increase their self-esteem, makes it possible not only to rely on their own, but also on others. Respondents emphasize more willingness to say compliments, not just hear them. It is also possible to assume that the reluctance to say compliments toothers is the element of psychological defense of adolescents at social risk.

The structuring of answers of social risk teenagers attending day care centre about non-verbal language identified the following categories: 1) recognized importance of body language; 2) body language as an expression of feelings; 3) frequent use of negative body language.
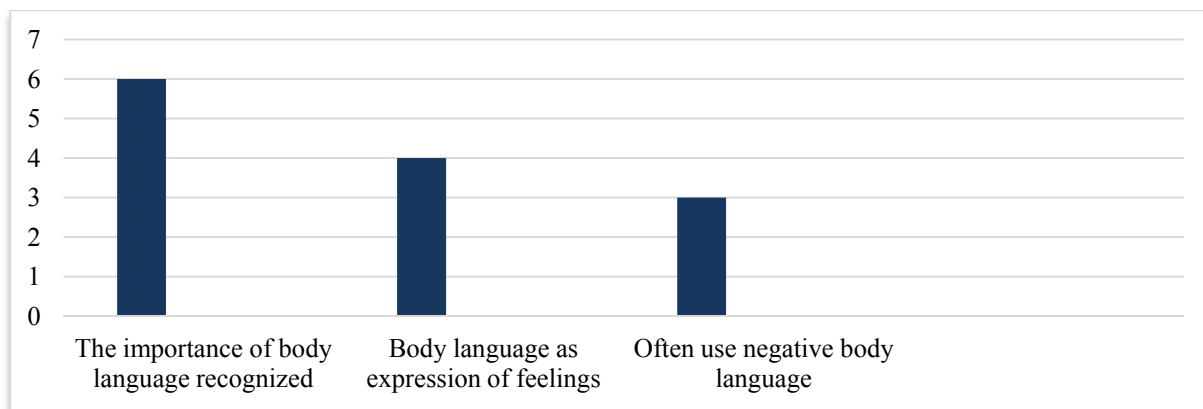
Figure 5. The ability of social risk teenagers attending day care centre to use non-verbal language

From the analysis of the respondents asnwersabout the use of non-verbal language it can be said that adolescents perceive the influence of body language to the communication. This language helps them express positive and negative emotions. Part of the social risk teenagers attending day care center highlight the inability to constructively deal with conflict or emerging problems. Being not able to find appropriate wys for conflict resolution they use negative body language or physical strength.

Frome the analysis of social risk adolescent life skills associated with dietary patterns four categories were identified: 1) efforts to eat a healthy food; 2) the emphasis on useful food nutrients; 3) emphasized importance of breakfast; 4) unhealthy eating habits.
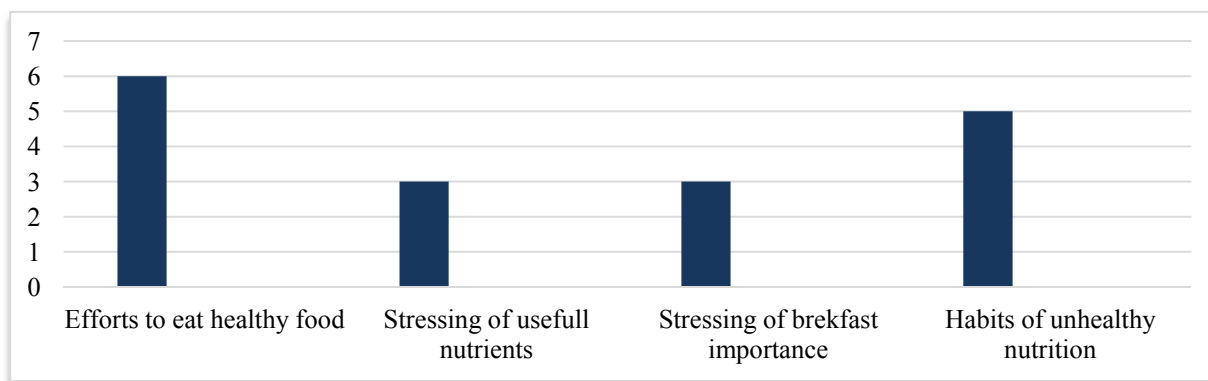
Figure 6. Dietary habits of social risk teenagers attending day care centre

Form the analysis of the answers given by respondents about dietary habits it can be said that the data reflected in essays do not meet the real situation, because before the start of the classes the majority of respondents said that their eating habits were identified as „unhealthy". Social risk adolescents perceive the essential nutrients and dietary regimen usefulness for their body, even know that sweets and other „unhealthy food" are not healthy for the body, but they can not refuse to eat them.

It is logical that eating habits are associated with cooking skills. Analysis of essay about food preparation allowed to identify the following categories: 1) table serving as part of cooking; 2) compliance with the rules of hygiene in food processing; 3) preparation of simple dishes for dinner; 4) efforts to learn to cook; 5) do not wish to cook.
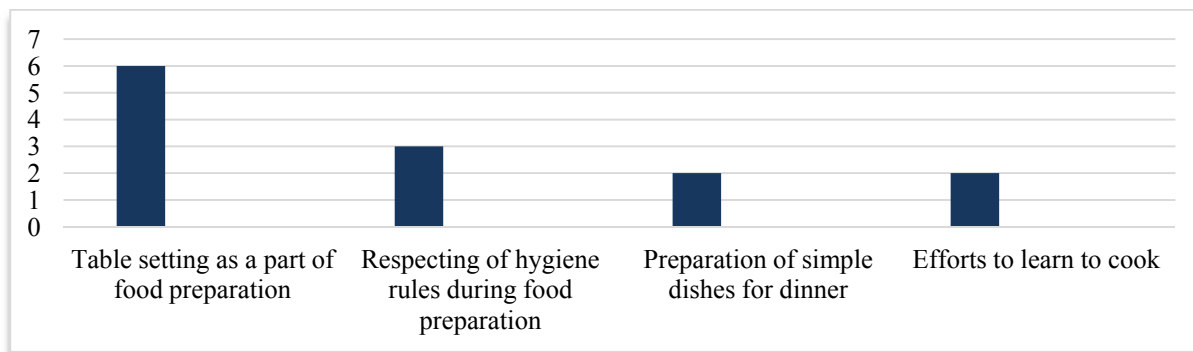
Figure 7. **Food preparation skills of social risk teenagers attending day care centre**

From the analysis of the survey responses about food preparation skills it can be said that responses reflect the fact that social risk adolescents attending day care centre after the classes were able to assign to food preparation not only cooking, but also table setting. They also are aware of the importance of hygiene in the food preparation and recognize the need to follow a specific nutrition regime.

Some respondents admitted that cooking makes them suffering.

The structuring of the respondents' answers about buying of foods skills identified three categories: 1) Emphasis is placed on usefull advices for shopping; 2) Often buy unnecessary items; 3) Buy taking into account financial opportunities.
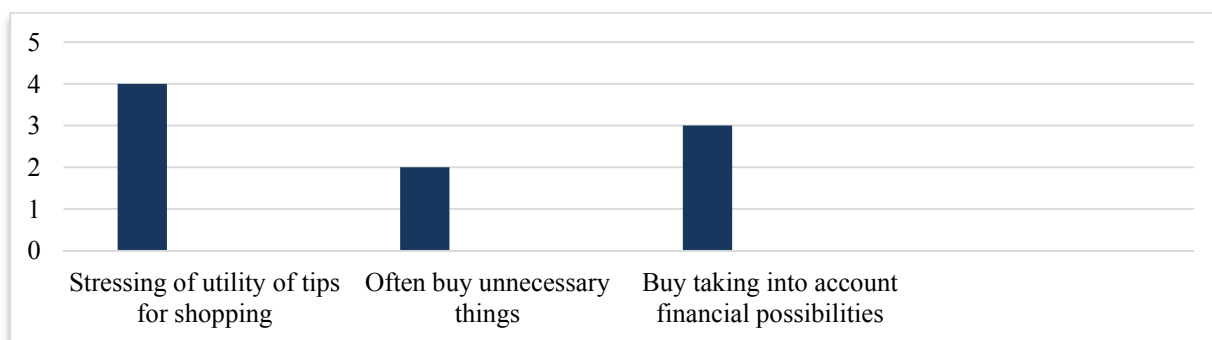
Figure 8. Buying of foods skills of social risk teenagers attending day care centre

From the learners' essays on food procurement skills it can be said that during the workshops social risk adolescents attending day care centre were acquainted with tips that provide information about a rational purchase. Pupils

recognize the importance of these tips, because they realize that by using rational buying tips it is possible to avoid buying unnecessary items. However, part of young people say that they buy depending on how many they can afford, but they are not able to buy everything they need and note the lack of financial resources.

The rational approach of social risk teens to moneyhas special significance for transition from school age to adult life. From the analysis of the respondents answers about the ability properly use personal finances the following categories were identified: 1) consider before purchasing an item; 2) collects personal funds; 3) take into account the family budget; 4) lack of money-saving skills.
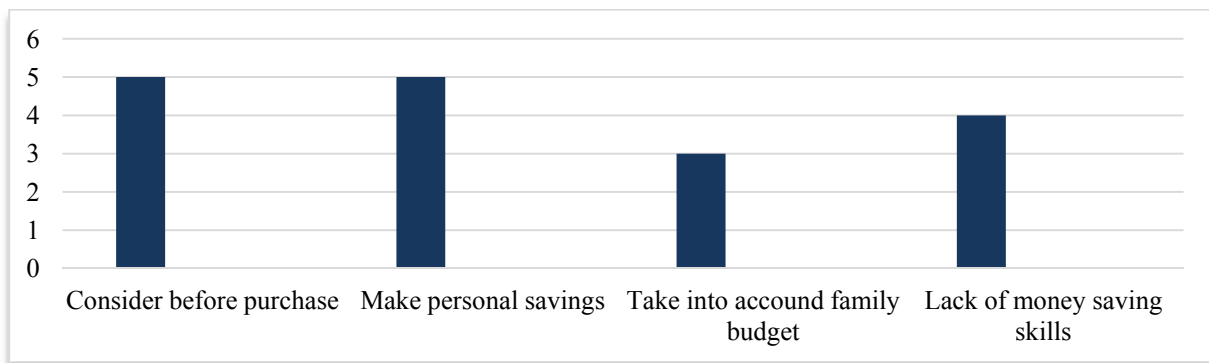
Figure 9. Money management skills of social risk teenagers attending day care centre

After analyzing the answers of the respondents about money management skills it is clear that they reflect the social-risk teen rational approach to finances. They consider before purchasing an item and store personal funds, as well as take into account the family budget. It can be assumed that such an approach was influenced by practical exercises provided. However, social risk adolescents attending day care centre have to deal with money-saving problem. It can be assumed that the inability to save money is influenced by teen parents, who also did not have adequate money-saving skills.

From the analysis of essays of social risk teenagers attending day care center about personal hygiene skills four categories identified: 1) maintenance of clothing and footwear as part of personal hygiene; 2) importance of personal hygiene part; 3) positive influence of mass media; 4) recognize the care of the intimate parts of the body as part of hygiene.
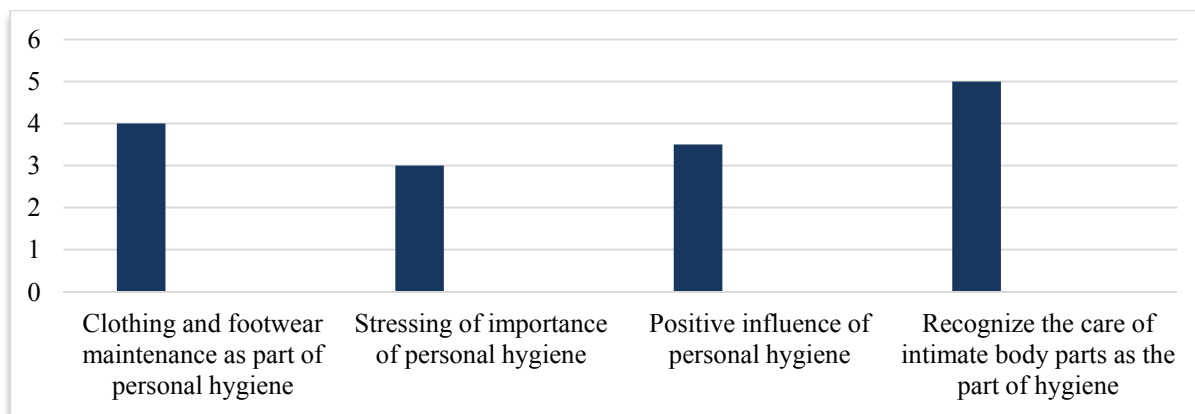
Figure 10. Personal hygiene skills of social risk teenagers attending day care centre

After analyzing the respondents answers about personal hygiene skills it can be said that personal hygiene is extremely important area for the transition from school age to adult life. Learners' essays reflected the emphasis on personal hygiene. According to them, it is essential to take care of their cleanliness. However, most of social risk teenagers attending the day centre as the most important part of personal hygiene distinguish teeth and oral hygiene, hand washing and care of the head and hair cleanliness. Only after the session held on the subject, pupils realized that clothing and footwear maintenance is also part of personal hygiene. Part of the social risk teenagers attending day centre also named the hygiene of intimate parts of the body as part of personal hygiene. It can be assumed that in previous essays this topic has not been touched since the learners did not dare talk about it.

Conclusions

The scientific literature analysis revealed that it is lack of detailed information about the process of social risk teenagers attending day care centre transition from school age to adult life. However, it can be said that the success of social risk adolescent self-initiation of independent life is significantly influenced by lack of social skills. Social skills are defined as the individual's ability to adapt to the environment and interact with others.

The analysis of the research data highlighted the lack of social skills of social risk teenagers attending day care centre, which hinders the success of the transition from teen school age to adult life process. According to the study, social risk adolescents in day center for most lack self-knolwledge skills. Essay analysis revealed that these teens are unable to eat properly, self-purchase the foods and rationally manage their money.

After apllying of social skills program most obvious change in disadvantaged teenagers attending day care centre is the self-knowledge skill, as in the second part of the essay teenagers were able to identify their positive and negative characteristics as well as favorite activities. It is noted that social risk

adolescents attending day care centre gained knowledge of healthy nutrition. The second part of the learners' essays emphasize rational grocery buying tips utility. Therefore, it can be said that social risk teens will consider before purchasing certain goods are they necessary. In the essays about personal finance savings social risk adolescents attending day care centre expressed a more rational approach to money, as it has been argued that efforts should be made to save personal funds and consider all the options before purchasing an item. It can be argued that the social skills program has been effective and had an impact on social risk teenagers attending day care center skills enhancement.

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FEMINISTISKĀ IDENTITĀTE: FEMINISTISKĀS IDENTITĀTES ATTĪSTĪBAS SKALAS PSIHOMETRISKIE RĀDĪTĀJI UN ADAPTĀCIJA LATVIJAS VIDĒ (FIAS MODIFICĒTĀ VERSIJA)

Feminist Identity: The Feministic Identity Development Scale, Psychometricaland Adaption in Environment of Latvia

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Daugavpils University, Latvia

Abstract. *The feminism is becoming more popular in Latvia now, but it's impossible to find some psichological instrument which is adapted in latvian language and which is useabled for measuring the charecteristic's of feminist identity. In this article are displayed the Feministic Identity Development Scale (FIAS- in latvian) (the origional inquiry :Feministic Identity Development Scale (FIDS), Bargad & Hyde, 1991), thous diferent versions of their adaption and also versions of their modifications; Cronbach's Alpha from 0.5 to 0.8, and their version in latvian language.*
The adaptation of FIAS took part in three stages, the sample of the research consists only from women. The first sample consists form 330 women in age from 18 to 27 (M=18,75; SD=1,06) years old. The second and third sample consist form 501 women from 18 to 27 (M=20,33; SD=1,94) years old. The sample of Test- retest: 30 respondents.
In the course of the instrument adaptation in the psychometrical analysis was appointed: the summary of FIAS factorial modification version, the factorial validity, the analysis of the affirmatory factors, the convergential and divergential validity of FIAS.The results gained in the course of inguiry the factorial modification version of FIAS- are acknowledged to be acceptable and instruments of the inguiry of the identity crisis – approved to be useful for futher usage in investigation and can be practically used for psychological researches in Latvia.

Keywords: Feministic identity, FIDS, FIAS, inquiry, psychometrical indices, the adaptation of instrument, the development of identity.

Ievads
Introduction

Feminisms un Feministiskā identitāte

Feminisms ir gan sabiedriski politiska kustība, kuras mērķis ir nodrošināt sievietēm visas pilsoniskās tiesības (Kramarae u.c., 2000), gan filosofija, gan ideoloģija, gan politika (Grant, 1993), gan zinātnisko pētījumu joma psiholoģijā (Downing & Roush, 1985). Feminisms ir prakse, perspektīva un process, un feminisma teorijas centrā ir genders un tas, kā no šī punkta mēs skatāmies uz pasauli (Tarrant, 2008), tāpat feminisms ir sociāla kustība, kas meklē vienādas iespējas visiem cilvēkiem neatkarīgi no viņu dzimuma. Feministiskās kustības mērķis ir mainīt modeļus, kādi valdīja attiecībā pret genderu, rasi, šķirām un

seksuālajām orientācijām un galvenais gala mērķis ir pārtraukt un izbeigt sieviešu pakļaušanu (Tarrant, 2009).

Savukārt, Feministiskā identitāte ir sieviešu kolektīvā jeb sociālā identitāte, kas sevī iekļauj feministu pieņemtās attieksmes (nostādnes) un sevis identifikāciju ar feminismu (Eisele & Stake, 2008). Šī definīcija sakrīt ar to, kā Eriksons (1959) apraksta „paštēlu” (angl. *self–image*) un kā Čikerings un Reisera (Chickering & Reisser, 1993) definē identitāti – ar spēcīgu sevis izjūtu un sevis pieņemšanu.

Par feministiskās identitātes teorijas pamatlicējām uzskatāmas Dovninga un Rouša, kuras izstrādāja feministiskās identitātes attīstības modeli (Downing & Roush, 1985), tomēr jāatzīmē, ka Dovninga un Rouša savu teoriju attīstījušas, modificējot Krosa (Cross, 1971) teoriju par Amerikas āfrikāņu pozitīvās identitātes attīstību.

Ir izpētīts, ka sievietēm, kuras sevi pozicionē kā feministes, ir pozitīvs viedoklis par feministu kustību, profeministisko ideoloģiju, politisko liberālismu, kolektīvo orientāciju un pozitīva sevis kā feministes uztvere (Cowan et al., 1992). Tāpat ir atklāts, ka sieviešu sevis identificēšana ar feministēm ir saistīta ar pozitīvu feminisma novērtējumu un ticību feministu kolektīvajām aktivitātēm un feminisma pozitīvajam tēlam (Williams & Wittig, 1997; Roy, Weibust, & Miller, 2007). Sievietes, kuras sevi identificē kā feministes, aktīvāk un drošāk nekā nefeministes vai egalitārās sievietes iesaistās atklātā cīņā par feministiskajām idejām (Zucker, 2004), lai gan, kā savā pētījumā atklāja Lissa ar kolēģēm (Liss, O'Connor, Morosky, & Crawford, 2001), tad ticība feministiskajai ideoloģijai ir tikai maza daļa no tā, ko saprot ar feministes sociālās identitātes izveidošanu, jo pats svarīgākais ir pareizi uzdot jautājumu. Ja feministisko identitāti vēlas noskaidrot, uzdodot bipolāru jautājumu (esi vai neesi feministe), tad 15,8% no izlases sevi uzskatīja par feministēm, bet 77,6% noliedza savu piederību feministēm, bet, ja jautājumi tiek uzdoti savādāk, tad atklājas pavisam cita aina, un 81% no tām sievietēm, kuras sevi nekategorizēja kā feministes, uzrādīja savu mērķu sakritību ar tādiem feminisma virzieniem kā liberālo feminismu, radikālo feminismu, sociālistisko feminismu, kultūras feminismu un konservatīvo feminismu.

Sievietes izvēlas feministisko identitāti, lai palielinātu savu labizjūtu, jo, identificējoties (pieņemot) ar feministu vērtībām, viņas palielina un paplašina savas iespējas (Yakushko, 2007).

Tomēr ir arī sievietes, kuras atbalsta feministu izvirzītos mērķus, bet tomēr pašas sevi nevēlas identificēt kā feministes (Myaskovsky & Witting, 1997; Williams & Wittig, 1997; Liss, O'Connor, Morosky, & Crawford, 2001). Dankana norāda, ka sievietes, kuras ir izteiktas feministes, ir politiski aktīvākas sieviešu tiesību aizstāves nekā tās, kuras ir „vājas” feministes”, bet par „vājajām” feministēm vēl mazāk aktīvas ir tās, kuras sevi neuzskata par feministēm (angl. *non–feminists*) (Duncan, 2010).

Pētot sieviešu attiecības ar feminismu, ir izdalītas trīs grupas:

- Sievietes, kuras skaidri un noteikti sevi identificē ar feminismu un uzskata sevi par feministēm;
- Sievietes, kuras ir antifeministes un nepārprotami noraida feminismu;
- Sievietes, kuras var saukt par „egalitārām" vai „slēptajām feministēm", kuras atbalsta feministu principus, bet izvairās sevi identificēt ar feministēm (Duncan, 2010).

Citi pētnieki uzskata, ka daudzas sievietes feministes sevi nesauc par feministēm, kaut arī atbalsta feministu idejas un vērtības, jo sabiedrībā ir izveidots negatīvs sievietes feministes tēls, ko popularizē masu mediji (Myaskovsky & Witting, 1997; Williams & Wittig, 1997; Rhode, 1997), to ietekmē arī negatīvie sabiedrības stereotipi par feministēm (Henderson-King & Stewart, 1994) un, it īpaši, jaunas sievietes nevēlas sevi pozicionēt un saukt par feministēm (Kamen, 1991).

Rode norāda vēl vienu iemeslu, kāpēc sievietes, kuras pēc būtības ir feministes, nevēlas, ka viņas sauc par feministēm. Viņas uzskata, ka feministes ir vājas un ir netaisnības upuri, bet viņas tādas nevēlas būt, bet vēlas sevi redzēt kā stipras un spējīgas sievietes, kuras spēj kontrolēt situāciju (Rhode, 1997).

Hudijs ar kolēģiem atklājis, ka apmēram 26 – 33% ASV sieviešu sevi identificē kā feministes (Huddy, Neely & Lafay, 2000), 2006.gadā Saundere un Kašubeka-Vesta atklāja, ka no 244 ASV sievietēm, 16,3% – pārliecinoši noraida iespēju būt par feministēm, 11,4% noteikti identificē ar feminismu, pārējās atrodas starp šīm abām pozīcijām (Saunders & Kashubeck-West, 2006), turpretī Houvaras un Kārters 2008.gadā veiktajā pētījumā atklājis, ka 36,6% sieviešu un 21,4% vīriešu (ASV; N=270) sevi identificē ar feminismu (Houvouras & Carter, 2008). Tomēr daudzi vīrieši atturas sevi identificēt ar feminismu un saukt sevi par feministiem, jo pastāv atšķirīgi viedokļi starp sievietēm un vīriešiem par jēdziena „feminisms" saturu un jēgu, un joprojām pastāv uzskats, ka vārds „feminisms" ir ekvivalents vārdam sievišķīgums (McCabe, 2005; Toller, Suter & Trautman, 2004).

Latvijā feministiskā identitāte ir jauns psiholoģijas pētījumu fokuss, tāpēc ir nepieciešams psiholoģiskās izpētes instruments, ar ko pētīt feministisko identitāti.

Šī raksta mērķis ir sniegt pārskatu par instrumenta Feministiskās Identitātes Attīstības Skalas adaptācijas procesu Latvijas vidē un iegūto rezultātu atēlojums un salīdzinājums ar citu autoru adaptācijas rezultātiem.

Metodoloģija

Pētījumu izlases

Pirmajā adaptācijas izlasi veido 330 sievietes vecumā no 18 līdz 26 gadiem (M=18,75; SD=1,06)

Otro adaptācijas izlasēanalizēti dati par 501sievieti vecumā no 18 līdz 27 gadiem (M= 20,33; SD= 1,94), otrās adaptācijas izlases dati tika izmantoti arī trešās – FIAS faktoriāli modificētās versijas, psihometrisko rādītāju analīzei.

1.tabula. Feministiskās identitātes attīstības skalas adaptācijas izlašu respondenšu sociāli demogrāfiskais raksturojums

Sociāli demogrā-fiskais kritērijs	Sociāli demogrāfiskais rādītājs	Adaptācijas izlase, sievietes			
		I izlase (N=330)		II izlase (N=501)	
		N	%	N	%
Respondenta šī brīža dzīvesvieta	Dzīvo kopā ar vecākiem	172	52,1	192	38,3
	Ir pašiem sava mājvieta	56	17	145	28,9
	Dzīvo dienesta viesnīcā	102	30,9	164	32,7
Respondenta dzīves vide bērnībā	Pilsētā	143	43,3	239	47,7
	Laukos	187	56,7	262	52,3
Respondenta ģimenes stāvoklis	Neprecēta	277	83,9	368	73,5
	Precēta	3	0,9	34	6,8
	Dzīvo kopā ar draugu/ draudzeni	49	14,8	93	18,6
	Šķīrusies	1	0,3	6	1,2
Pēc bērnu esamības	Nav bērnu	320	97	450	89,8
	Ir bērni	10	3	51	10,2
Pēc vecāku laulības	Mātei no pirmās laulības, tēvam no pirmās laulības	254	77	370	73,9
	Mātei no pirmās laulības, tēvam no otrās laulības	11	3,3	45	9
	Mātei no pirmās laulības, tēvam cits variants	5	1,5	9	1,8
	Tēvam no pirmās laulības, mātei no otrās laulības	10	3,0	29	5,8
	Mātei no pirmās laulības	3	0,9	--	--
	Mātei no otrās, tēvam no otrās laulības	8	2,4	14	2,8
	Mātei no otrās laulības, tēvam cits variants	2	0,6	3	0,6
	Mātei cits variants, tēvam cits variants	27	8,2	26	5,2
	Mātei cits variants	1	0,3	--	--
	Mātei cits variants, tēvam no otrās laulības	8	2,4	4	0,8
	Mātei no otrās laulības	1	0,3	--	--
Pēc brāļu un māsu esamības	Esmu vienīgais bērns	47	14,2	73	14,6
	Ir vecāks brālis/ļi	52	15,8	72	14,4
	Ir jaunāks brālis/ļi	35	10,6	74	14,8
	Ir vecāka māsa/sas	51	15,5	63	12,6
	Ir jaunāka māsa/sas	32	9,7	82	16,4
	Ir vecāks brālis, jaunāka māsa	11	3,3	19	3,8
	Ir vecāks brālis, jaunāks brālis	5	1,5	13	2,6
	Ir jaunāks brālis, jaunāka māsa	28	8,5	29	5,8
	Ir jaunāks brālis, vecāka māsa	12	3,6	12	2,4
	Ir vecāks brālis, vecāka māsa	32	9,7	35	7,0
	Ir jaunāks brālis, jaunāka māsa, vecāka māsa	1	0,3	6	1,2
	Ir jaunāks brālis, vecāks brālis, jaunāka māsa, vecāka māsa	5	1,5	2	0,4
	Ir vecāka māsa, jaunāka māsa	5	1,5	13	2,6

	Dvīņubrālis	1	0,3	--	--
	Ir vecāks brālis, vecāka māsa, jaunāka māsa	3	0,9	5	1,0
	Ir vecāks brālis, jaunāks brālis, jaunāka māsa	7	2,1	1	0,2
	Ir vecāks brālis, jaunāks brālis, vecāka māsa	1	0,3	2	0,4
	Dvīņumāsa	2	0,6	--	--
Pēc iegūstamās izglītības	Pirmā augstākā izglītība	59	17,9	485	96,8
	Otrā augstākā izglītība	1	0,3	16	3,2
	Mācās vidusskolā	135	40,9	--	--
	Mācās profesionālajā vidusskolā	128	38,8	--	--
	Cits variants	7	2,1	--	--
Respondenta tautība	Latviete	305	92,4	424	84,6
	Krieviete	22	6,7	57	11,4
	Poliete	1	0,3	8	1,6
	Baltkrieviete	1	0,3	7	1,4
	Ukrainiete	1	0,3	--	--
	Čigāniete	--	--	1	0,2
	Lietuviete	--	--	3	0,6
	Tatāriete	--	--	1	0,2
Respondenta tēva tautība	Nav zināma	1	0,3	--	--
	Latvietis	289	87,6	390	77,8
	Krievs	28	8,5	68	13,6
	Baltkrievs	6	1,8	13	2,6
	Igaunis	2	0,6	1	0,2
	Ukrainis	2	0,6	7	1,4
	Polis	1	0,3	12	2,4
	Lietuvietis	1	0,3	7	1,4
	Azerbaidžānis	--	--	1	0,2
	Tatārs	--	--	1	0,2
	Dānis	--	--	1	0,2
Respondenta mātes tautība	Latviete	297	90,0	403	80,4
	Krieviete	24	7,3	65	13,0
	Poliete	1	0,3	11	2,2
	Rumāniete	1	0,3	--	--
	Ukrainiete	6	1,8	3	0,6
	Vāciete	1	0,3	--	--
	Baltkrieviete	--	--	4	2,4
	Čigāniete	--	--	1	0,2
	Lietuviete	--	--	4	0,8
	Balkāniete	--	--	1	0,2
	Tatāriete	--	--	1	0,2
	Uzbekiete	--	--	1	0,2

Avots: Dombrovskis, 2014.

Instrumenti
Instruments: Feministiskās identitātes attīstības skalas apraksts

Dovninga un Rouša ir aprakstījušas feministiskās identitātes dimensijas ar multidimensiālu konstruktu palīdzību, norādot sarežģītos paternus, kas veicina sievietes kļūšanu par feministi. Viņu izstrādātais modelis uzrāda attieksmes un vērtības saistībā ar pašu sieviešu feministu attieksmi pret sevi. Šis modelis

veidots, pamatojoties uz sieviešu dzīves pieredzi, īpaši to sieviešu, kuras ir pieredzējušas apspiestību un diskrimināciju (Downing & Roush, 1985).

Dovningas un Roušas feministiskās identitātes attīstības modelis izveidots, modificējot Krosa (Cross, 1971; Vandiver et.al., 2002) modeli par melnās rases sieviešu identitātes attīstības modeli (angl. *CRIS*). Dovningas un Roušas (Downing & Roush,1985) sieviešu feministiskās identitātes attīstības modelis iekļauj piecus posmus:

Pasīva pieņemšana (*passive aceptance*) raksturo sieviešu ticība tradicionālajām gendera lomām, vīrieši tiek uzskatīti par pārākiem, netiek atzīti aizspriedumi un diskriminācija, un tiek noliegta individuālā, institucionālā un kultūras diskriminācija pret sevi un sievietēm kopumā (Downing & Roush, 1985).

Atklāsme (*revelation*)– raksturo jautājumi par sevi un savu attieksmi pret tradicionālajām gendera lomām. Vīrieši tiek uztverti kā apspiedēji. Šajā posmā sievietes var vēlēties iesaistīties sieviešu kustībā. Sievietes izjūt dusmas par pagātnes netaisnību un apspiešanu, kas ir jāmaina. Rodas atklāsme attiecībā uz seksismu un tiek izjustas dusmas pret seksistu sabiedrību un vainas izjūta, ja viņa pati ir piedalījusies kādu sieviešuapspiešanā (Downing & Roush, 1985). Šis posms tiek raksturots kā duālistisks, jo vīrieši tiek uztverti kā negatīvi, bet sievietes kā pozitīvas (Rickard, 1989; Downing & Roush, 1985).

Iesaiste – atbrīvošanās (*embeddedness – emanation*): šajā posmā sievietes iekļaujas „sieviešu" kultūrā un veido tādu kā māsu radniecību vai, citiem vārdiem sakot, biedrošanos. Sievietes apvienojas, veidojot atbalstošas asociācijas, piedalās sieviešu studiju kursos un sāk veidot jaunu identitāti (Rickard, 1989; Downing & Roush, 1985).

Sintēze (*synthesis*): šajā posmā sievietēm attīstās jauna identitāte, kas vairs neiekļaujas pieņemtajās, vecajās dzimumlomās, un tā tiek integrēta personības struktūrā. Vīrieši tiek vērtēti individuāli nevis kā grupa kopumā (Rickard, 1989). Sievietes saskata netaisnību, apspiestību un diskrimināciju, kas valda pasaulē. Notiek sintēze pozitīvai es koncepcijai, kas pieļauj pozitīvu attieksmi pret sevi kā sievieti (Downing & Roush,1985).

Aktīva iesaiste (*active commitment*): jaunā pozitīvā feministiskā identitāte, kas attīstījusies ceturtajā līmenī, tiek iesaistīta jeb realizēta aktīvā darbībā. Viņas iesaistās aktīvās darbībās par sociālām izmaiņām, lai izbeigtu apspiešanu un viņām ir vēlme veidot egalitāru sabiedrību (Downing & Roush, 1985).

Daudzu gadu garumā Dovningas un Roušas feministiskās identitātes modelis ir izpelnījies kritiku par trūkumiem tajā, par to, ka tas neatspoguļo patieso feministiskās identitātes attīstības modeli (Henderson-King & Stewart, 1997; Hyde, 2002; Moradi & Subich, 2002). Haide uzskata, ka ir jābūt skaidrai katrai modeļa attīstības stadijai, nevis iespējai, ka sievietes feministiskā identitāte spēj cirkulāri virzīties no vienas pakāpes uz otru, kā to ir paredzējušas Dovninga un Rouša savā modelī (Downing & Roush, 1985). Tāpat Dovningas

un Roušas modeli ir kritizējuši par tā grūto pielietojumu praksē (Fischer et al., 2000; White, 2006).

Lissa un Erčula norāda, ka *Sintēzes* posms nebūtu pieskaitāms pie feministiskās identitātes attīstības rādītājiem, jo pēc šiem rezultātiem sievietes nevar klasificēt ne kā feministes, ne kā nefeministes. Tāpat viņas norāda, ka *Pasīva pieņemšana* un *Aktīva iesaiste* neprezentē feministiskās identitātes attīstību, bet gan iezīmē attīstības sākuma un beigu punktus, bet ne dinamiku (Liss & Erchull, 2010).

Bargade un Haide (Bargad & Hyde, 1991), modificējot Dovningas un Roušas modeli, izveidoja feministiskās identitātes izpētes instrumentu Feministiskās identitātes attīstības skalu FIAS (angl. *FIDS*), lai pētītu sieviešu feministisko identitāti.

FIAS aizpildīšanas instrukcijā, respondentiem, tiek lūgts atbildēt uz 48 jautājumiem, pēc Likerta skalas ar vērtībām no 1 līdz 5, kur 1- pilnībā piekrītu; 2- nepiekrītu; 3 – ne piekrītu, ne nepiekrītu; 4 – piekrītu; 5 – pilnībā piekrītu. Izvēlēto apgalvojumu respondents ieraksta uz svītras jautājuma priekšpusē.

Feministiskās identitātes attīstības skala, (Bargad & Hyde, 1991; Dombrovskis, 2014)

1. Es nedomāju, ka ir nepieciešams Labklājības Ministrijas „Plāns dzimumu līdztiesību īstenošanai”; sievietēm tāpat ir labi.
2. Man ir svarīgi būt daļai no sieviešu sabiedrības.
3. Es vēlos darboties, lai uzlabotu sieviešu statusu.
4. Es jūtu, ka daudziem vīriešiem ir saasināta reakcija uz sieviešu jautājumiem.
5. Es agrāk domāju, ka diskriminācija uz dzimuma pamata nav īpaši izplatīta, bet tagad zinu, cik ārkārtīgi bieži tā patiesībā notiek.
6. Lai gan daudzi vīrieši ir seksisti (ar dzimumu diskriminējošiem stereotipiem), esmu konstatējusi, ka daži vīrieši ir ļoti labvēlīgi noskaņoti attiecībā uz sieviešu jautājumu un feminismu.
7. Īpaši pašlaik es izjūtu, ka apkārtējās sievietes stiprina mani.
8. Esmu ļoti pārliecināta, ka idejas, kurām ticu, vairos taisnīgumu un vienlīdzību cilvēku vidū visā pasaulē.
9. Lai gan esmu ieinteresēta, lai pret sievietēm dzīvē izturētos taisnīgi, es nesaskatu vīriešos ienaidniekus.
10. Es pavadu lielāko daļu sava brīvā laika kopā ar dažām tuvām draudzenēm, kuras atbalsta tādas pašas feminisma vērtības kā es.
11. Es neredzu lielu jēgu apšaubīt vispārējo uzskatu, ka vīriešiem jābūt vīrišķīgiem un sievietēm jābūt sievišķīgām.
12. Vēlos nest zināmus upurus, lai panāktu, ka šī sabiedrība ir no dzimumaizspriedumiem brīva, mierīga vieta, kur visiem ir nodrošinātas vienādas iespējas.
13. Es varētu raksturot savu saskarsmi ar vīriešiem kā piesardzīgu.
14. Viena lieta, kāpēc man īpašipatīk būt sievietei ir tas, ka vīrieši man

piedāvās savu vietu pārpildītā autobusā vai atvērs man durvis, jo esmu sieviete.

15. Kad es domāju par seksismu (attieksmi, kas balstīta uz dzimumu diskriminējošiem stereotipiem), mana pirmā reakcija vienmēr ir dusmas.

16. Mana sociālā dzīve pašlaik norit galvenokārt kopā ar sievietēm, bet ir daži vīrieši, ar kuriem man nebūtu iebildumu izveidot neseksuālas attiecības.

17. Es nekad neesmu uztraukusies vai domājusi par to, ko nozīmē būt sievietei šajā sabiedrībā.

18. Vīriešus es vērtēju kā personības, nevis kā apspiedēju grupas locekļus.

19. Pašreiz es jūtu nepieciešamību pēc sieviešu sabiedrības, kuras pieturas pie tādiempašiem uzskatiem kā es.

20. Man ļoti rūp, lai vīriešiem un sievietēm visās jomās būtu līdzvērtīgas iespējas.

21. Es kļūstu ļoti sarūgtināta, kad domāju par to, ka šajā sabiedrībā pret sievietēm tik ilgi ir bijusi tik netaisnīga attieksme.

22. Es negribu vienlīdzīgu statusu ar vīriešiem.

23. Es esmu ļoti apmierināta, ka varu izmantot savus talantus un prasmes savā darbā sieviešu kustībā.

24. Ja es būtu precējusies un manam vīram piedāvātu darbu citā valstī, mans kā dzīvesbiedres pienākums būtu doties viņam līdzi, lai atbalstītu viņa karjeru.

25. Es nedomāju, ka ir viens „pareizais" veids, kā būt feministei.

26. Es mēdzu būt uzmanīga saskarsmē ar vīriešiem.

27. Es uzskatu, ka izvēloties karjeru cilvēkiem nevajadzētu ļaut dzimumlomu stereotipiem ietekmēt savu izvēli.

28. Es domāju, ka vairums sieviešu jutīs vislielāko piepildījumu kā sievas vai mātes.

29. Kad domāju par lielāko daļu pasaules problēmu – vides piesārņojumu, diskrimināciju, atomkara draudiem – man šķiet, ka lielāko daļu no tām ir radījuši vīrieši.

30. Es dusmojos, ja esmu ļāvusi vīriešiem gūt virsroku pār sevi.

31. Būt feministei – tas ir viens no aspektiem, kas veido manu identitāti.

32. Es tikai nesen sāku domāt, ka nav godīgi, ka vīriešiem šajā dzīvē ir privilēģijas tikai tāpēc, ka viņi ir vīrieši.

33. Es jūtu, ka esmu ļoti ietekmīga un efektīva pārstāve, kas var runāt par sieviešu jautājumiem, ar kuriem es pašreiz nodarbojos.

34. Es dusmojos par to, ka sievietes ir atstātas ārpus vēstures mācību grāmatām.

35. Ja es gleznotu gleznu vai rakstītu poēmu, tā droši vien būtu par sievietēm vai sieviešu jautājumiem.

36. Es domāju, ka vīrieši un sievietes dzīvo labāk situācijā, kad precētas

sievietes ir mājsaimnieces un viņu vīri viņas uztur.

37. Daži no vīriešiem, kurus es pazīstu, šķiet lielāki feministi par vienu otru sievieti.

38. Kad es redzu, kā lielākā daļa vīriešu attiecas pret sievietēm, es kļūstu ļoti nikna.

39. Es beidzot jūtos ļoti labi, aptverot, ka esmu feministe.

40. Vispār es domāju, ka vīrieši ir interesantāki par sievietēm.

41. Vīrieši un sievietes ir vienlīdzīgi, bet dažādi.

42. Nesen es kaut ko lasīju vai man bija īpaša pieredze, kas radīja lielāku izpratni par seksismu (uz dzimuma diskriminācijas stereotipiem balstīta attieksme).

43. Es uzskatu, ka izvarošanā reizēm ir vainojama pati sieviete.

44. Kaut kādā ziņā mana motivācija gandrīz katrai manai darbībai ir mana vēlēšanās panākt, lai pasaulē valdītu vienlīdzība.

45. Es neesmu pārliecināta, ka zinu, kas ir domāts ar frāzi „patriarhālajāiekārtāsievietesir apspiestas.”

46. Es uzskatu, ka sievietēm ir paveicies, ka viņām nav jāveic bīstamie darbi, kas ir paredzēti vīriešiem, piemēram, darbs celtniecībā vai ātrumsacensību automašīnas vadīšana.

47. Es esmu apņēmusies visu dzīvi veltīt darbam, lai panāktu sieviešu sociālo, ekonomisko un politisko vienlīdzību.

48. Īpaši tagad es jūtos daudz labāk kopā ar sievietēm, kurām ir tādi paši feminisma uzskati kā man.

Bargades un Haides (Bargad & Hyde, 1991) FIAS oriģinālais modelis sastāv no piecām apakšskalām: *aktīva iesaiste, pasīva pieņemšana, piederība, atklāsme, sintēze*:

1. Aktīva iesaiste – Raksturo pilnīgu saplūšanu ar feministisko identitāti. Iesaistās nozīmīgās, mērķtiecīgās darbībās, iestājas pret seksistisku pasauli. Darbības ir personalizētas un racionālas – es daru, lai būtu tā. Vīrieši tiek uztverti kā vienlīdzīgi, bet ir atšķirīgi no sievietēm.

2. Pasīva pieņemšana – Pasīvi pieņem tradicionālās dzimumu lomas un pieņem tradicionālo sieviešu diskrimināciju. Ir pārliecinātas, ka saglabāt tradicionālās dzimumu lomas ir izdevīgi. Uzskata vīriešus pārākus par sievietēm.

3. Piederība – Raksturo sieviešu apzināta piederība citādāk domājošām sievietēm. Apzinās, ka viņām veidojas cita jauna identitāte. Un visbeidzot raksturo „reālistiska” domāšana attiecībās ar vīriešiem.

4. Atklāsme – Raksturo daudzdimensionālas iekšējas krīzes izjūta, kā rezultātā ir apjukums un neskaidrība pašai par sevi, savu lomu, izjūt dusmas un neapmierinājumu, izjūt vainas izjūtu – duālistiskas izjūtas. Vīrieši tiek uztverti kā negatīvie tēli.

5. Sintēze – Raksturo jaunu, autentisku un pozitīvu feministisko identitāti. Notiek dzimumu lomu transcendence. Ir elastīgs „pamiera”

stāvoklis attiecībā uz pasauli. Vīrieši netiek uztverti kā viena grupa, bet katrs vīrietis tiek izvērtēts individuāli.

Šie ir oriģinālie FIAS skalu apraksti pēc Bargades un Haides (Bargad & Hyde, 1991).

Tāpat kā Dovningas un Roušas feministiskās identitātes modelis ir izpelnījies kritiku par trūkumiem šajā modelī (Henderson-King & Stewart, 1997; Hyde, 2002; Moradi & Subich, 2002), arī Bargades un Haides feministiskās identitātes attīstības skala ir izpelnījusies kritiku no Hansena (Hansen, 2002) par to, ka trūkst pierādījumu feministiskās identitātes skalas pakāpju secīgumam.

Sakarā ar pētnieku izteikto kritiku, par Feministiskās identitātes attīstības skalu (Feministic Identity Development Scale, Bargad & Hyde, 1991), var pieņemt, ka Bargades un Haides izdalītās piecas FIAS apakšskalas var tikt primāri uzskatītas nevis par lineārām feministiskās identitātes attīstības stadijām, bet gan kā par feministisko identitāti raksturojošām dimensijām ar atšķirīgu kvalitatīvo saturu.

Procedūra

Lingvinistiskā adaptācijas procedūra

Aptauja tulkota no angļu valodas uz latviešu valodu divas reizes. Tulkojumi tika salīdzināti un analizēti Latvijas kultūrvides kontekstā. Tika izveidota ekspertu grupa 3 cilvēku sastāvā, kas veica tulkojumu analīzi. Tad iegūtais latviskais materiāls tulkots uz angļu valodu un veikta satura un jēgas salīdzināšana.

Tulkoja vairākas savstarpēji neatkarīgas personas, kas pārzina gan latviešu, gan angļu valodu. Ekspertu komisijas sastāvā bija persona, kura dzimtā valoda ir angļu un kura dzimtene ir ASV, bet kurš pārvalda arī latviešu valodu dzimtās valodas līmenī un jau daudzus gadus dzīvo Latvijā. Testa pārbaudes gaitā tika organizēta maza respondentu grupa 4 cilvēki, lai noskaidrotu viņu viedokli par testa pantu formulējumu skaidrību, instrukciju izpratni un nepieciešamo testa izpildes laiku (Raščevska, 2005). Rezultātā tika pieņemts lēmums par labāko tulkojumu, kuru izmantot tālākajā aptaujas adaptēšanas procesā. Aptaujas tulkošanas gaita tika reģistrēta protokolā.

Datu ievākšanas procedūra

Dati ievākti laika periodā no 2010.gada septembra līdz 2011.gada decembra mēnesim. Datu ievākšana nav bijusi regulāra, tas saistīts ar apgrūtināto piekļuvi respondentiem. Datu vākšana notika divas reizes – 1. adaptācijas posmam un 2. adaptācijas posmam. Respondenti vienlaicīgi aizpildīja vairākas aptaujas, jo vienlaicīgi tika ievākti dati vairāku metožu adaptācijai, bet aizpildīšanas secību izvēlējās paši respondenti. Aptauju aizpildīšana netika limitēta laikā. Respondenti piedalījās aptaujā pēc brīvas izvēles, kas varētu stimulēt sniegt patiesākas atbildes uz uzdotajiem jautājumiem.

Datu apstrādes procedūra

Iekšējā saskaņotība noteikta ar Kronbaha alfu (Raščevska, 2005) un datu apstrāde veikta ar profesionālās statistikas datu apstrādes programmu SPSS-19. Aptaujas faktoriālā validitāte tika pārbaudīta ar galveno faktoru metodi, jo tā ir mazāk jutīga uz sadalījumu (Raščevska, 2005), faktoriālā validitāte, iekšējā saskaņotība, konverģentā un diverģentā validitāte (Raščevska, 2005). Kā arī iegūtie dati salīdzināti ar citu autoru iegūtajiem datiem par FIAS psihometriskajiem rādītājiem.

Rezultāti un iztirzājums

Feministiskās identitātes attīstības skalas I un II adaptācija

Grūtības indeksa minimālā robeža:
Xmin= Xmin+0,2(Xmax-Xmin)= 1+0,2(5-1)= 1,8
Grūtības indeksa maksimālā robeža:
Xmax= Xmin + 0,8(Xmax-Xmin)= 1+0,8(5-1)= 4,2

1.attēls. FIAS pantu grūtības indeksu aprēķins (Raščevska, 2005)

Iegūtie pantu grūtības indeksi (1.att.) saskan ar Raščevskas (2005) rekomendāciju par pantu grūtības indeksiem, (kas vērtēti pēc Likerta 5 ballu skalas), kuriem vajadzētu atrasties robežās no 1,8 līdz 4,2 un kas parāda, ka pantu vidējās vērtības pieder 20–80 % robežai (Raščevska, 2005).

FIAS apakšskala *Pasīva pieņemšana*

FIAS apakšskalas *Pasīva pieņemšana* adaptācijas pirmā un otrā versija sastāv no 12 pantiem: 1.,11., 14., 17., 22., 24., 28., 36., 40., 43., 45., 46. Pantu diskriminācijas indeksi pirmajā adaptācijas versijā ir robežās no 0,12 līdz 0,28. Pantu grūtības indeksi ir robežās no 2,55 līdz 3,58, kas atrodas pantu aprēķinātajās grūtības indeksa robežās no 1,8 līdz 4,2, kas pārsniedz aprēķinātās grūtības indeksa robežas pirmajai adaptācijas versijai N=330; M= 3,15; SD=0,45. Otrajā adaptācijas versijā pantu diskriminācijas indeksi atrodas robežās no 0,04 līdz 0,33, bet grūtības indeksi ir robežās no 2,51 līdz 4,40, M=3,19, bet SD=0,38. Otrajā adaptācijas versijā α=0,54, uzlabojās salīdzinot ar pirmo adaptācijas versiju, kur α=0,53. Apakšskalas *Pasīva pieņemšana* Kronbaha alfa pēc Gūda (Good et.al., 2000) datiem ir 0,74, bet oriģinālā pēc Bargades un Haides (Bargad & Hyde,1991) datiem α=0,85. Apakšskalas psihometrisko rādītāju uzlabošanas nolūkā tiks veikta apakšskalas *Pasīva pieņemšana* modifikācija.

FIAS apakšskalas *Pasīva pieņemšana* 1.modifikācija sastāv no 10 pantiem: 1.,11.,14.,17.,22.,24.,28.,36.,45.,46. Modificētajā versijā no apakšskalas tika izņemts 40.pants (d_{40}=0,12) un 43.pants (d_{43}=0,10) zemo pantu diskriminācijas indeksu dēļ oriģinālajā apakšskalas versijā. Viszemākais pantu diskriminācijas indekss ir 45.pantam: *„Es uzskatu, ka tur, kur valda vīrieši (patriarhāts), tur*

sievietes ir apspiestas” (d_{45} = 0,06). 45.pants pirmajā adaptācijas versijā skanēja šādi: „*Es neesmu pārliecināta, ka zinu, kas ir domāts ar frāzi „patriarhālajā iekārtā sievietes ir apspiestas.”.* 14.panta „*Man patīk, ja vīrieši pret mani izturas kā pret sievieti, piedāvājot savu vietu pārpildītā autobusā, atverot durvis u.tml.*” grūtības indekss pārsniedz pantu maksimālo grūtības indeksu robežu. Pirmajā adaptācijas versijā pants skanēja šādi: „*Viena lieta, kāpēc man īpaši patīk būt sievietei ir tas, ka vīrieši man piedāvās savu vietu pārpildītā autobusā vai atvērs man durvis, jo esmu sieviete*”. Aprēķinātā maksimālā augšējā robeža ir 4,2, bet 14.pantam tā ir 4,40. Pantu iekšējās saskaņotības rādītājs pirmajai adaptācijas versijai α=0,48, kas tiek uzskatīta par zemu, bet otrajā adaptācijas versijā tas uzlabojas un ir α=0,55, kas jau ir tuvāka apakšskalas *Pasīva pieņemšana* oriģinālajai α=0,60. Pirmajā adaptācijas versijā SD=0,47, otrajā adaptācijas versijā SD=0,40, bet apakšskalas oriģinālā SD=0,54.

FIAS apakšskala *Atklāsme*

FIAS apakšskala *Atklāsme* sastāv no 7 pantiem: 5., 21., 29., 30., 32., 38., 42. Apakšskalas psihometrisko rādītāju analīze uzrāda, ka apakšskalas pirmajā adaptācijas versijā pantu diskriminācijas indeksi ir robežās no 0,33 līdz 0,49, bet pantu grūtības indeksi ir robežās no 2,45 līdz 3,20. Otrajā adaptācijas versijā pantu diskriminācijas indeksi ir robežās no 0,34 līdz 0,48, labi diskriminācijas indeksi atrodas robežās no 0,2 līdz 0,8, bet pantu grūtības indeksi ir robežās no 2,24 līdz 3,10, kas atbilst aprēķinātajām pantu grūtības indeksa robežām no 1,8 līdz 4,2. Pirmajā adaptācijas versijā SD= 0,65, bet otrajā 0,61, oriģinālajā versijā SD=0,54. Gan pirmajā, gan otrajā adaptācijas versijā α=0,7, kas ir līdzīga α=0,74 pēc Gūda (Good et al., 2000), datiem un tuva oriģinālajai α=0,75 pēc Bargades un Haides (Bargad & Hyde, 1991).

FIAS apakšskala *Piederība*

FIAS apakšskala *Piederība* sastāv no 7 pantiem: 2., 7., 10., 16., 19., 35., 48. Apakšskalas psihometrisko rādītāju analīze uzrāda, ka pirmajā adaptācijas versijā pantu diskriminācijas indeksi atrodas robežās no 0,23 līdz 0,49, bet pantu grūtības indeksi ir robežās no 2,22 līdz 4,15. Pirmās adaptācijas versijā standartizētā α=0,66, apakšskalas M=2,88, bet SD=0,58. Otrajā adaptācijas versijā apakšskalas pantu diskriminācijas indeksi ir robežās no 0,21 līdz 0,58, bet pantu grūtības indeksi ir robežās no 2,21 līdz 3,98, kas atbilst aprēķinātajām pantu grūtības indeksa robežām. Apakšskalas M=2,71, bet SD=0,56. Otrās adaptācijas versijas α=0,64. Apakšskalas Kronbaha alfa pēc Gūda datiem ir 0,66(Good et al., 2000), bet oriģinālā pēc Bargades un Haides datiem α=0,82Bargades un Haides (Bargad & Hyde, 1991), M=2,66, bet SD=0,56.

FIAS apakšskala *Sintēze*

FIAS apakšskala *Sintēze* sastāv no pieciem pantiem: 4., 6., 9.,18., 37. Apakšskalas psihometrisko rādītāju analīze uzrāda, ka adaptācijas pirmajā versijā pantu diskriminācijas indeksi ir robežās no 0,03 līdz 0,31, bet pantu grūtības indeksi ir robežās no 2,82 līdz 4,20. Viszemāko pantu diskriminācijas

indeksu uzrāda 4.pants „*Es jūtu, ka daudziem vīriešiem ir saasināta reakcija uz sieviešu jautājumiem*" (d_4=0,03), kā arī 37.pantam „*Daži no vīriešiem, kurus es pazīstu, šķiet lielāki feministi par vienu otru sievieti.*" ir ļoti zems diskriminācijas indekss (d_{37}=0,13). Pirmās adaptācijas versijas α=0,38, bet apakšskalas M=3,66, SD=0,49. Otrajā adaptācijas versijā pantu diskriminācijas indeksi ir robežās no 0,04 līdz 0,26, kas vērtējami kā ļoti zemi, bet pantu grūtības indeksi ir robežās no 2,27 līdz 4,28. Zemus pantu diskriminācijas indeksus uzrāda 4.pants „*Es jūtu, ka daudziem vīriešiem ir saasināta reakcija uz sieviešu jautājumiem*" (d_4=0,06) (šī panta saturs ir palicis nemainīgs kā pirmajā, tā arī otrajā adaptācijas versijā, tikai mainījušies panta psihometriskie rādītāji), 37.pants „*Daži no vīriešiem, kurus es pazīstu, šķiet lielāki feministi par vienu otru sievieti*" (d_{37}=0,04) un 18.pants: „*Vīriešus es vērtēju kā personības, nevis kā apspiedēju grupas locekļus*" (d_{18}=0,10). Otrās adaptācijas versijas apakšskalas M=3,65, bet SD=0,44. Apakšskalas α=0,3, kas vērtējama kā ļoti zema. Tomēr, ņemot vērā α=0,48, pēc Gūda datiem un oriģinālo α=0,65 (Good et al., 2000) pēc Bargades un Haides (Bargad & Hyde, 1991) datiem, var secināt, ka arī citu autoru iegūtās apakšskalas Kronbaha alfas ir zemas. Apakšskalas psihometrisko rādītāju uzlabošanas nolūkā tiks veikta apakšskalas *Sintēze* modifikācija.

FIAS modificētā apakšskala *Sintēze* sastāv no sešiem pantiem: 6., 9., 18., 25., 27., 41. Modificētās apakšskalas *Sintēze* psihometrisko rādītāju analīze rāda, ka pirmās adaptācijas versijas diskriminācijas indeksi atrodas robežās no 0,33 līdz 0,47, bet otrās adaptācijas versijas diskriminācijas indeksi atrodas robežās no 0,21 līdz 0,41. Abās adaptācijas versijās diskriminācijas indeksi ir pieņemami, jo labi diskriminācijas indeksi ir robežās no 0,2 līdz 0,8 (Raščevska, 2005). Pantu grūtības indeksi pirmajā adaptācijas versijā ir robežās no 3,46 līdz 4,20, bet otrajā adaptācijas versijā pantu grūtības indeksi ir robežās no 3,41 līdz 4,20, abās adaptācijas versijā pantu grūtības indeksi atrodas aprēķinātajās pieļaujamajās robežās no 1,8 līdz 4,2. Oriģinālās versijas pantu M=3,87, pirmajā adaptācijas versijā pantu M=3,88, bet otrajā versijā tas ir 3,97. Apakšskalas *Sintēze* oriģinālā α=0,65 (pēc Bargades un Haides (Bargad & Hyde, 1991)datiem), 0,74 (pēc Gūda (Good et al., 2000) datiem). Modificētās apakšskalas pirmās adaptācijas versijas α=0,67, bet nemodificētās apakšskalas pirmās adaptācijas versijas α=0,38, modificētajai versijai skalas Kronbaha alfa uzlabojas. Modificētās apakšskalas otrās adaptācijas versijas α=0,52, kas ir augstāka nekā nemodificētās apakšskalas *Sintēze*α=0,30 otrajai adaptācijas izlasei.

FIAS apakšskala *Aktīva iesaiste*

FIAS apakšskala *Aktīva iesaiste* sastāv no astoņiem pantiem: 3., 8., 12., 20., 23., 33., 44., 47. Pirmās adaptācijas versijas pantu diskriminācijas indeksi atrodas robežās no 0,23 līdz 0,56, bet otrās adaptācijas versijas pantu diskriminācijas indeksi ir robežās no 0,19 līdz 0,38, abu versiju pantu diskriminācijas indeksi atrodas pieņemamās robežās. Pirmās adaptācijas versijas pantu grūtības indeksi atrodas robežās no 2,36 līdz 3,73, bet otrajā adaptācijas

versijā robežās no 2,20 līdz 3,76, abās versijās pantu grūtības indeksi atrodas aprēķināto pantu minimālajās un maksimālajās robežās. Oriģinālajai skalai pantu M=3,03, pirmajai adaptācijas versijai ir 3,07, bet otrajai adaptācijas versijai ir 2,96. Gan oriģinālajai apakšskalai, gan abām adaptētajām apakšskalu versijām SD=0,60.

Apakšskalas *Aktīva iesaiste* oriģinālā α=0,80 (Bargad & Hyde,1991), Gūda aprēķinos iegūtā α=0,81 (Good et al., 2000), adaptācijas versijas pirmajā variantā α=0,74, bet otrajā adaptācijas versijā α=0,66.

Faktoriālā validitāte

2.tabula. FIAS II adaptētās versijas visu pantu veidoto faktoru izskaidrotā dispersija

Panti	Sākuma īpašvērtība			Izdalītā summa no slodzes kvadrātā			Rotētā summa no slodzes kvadrātā		
	Kopējais	% no dispersijas	Kumulatīvs %	Kopējais	% no dispersijas	Kumulatīvs %	Kopējais	% no dispersijas	Kumulatīvs %
1	7,10	14,78	14,78	7,10	14,78	14,78	3,64	7,59	7,59
2	3,01	6,27	21,05	3,01	6,27	21,05	2,57	5,36	12,95
3	2,51	5,23	26,28	2,51	5,23	26,28	2,27	4,72	17,67
4	1,96	4,07	30,36	1,96	4,07	30,36	2,14	4,46	22,14
5	1,60	3,34	33,70	1,60	3,34	33,70	2,06	4,30	26,43
6	1,55	3,23	36,93	1,55	3,23	36,93	1,94	4,03	30,47
7	1,41	2,94	39,87	1,41	2,94	39,87	1,88	3,92	34,39
8	1,35	2,81	42,68	1,35	2,81	42,68	1,86	3,87	38,26
9	1,26	2,63	45,31	1,26	2,63	45,31	1,67	3,47	41,73
10	1,20	2,50	47,80	1,20	2,50	47,80	1,59	3,32	45,05
11	1,16	2,41	50,21	1,16	2,41	50,21	1,51	3,15	48,20
12	1,13	2,36	52,57	1,13	2,36	52,57	1,50	3,13	51,33
13	1,07	2,23	54,80	1,07	2,23	54,80	1,36	2,83	54,16
14	1,04	2,16	56,96	1,04	2,16	56,96	1,35	2,80	56,96
15	0,99	2,07	59,03	--	--	--	--	--	--
16	0,97	2,01	61,04	--	--	--	--	--	--
17	0,89	1,86	62,89	--	--	--	--	--	--
18	0,87	1,82	64,71	--	--	--	--	--	--
19	0,84	1,76	66,47	--	--	--	--	--	--
20	0,81	1,69	68,15	--	--	--	--	--	--
21	0,80	1,66	69,81	--	--	--	--	--	--
22	0,79	1,65	71,46	--	--	--	--	--	--
23	0,77	1,60	73,06	--	--	--	--	--	--
24	0,76	1,58	74,64	--	--	--	--	--	--
25	0,74	1,55	76,19	--	--	--	--	--	--
26	0,72	1,50	77,69	--	--	--	--	--	--
27	0,68	1,43	79,12	--	--	--	--	--	--
28	0,66	1,38	80,50	--	--	--	--	--	--

29	0,64	1,34	81,84	--	--	--	--	--	--
30	0,63	1,30	83,14	--	--	--	--	--	--
31	0,61	1,28	84,42	--	--	--	--	--	--
32	0,59	1,22	85,64	--	--	--	--	--	--
33	0,57	1,19	86,84	--	--	--	--	--	--
34	0,56	1,16	88,00	--	--	--	--	--	--
35	0,53	1,11	89,10	--	--	--	--	--	--
36	0,52	1,08	90,18	--	--	--	--	--	--
37	0,51	1,06	91,24	--	--	--	--	--	--
38	0,49	1,02	92,25	--	--	--	--	--	--
39	0,46	0,95	93,21	--	--	--	--	--	--
40	0,44	0,92	94,13	--	--	--	--	--	--
41	0,43	0,89	95,02	--	--	--	--	--	--
42	0,41	0,86	95,88	--	--	--	--	--	--
43	0,38	0,78	96,66	--	--	--	--	--	--
44	0,36	0,76	97,42	--	--	--	--	--	--
45	0,35	0,74	98,15	--	--	--	--	--	--
46	0,34	0,71	98,86	--	--	--	--	--	--
47	0,29	0,61	99,46	--	--	--	--	--	--
48	0,26	0,54	100,00	--	--	--	--	--	--

Piezīmes. Izdalīšanas metode: Galveno faktoru analīze.
Avots: Dombrovskis, 2014.

Kā var redzēt, pēc 2.tabulas datiem, kas attēlo FIAS II adaptētās versijas visu pantu veidoto faktoru izskaidrotā dispersiju, tad redzams, ka tiek izdalīti 14 panti, kuru īpašvērtība ir lielāka par viens.
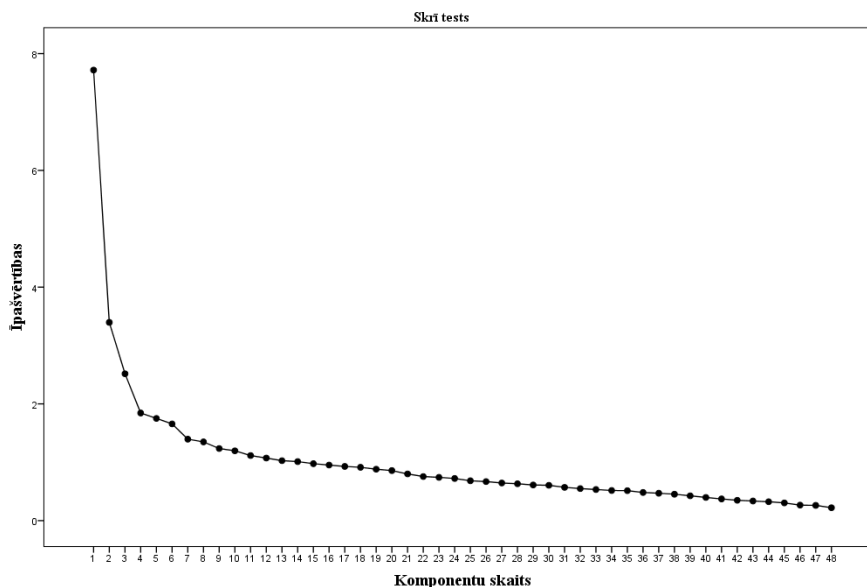
2.attēls. FIAS II adaptētās versijas visu pantu īpašvērtību līkne (Dombrovskis, 2014)

Grafiskajā attēlojumā, kur attēlotas FIAS II adaptētās versijas visu pantu īpašvērtību līkne (skat. 2.att.) var novērot, ka līknes lūzuma punkti ir maz izteikti, izteikti nosakāmi trīs līknes lūzuma punkti.

3.tabula. FIAS II adaptētās versijas veidotie 5 faktoru izskaidrotās daļas

Panti	Sākuma īpašvērtība			Izdalītā summa no slodzes kvadrātā			Rotētā summa no slodzes kvadrātā		
	Kopējais	% no dispersijas	Kumulatīvs %	Kopējais	% no dispersijas	Kumulatīvs %	Kopējais	% no dispersijas	Kumulatīvs %
1	7,10	14,78	14,78	7,10	14,78	14,78	5,09	10,60	10,60
2	3,01	6,27	21,05	3,01	6,27	21,05	3,21	6,69	17,29
3	2,51	5,23	26,28	2,51	5,23	26,28	2,89	6,01	23,30
4	1,96	4,07	30,36	1,96	4,07	30,36	2,55	5,31	28,61
5	1,60	3,34	33,70	1,60	3,34	33,70	2,44	5,09	33,70
6	1,55	3,23	36,93	--	--	--	--	--	--
7	1,41	2,94	39,87	--	--	--	--	--	--
8	1,35	2,81	42,68	--	--	--	--	--	--
9	1,26	2,63	45,31	--	--	--	--	--	--
10	1,20	2,50	47,80	--	--	--	--	--	--
11	1,16	2,41	50,21	--	--	--	--	--	--
12	1,13	2,36	52,57	--	--	--	--	--	--
13	1,07	2,23	54,80	--	--	--	--	--	--
14	1,04	2,16	56,96	--	--	--	--	--	--
15	0,99	2,07	59,03	--	--	--	--	--	--
16	0,97	2,01	61,04	--	--	--	--	--	--
17	0,89	1,86	62,89	--	--	--	--	--	--
18	0,87	1,82	64,71	--	--	--	--	--	--
19	0,84	1,76	66,47	--	--	--	--	--	--
20	0,81	1,69	68,15	--	--	--	--	--	--
21	0,80	1,66	69,81	--	--	--	--	--	--
22	0,79	1,65	71,46	--	--	--	--	--	--
23	0,77	1,60	73,06	--	--	--	--	--	--
24	0,76	1,58	74,64	--	--	--	--	--	--
25	0,74	1,55	76,19	--	--	--	--	--	--
26	0,72	1,50	77,69	--	--	--	--	--	--
27	0,68	1,43	79,12	--	--	--	--	--	--
28	0,66	1,38	80,50	--	--	--	--	--	--
29	0,64	1,34	81,84	--	--	--	--	--	--
30	0,63	1,30	83,14	--	--	--	--	--	--
31	0,61	1,28	84,42	--	--	--	--	--	--
32	0,59	1,22	85,64	--	--	--	--	--	--
33	0,57	1,19	86,84	--	--	--	--	--	--
34	0,56	1,16	88,00	--	--	--	--	--	--
35	0,53	1,11	89,10	--	--	--	--	--	--
36	0,52	1,08	90,18	--	--	--	--	--	--
37	0,51	1,05	91,24	--	--	--	--	--	--
38	0,49	1,02	92,25	--	--	--	--	--	--
39	0,46	0,95	93,21	--	--	--	--	--	--
40	0,44	0,92	94,13	--	--	--	--	--	--

41	0,43	0,89	95,02	--	--	--	--	--	--
42	0,41	0,86	95,88	--	--	--	--	--	--
43	0,38	0,78	96,66	--	--	--	--	--	--
44	0,36	0,76	97,42	--	--	--	--	--	--
45	0,35	0,74	98,15	--	--	--	--	--	--
46	0,34	0,71	98,86	--	--	--	--	--	--
47	0,29	0,61	99,46	--	--	--	--	--	--
48	0,26	0,54	100,00	--	--	--	--	--	--

Izdalīšanas metode: Galveno komponentu analīze.
Avots: Dombrovskis, 2014.

Tabulā Nr.3. attēlots FIAS II adaptētās versijas veidotie 5 faktoru izskaidrotās daļas. Kā var redzēt 3.tabulā, tad veicot izdalīšanu ar Galveno komponentu analīzi, pie ierobežojuma, izdalīt piecus faktorus, tiek iegūts, ka piecu faktoru modelis izskaidro tikai 33,70 %.

4.tabula. Rotēto FIAS II adaptētās versijas piecu faktoru matrica[a]

Panti	Komponenti				
	(1) **Aktīva iesaiste**	**(2)** **Pasīva pieņemšana**	**(3)** **Piederība**	**(4)** **Atklāsme**	**(5)** **Sintēze**
48	0,72	--	--	--	--
39	0,72	--	--	--	--
31	0,68	--	--	--	--
47	0,64	--	--	--	--
44	0,53	--	--	--	--
35	0,50	--	--	--	--
19	0,48	--	--	--	--
42	0,47	--	--	--	--
33	0,44	--	--	--	--
10	0,43	--	--	--	--
16	--	--	--	--	--
34	--	--	--	--	--
12	--	--	--	--	--
7	--	--	--	--	--
37	--	--	--	--	--
8	--	--	--	--	--
43	--	--	--	--	--
13	--	0,62	--	--	--
26	--	0,61	--	--	--
30	--	0,50	--	--	--
45	--	0,49	--	--	--
38	--	0,47	--	--	--
15	--	0,43	--	--	--
32	--	0,43	--	--	--
29	--	--	--	--	--
3	--	--	0,62	--	--
5	--	--	0,59	--	--

4	--	--	0,51	--	--
1	--	--	-0,47	--	--
6	--	--	0,44	--	--
2	--	--	0,42	--	--
23	--	--	0,41	--	--
21	--	--	--	--	--
22	--	--	--	-0,56	--
20	--	--	--	0,56	--
41	--	--	--	0,53	--
9	--	--	--	0,50	--
27	--	--	--	0,46	--
36	--	--	--	--	--
18	--	--	--	--	--
25	--	--	--	--	--
40	--	--	--	--	--
28	--	--	--	--	0,61
46	--	--	--	--	0,59
14	--	--	--	--	0,52
17	--	-0,40	--	--	0,46
11	--	--	--	--	-0,42
24	--	--	--	--	0,41

Izdalīšanas metode: galveno faktoru metode. Varimaks rotācija ar Kaisera normalizāciju. a. Rotēšama tika veikta ar 15 atkārtojumiem
Avots: Dombrovskis, 2014.

Aptaujas FIAS autori piedāvā izmantot pantus, kuri nav iekļauti apakšskalās, bet kurus var iekļaut vai pievienot citām apakšskalām, izanalizējot tos pēc panta satura būtības. Šie panti ir:13.; 15.; 25.; 26.; 27.; 31.; 34.; 39.; 41. (Bargad & Hyde, 1991). Pēc faktoranalīzes panti, kuri neiekļaujas nevienā no pieciem faktoriem (skat. 4.tab.), ir 16., 34., 12., 7., 37., 8., 43., 29., 21., 36., 18., 25., 40.. Šie neiekļautie panti tika analizēti pēc to satura un pievienoti atbilstošajām apakšskalām trešajā, faktoriāli modificētajā, versijā, vadoties pēc pantu satura analīzes (jēgas piemērotības).

Saskaņā ar aptaujas pantu faktoranalīzi 14 panti uzrāda īpašvērtību, kas ir lielāka par 1 (skat. 2.tab.), kas norāda, ka aptaujā izdalāmi 14 faktori, kas izskaidro 56,96% no kopējās variācijas. Gūds savos pētījumos bija izdalījis 12 faktorus, kuru īpašvērtība lielāka par 1 (Good et al., 2000).

Izveidojot 5 faktoru modeli (skat. 3.tab.), kāds ir aptaujas oriģinālajā variantā, tas izskaidro tikai 33,70% no kopējās variācijas.

Analizējot komponenšu izkārtojumu pēc īpašvērtībam grafiskā attēlojumā (skat. 2.att.) redzams, ka līkne veido tikai trīs izteiktus lūzuma punktus, Gūds savā pētījumā norāda, ka grafiskā līkne veido trīs un četrus lūzuma punktus (Good et al., 2000). Pēc 2.attēla analīzes var secināt, ka izdalāmi trīs faktori.

Pēc dotās analīzes var secināt, ka FIAS faktoriālā validitāte nav apstiprinājusies.

Faktoriāli modificētās versijas FIAS psihometriskie rādītāji

5.tabula. FIAS skalu nosaukumu maiņa pirms un pēc faktoriālās modificēšanas

Apakšskala	Oriģinālais skalas nosaukums	Faktoriāli modificētās skalas jaunais nosaukums
1	Aktīva iesaiste	*Aktīva feministe*
2	Pasīva pieņemšana	*Dusmas un piesardzība*
3	Piederība	*Atklāsme un sintēze*
4	Atklāsme	*Līdzvērtība*
5	Sintēze	*Diferencēšana*

Avots: Dombrovskis, 2014.

FIAS adaptācijas gaitā psihometrisko rādītāju analīzē tika izmantoti tulkotie skalu nosaukumi, bet faktoriāli modificētajā FIAS versijā, skalu (dimensiju) nosaukumi tika mainīti atbilstoši skalu (dimensiju) psiholoģiskajam saturam (skat. 5.tab.).

6.tabula. FIAS (faktoriāli modificētās versijas) apakšskalas *Dusmas un piesardzība* pantu statistika

Pants	Vidējais aritmētiskais	Standartnovirze	Respondentu skaits
13	2,69	1,11	501
26	3,20	1,06	501
30	2,75	1,08	501
45	3,24	0,98	501
38	3,03	1,07	501
15	2,58	0,98	501
32	2,60	0,98	501
21	2,88	0,97	501
34	2,52	0,10	501

Avots: Dombrovskis, 2014.

7.tabula. FIAS (faktoriāli modificētās versijas) apakšskalu pantu vidējie statistiskie rādītāji

FIAS apakšskala	Vidējais aritmētiskais	Minimums	Maksimums	Rangs	Maksimums / Minimums	Dispersija	Pantu skaits
Dusmas un piesardzība	2,83	2,52	3,24	0,71	1,28	0,07	9
Līdzvērtība	4,08	3,66	4,28	0,62	1,17	0,06	5
Atklāsme un sintēze	3,36	2,95	3,97	1,02	1,35	0,13	7
Diferencēšana	3,31	2,51	4,41	1,90	1,76	0,32	9
Aktīva feministe	2,47	2,03	3,28	1,25	1,61	0,13	13

Avots: Dombrovskis, 2014.

8.tabula. FIAS (faktoriāli modificētās versijas) apakšskalas *Dusmas un piesardzība* pantu kopējā statistika

Panti	Skalas vidējais aritmētiskais, ja pantu izdzēš	Skalas dispersija, ja pantu izdzēš	Izmaiņas pantu kopējā korelācijā	Multiplās korelācijas kvadrāts	Kronbaha alfa, ja pantu izdzēš
13	22,81	21,095	0,42	0,36	0,70
26	22,30	21,824	0,37	0,34	0,71
30	22,75	21,035	0,44	0,21	0,69
45	22,27	22,521	0,33	0,13	0,71
38	22,47	20,934	0,46	0,24	0,69
15	22,92	22,536	0,34	0,15	0,71
32	22,90	21,562	0,44	0,27	0,69
21	22,62	22,291	0,37	0,17	0,71
34	22,98	21,790	0,41	0,22	0,70

Avots: Dombrovskis, 2014.

9.tabula. FIAS (faktoriāli modificētās versijas) apakšskalas *Dusmas un piesardzība* psihometriskie rādītāji faktoriāli modificētajai versijai

Panta nr.	3. versija (N=501)	
	Diskriminācijas indekss	Grūtības indekss
13	0,42	2,69
26	0,37	3,20
30	0,44	2,75
45	0,33	3,24
38	0,46	3,03
15	0,34	2,58
32	0,44	2,60
21	0,37	2,88
34	0,41	2,52
SD = 0,58	3. adaptētā versija	
M = 2,83	α= 0,72	

Avots: Dombrovskis, 2014.

10.tabula. FIAS apakšskalas *Līdzvērtība* pantu statistika (*Item Statistics*)

Pants	Vidējaisaritmētiskais	Standartnovirze	Respondentu skaits
20	3,66	0,93	501
41	4,16	0,88	501
9	4,28	0,80	501
27	4,11	0,91	501
18	4,20	0,75	501

Avots: Dombrovskis, 2014.

11.tabula. FIAS (faktoriāli modificētās versijas) apakšskalas *Līdzvērtība* pantu kopējā statistika

Panti	Skalas vidējais aritmētiskais, ja pantu izdzēš	Skalas dispersija, ja pantu izdzēš	Izmaiņas pantu kopējā korelācijā	Multiplās korelācijas kvadrāts	Kronbaha alfa, ja pantu izdzēš
20	16,75	4,46	0,21	0,06	0,50
41	16,26	4,18	0,33	0,12	0,41
9	16,13	4,29	0,36	0,20	0,39
27	16,30	4,43	0,23	0,06	0,48
18	16,22	4,70	0,27	0,15	0,45

Avots: Dombrovskis, 2014.

12.tabula. FIAS (faktoriāli modificētās versijas) apakšskalas *Līdzvērtība* psihometriskie rādītāji faktoriāli modificētajai versijai

Panta nr.	3. versija (N=501)	
	Diskriminācijas indekss	Grūtības indekss
20	0,21	3,66
41	0,33	4,16
9	0,36	4,28
27	0,23	4,11
18	0,27	4,20
SD = 0,49	3. adaptētā versija	
M = 4,08	α= 0,51	

Avots: Dombrovskis, 2014.

13.tabula. FIAS (faktoriāli modificētās versijas) apakšskalas *Atklāsme un sintēze* pantu statistika

Pants	Vidējais aritmētiskais	Standartnovirze	Respondentu skaits
	3,22	0,96	501
5	3,11	1,02	501
4	3,37	1,03	501
6	3,68	0,83	501
2	3,97	0,91	501
23	3,20	0,88	501
7	2,95	1,02	501

Avots: Dombrovskis, 2014.

14.tabula. FIAS (faktoriāli modificētās versijas) apakšskalas *Atklāsme un sintēze* pantu kopējā statistika

Panti	Skalas vidējais aritmētiskais, ja pantu izdzēš	Skalas dispersija, ja pantu izdzēš	Izmaiņas pantu kopējā korelācijā	Multiplās korelācijas kvadrāts	Kronbaha alfa, ja pantu izdzēš
3	20,29	9,88	0,52	0,32	0,54
5	20,40	10,32	0,39	0,21	0,58
4	20,13	10,44	0,37	0,21	0,59
6	19,83	11,80	0,25	0,07	0,63
2	19,53	10,78	0,39	0,23	0,59
23	20,30	11,43	0,29	0,10	0,62
7	20,55	11,40	0,22	0,06	0,64

Avots: Dombrovskis, 2014.

15.tabula. FIAS (faktoriāli modificētās versijas) apakšskalas *Atklāsme un sintēze*psihometriskie rādītāji FIAS faktoriāli modificētajai versijai

Panta nr.	3. versija (N=501)	
	Diskriminācijas indekss	Grūtības indekss
3	0,52	3,22
5	0,39	3,11
4	0,37	3,37
6	0,25	3,68
2	0,39	3,97
23	0,29	3,20
7	0,22	2,95
SD = 0,53	3. adaptētā versija	
M = 3,35	α= 0,64	

Avots: Dombrovskis, 2014.

16.tabula. FIAS (faktoriāli modificētās versijas) apakšskalas *Diferencēšana* pantu statistika

Pants	Vidējais aritmētiskais	Standartnovirze	Respondentu skaits
28	3,64	1,07	501
46	3,57	1,02	501
14	4,41	0,84	501
17	3,61	0,87	501
11*	3,26	1,28	501
24	3,07	1,08	501
36	2,51	1,18	501
40	3,01	1,07	501
43	2,75	1,19	501

*Piezīmes: * apgrieztais pants*
Avots: Dombrovskis, 2014.

17.tabula. FIAS (faktoriāli modificētās versijas) apakšskalas *Diferencēšana* pantu kopējā statistika

Panti	Skalas vidējais aritmētiskais, ja pantu izdzēš	Skalas dispersija, ja pantu izdzēš	Izmaiņas pantu kopējā korelācijā	Multiplās korelācijas kvadrāts	Kronbaha alfa, ja pantu izdzēš
28	26,19	15,21	0,39	0,20	0,45
46	26,25	15,71	0,35	0,14	0,46
14	25,42	17,45	0,21	0,11	0,51
17	26,21	17,28	0,21	0,07	0,51
11*	26,56	15,79	0,21	0,08	0,51
24	26,76	16,23	0,25	0,12	0,49
36	27,32	15,81	0,25	0,13	0,49
40	26,82	17,29	0,13	0,04	0,53
43	27,08	16,84	0,14	0,05	0,53

*Piezīmes: * apgrieztais pants*
Avots: Dombrovskis, 2014.

18.tabula. FIAS (faktoriāli modificētās versijas) apakšskalas *Diferencēšana*psihometriskie rādītāji FIAS faktoriāli modificētajai versijai

Panta nr.	3. versija (N=501)	
	Diskriminācijas indekss	Grūtības indekss
28	0,39	3,64
46	0,35	3,57
14	0,21	4,41
17	0,21	3,61
11	0,21	3,26
24	0,25	3,07
36	0,25	2,51
40	0,13	3,01
43	0,14	2,75
SD = 0,43	3. adaptētā versija	
M = 3,26	α= 0,53	

Avots: Dombrovskis, 2014.

19.tabula. FIAS (faktoriāli modificētās versijas) apakšskalas *Aktīva feministe* pantu statistika

Pants	Vidējais aritmētiskais	Standartnovirze	Respondentu skaits
48	2,22	0,89	501
39	2,14	0,92	501
31	2,03	0,90	501
47	2,20	0,87	501
44	2,75	0,92	501
35	2,22	1,01	501
19	2,50	0,91	501
42	2,39	1,01	501

Pants	Vidējais aritmētiskais	Standartnovirze	Respondentu skaits
33	2,50	0,89	501
10	2,85	1,15	501
29	2,25	1,09	501
8	3,28	0,87	501
12	2,79	1,04	501

Avots: Dombrovskis, 2014.

20.tabula. FIAS (faktoriāli modificētās versijas) apakšskalas *Aktīva feministe* pantu kopējā statistika

Panti	Skalas vidējais aritmētiskais, ja pantu izdzēš	Skalas dispersija, ja pantu izdzēš	Izmaiņas pantu kopējā korelācijā	Multiplās korelācijas kvadrāts	Kronbaha alfa, ja pantu izdzēš
48	29,90	38,45	0,65	0,53	0,77
39	29,98	38,27	0,64	0,53	0,77
31	30,09	38,77	0,60	0,48	0,78
47	29,92	39,43	0,56	0,40	0,78
44	29,37	40,40	0,44	0,25	0,79
35	29,91	39,93	0,42	0,23	0,79
19	29,62	41,21	0,37	0,17	0,79
42	29,73	39,99	0,42	0,21	0,79
33	29,62	41,30	0,37	0,18	0,79
10	29,28	39,39	0,39	0,23	0,79
29	29,88	40,49	0,34	0,17	0,80
8	28,84	43,09	0,22	0,13	0,80
12	29,33	41,03	0,32	0,16	0,80

Avots: Dombrovskis, 2014.

21.tabula. FIAS (faktoriāli modificētās versijas) apakšskalas *Aktīva feministe* psihometriskie rādītāji faktoriāli modificētajai versijai

Panta nr.	3. versija (N=501)	
	Diskriminācijas indekss	Grūtības indekss
48	0,65	2,22
39	0,64	2,14
31	0,60	2,03
47	0,56	2,20
44	0,44	2,75
35	0,42	2,22
19	0,37	2,50
42	0,42	2,39
33	0,37	2,50
10	0,39	2,85
29	0,34	2,25
8	0,22	3,28
12	0,32	2,79
SD = 0,52	3. adaptētā versija	
M = 2,47	α= 0,81	

Avots: Dombrovskis, 2014.

22.tabula. FIAS apakšskalau ticamības statistika

FIAS apakšskala	Kronbaha alfa	Standartizētā Kronbaha alfa	Pantu skaits
Dusmas un piesardzība	0,72	0,72	9
Līdzvērtība	0,50	0,51	5
Atklāsme un sintēze	0,64	0,64	7
Diferencēšana	0,53	0,53	9
Aktīva feministe	0,8	0,81	13

Avots: Dombrovskis, 2014.

23.tabula. FIAS faktoriāli modificētās versijas apakšskalas *Aktīva feministe* saturs un apraksts

Pants	Panta saturs
48	Īpaši tagad es jūtos daudz labāk kopā ar sievietēm, kurām ir tādi paši feminisma uzskati kā man.
39	Es beidzot jūtos ļoti labi, aptverot, ka esmu feministe.
31	Būt feministei – tas ir viens no aspektiem, kas veido manu identitāti.
47	Es esmu apņēmusies visu dzīvi veltīt darbam, lai panāktu sieviešu sociālo, ekonomisko un politisko vienlīdzību.
44	Kaut kādā ziņā mana motivācija gandrīz katrai manai darbībai ir mana vēlēšanās panākt, lai pasaulē valdītu vienlīdzība.
35	Ja es gleznotu gleznu vai rakstītu poēmu, tā droši vien būtu par sievietēm vai sieviešu jautājumiem.
19	Pašreiz es jūtu nepieciešamību pēc sieviešu sabiedrības, kuras pieturas pie tādiem pašiem uzskatiem kā es.
42	Nesen es kaut ko lasīju vai man bija īpaša pieredze, kas radīja lielāku izpratni par seksismu (uz dzimuma diskriminācijas stereotipiem balstīta attieksme).
33	Es jūtu, ka esmu ļoti ietekmīga un efektīva pārstāve, kas var runāt par sieviešu jautājumiem, ar kuriem es pašreiz nodarbojos.
10	Es pavadu lielāko daļu sava brīvā laika kopā ar dažām tuvām draudzenēm, kuras atbalsta tādas pašas feminisma vērtības kā es.
29	Kad domāju par lielāko daļu pasaules problēmu – vides piesārņojumu, diskrimināciju, atomkara draudiem – man šķiet, ka lielāko daļu no tām ir radījuši vīrieši.
12	Vēlos nest zināmus upurus, lai panāktu, ka šī sabiedrība ir no dzimuma izspriedumiem brīva, mierīga vieta, kur visiem ir nodrošinātas vienādas iespējas.
8	Esmu ļoti pārliecināta, ka idejas, kurām ticu, vairos taisnīgumu un vienlīdzību cilvēku vidū visā pasaulē.

Avots: Dombrovskis, 2014.

24.tabula. FIAS faktoriāli modificētās versijas apakšskalas *Dusmas un piesardzība* saturs un apraksts

Pants	Panta saturs
13	Es varētu raksturot savu saskarsmi ar vīriešiem kā piesardzīgu.
26	Es mēdzu būt uzmanīga saskarsmē ar vīriešiem.
30	Es dusmojos, ja esmu ļāvusi vīriešiem gūt virsroku pār sevi.
45	Es uzskatu, ka tur, kur valda vīrieši (patriarhāts), tur sievietes ir apspiestas.
38	Kad es redzu, kā lielākā daļa vīriešu attiecas pret sievietēm, es kļūstu ļoti nikna.
15	Kad es domāju par seksismu (attieksmi, kas balstīta uz dzimumu diskriminējošiem stereotipiem), mana pirmā reakcija vienmēr ir dusmas.
32	Es tikai nesen sāku domāt, ka nav godīgi, ka vīriešiem šajā dzīvē ir privilēģijas tikai tāpēc, ka viņi ir vīrieši.

Avots: Dombrovskis, 2014.

25.tabula. FIAS faktoriāli modificētās versijas apakšskalas *Atklāsme un sintēze* saturs un apraksts

Pants	Panta saturs
3	Es vēlos darboties, lai uzlabotu sieviešu statusu.
5	Es agrāk domāju, ka diskriminācija uz dzimuma pamata nav īpaši izplatīta, bet tagad zinu, cik ārkārtīgi bieži tā patiesībā notiek.
4	Es jūtu, ka daudziem vīriešiem ir saasināta reakcija uz sieviešu jautājumiem.
6	Lai gan daudzi vīrieši ir seksisti (ar dzimumu diskriminējošiem stereotipiem), esmu konstatējusi, ka daži vīrieši ir ļoti labvēlīgi noskaņoti attiecībā uz sieviešu jautājumu un feminismu.
2	Man ir svarīgi būt daļai no sieviešu sabiedrības.
23	Es esmu ļoti apmierināta, ka varu izmantot savus talantus un prasmes savā darbā sieviešu kustībā.
7	Īpaši pašlaik es izjūtu, ka apkārtējās sievietes stiprina mani.
21	Es kļūstu ļoti sarūgtināta, kad domāju par to, ka šajā sabiedrībā pret sievietēm tik ilgi ir bijusi tik netaisnīga attieksme.
16	Vēlētos, lai mana dzīve norit, galvenokārt, kopā ar sievietēm, tomēr ir daži vīrieši, ar kuriem labprāt izveidotu neseksuālu draudzību.
1	Es neuzskatu, ka ir nepieciešami grozījumi likumdošanā, kas nodrošinātu sieviešu un vīriešu līdztiesību, jo sievietēm tāpat ir labi.

Avots: Dombrovskis, 2014.

26.tabula. FIAS faktoriāli modificētās versijas apakšskalas Diferencēšana saturs un apraksts

Pants	Panta saturs
28	Es domāju, ka vairums sieviešu jutīs vislielāko piepildījumu kā sievas vai mātes.
46	Es uzskatu, ka sievietēm ir paveicies, ka viņām nav jāveic bīstamie darbi, kas ir paredzēti vīriešiem, piemēram, darbs celtniecībā vai ātrumsacensību automašīnas vadīšana.
14	Man patīk, ja vīrieši pret mani izturas kā pret sievieti, piedāvājot savu vietu pārpildītā autobusā, atverot durvis u.tml.
17	Esmu apmierināta ar sievietes lomu mūsu sabiedrībā.
11	ES nepiekrītu vispārējam uzskatam, ka vīriešiem jābūt vīrišķīgiem, bet sievietēm sievišķīgām.
24	Ja vīram piedāvā darbu citā valstī vai pilsētā, tad sievas pienākums būtu doties viņam līdzi, lai atbalstītu viņa karjeru.
36	Es domāju, ka ģimenes dzīve ir labāka, ja precēta sieviete ir mājsaimniece un viņas vīrs viņu uztur.
40	Vispār es domāju, ka vīrieši ir interesantāki par sievietēm.
43	Es uzskatu, ka izvarošanā reizēm ir vainojama pati sieviete.

Avots: Dombrovskis, 2014.

27.tabula. FIAS faktoriāli modificētās versijas apakšskalas *Līdzvērtība* saturs un apraksts

Pants	Panta saturs
20	Man ļoti rūp, lai vīriešiem un sievietēm visās jomās būtu līdzvērtīgas iespējas.
41	Vīrieši un sievietes ir vienlīdzīgi, bet dažādi.
9	Lai gan esmu ieinteresēta, lai pret sievietēm dzīvē izturētos taisnīgi, es nesaskatu vīriešos ienaidniekus.
27	Es uzskatu, ka izvēloties karjeru cilvēkiem nevajadzētu ļauties dzimumlomu stereotipu ietekmei.
18	Vīriešus es vērtēju kā personības, nevis kā apspiedēju grupas locekļus.

Avots: Dombrovskis, 2014.

Pēc modifikācijas šajā pētījumā FIAS saglabā to pašu piecu rādītāju struktūru (piecas feministiskās identitātes dimensijas), bet rādītāju nosaukumi tika izmainīti atbilstoši rādītāju saturam:

1. *Aktīva feministe*: (Aktīva nodošanās idejai (Aktīva iesaiste) (Bargad & Hyde, 1991)) raksturo sievietes pilnīgu saplūšanu ar feministisko identitāti, aktīvu iesaistīšanos cīņās vai vēlmi aktīvi iesaistīties nozīmīgās, mērķtiecīgās darbībās feministisko ideju realizēšanā, iestāšanos pret seksistisku pasauli. Savu dzīvi vēlas ziedot „ideju vārdā", atsakoties no personīgās dzīves. Feminisms izteikti saistās ar vārdu „sieviete".

2. ***Dusmas un piesardzība***: (Pasīva pieņemšana (Bargad & Hyde, 1991)) šīs sievietes raksturo piesardzīga attieksme pret vīriešiem. Izjūt iekšējas dusmas un bailes, agresiju pret vīriešiem, tomēr vēl nav gatavas aktīvai darbībai un savu feministisko ideju aizstāvībai. Visas negatīvās emocijas par netaisnīgumu tiek paturētas pie sevis.

3. ***Atklāsme un sintēze***: (Iesaiste – atbrīvotība (Piederība) (Bargad & Hyde, 1991)) šīs grupas sievietes raksturo vēlēšanās darboties sieviešu statusa uzlabošanā, bet vienlaikus notiek vīriešu diferenciācija. Vīrieši tiek diferencēti pēc viņu uzskatiem, nevis klasificēti pēc principa „visi vīrieši ir vienādi". Pastiprināti izjūt un apzinās savu piederību sieviešu grupai kā atšķirīgai no vīriešu grupas.

4. ***Diferencēšana***: (Atklāsme (Bargad & Hyde, 1991)) šīs grupas pārstāves raksturo tas, ka tiek pieņemtas stereotipiskās lomas, kādas ir vīriešiem un sievietēm. Diferencē sievietes no vīriešiem. Atzīst, ka dzīvojot vidē, kurā valda stereotipiskās lomas, sieviete jūtas labāk un sievietes dzīve ir vairāk piepildīta ar jēgu.

5. ***Līdzvērtība***: (Sintēze (Bargad & Hyde, 1991)) šīs sievietes savos uzskatos pauž viedokli par vīriešu un sieviešu līdzvērtību, atzīstot, ka atšķirībām starp dzimumiem nav nozīmes sociālajās aktivitātēs (Dombrovskis, 2014).

Strukturālā validitāte

28.tabula. FIAS faktoriāli modificētās versijas apakšskalu Spīrmena korelācijas koeficienti

FIAS apakšskalas	Korelācijas rādītāji	Aktīva feministe	Dusmas un piesardzība	Līdzvērtība	Atklāsme un sintēze
Dusmas un piesardzība	Korelācijas koeficients	0,557[**]			
	Divpusējās nozīmības līmenis	0,000			
Līdzvērtība	Korelācijas koeficients	-0,128[**]	-0,086		
	Divpusējās nozīmības līmenis	0,004	0,054		
Atklāsme un sintēze	Korelācijas koeficients	0,432[**]	0,364[**]	0,122[**]	
	Divpusējās nozīmības līmenis	0,000	0,000	0,006	
Diferencēšana	Korelācijas koeficients	0,077	-0,039	0,002	0,063
	Divpusējās nozīmības līmenis	0,086	0,385	0,960	0,159

**. Korelācija nozīmīga pie 0,01 līmeņa (divpusējās nozīmības līmenis)
Avots: Dombrovskis, 2014.

Konstruktu validitāte

29.tabula. FIAS apakšskalu savstarpējo Spīrmena korelāciju salīdzinājums adaptētajām versijām ar metodes oriģinālu un citu autoru atklātajām korelācijām

Apakšskalas	Atklāsme (4)	Piederība (3)	Sintēze (5)	Aktīva iesaiste (1)
1.Pasīva pieņemšana (2)	-0,03[1]	0,07[1]	-0,02[1]	0,03[1]
	-0,13[G]	0,01[G]	-0,13[G]	-0,33[**G]
	-0,71[A]	0,38[**A]	0,04[A]	0,45[**A]
	0,04[F]	0,10[*F]	0,05[F]	0,03[F]
2.Atklāsme		0,48[**1]	-0,08[1]	0,48[**1]
		0,53[**G]	-0,19[**G]	0,50[**G]
		0,11[*A]	0,10[*A]	0,02[A]
		-0,07[F]	0,38[**F]	0,45[**F]
3.Piederība			-0,08[1]	0,54[**1]
			-0,21[**G]	0,46[**G]
			0,05[A]	0,53[**A]
			0,11[*F]	0,02[F]
4.Sintēze				0,03[1]
				0,10[G]
				0,03[A]
				0,53[**F]

Piezīmes:.
*$p < 0,05;$ **$p < 0,01,$ (pie divpusējās nozīmības); [G] - dati no Gūda (Goog et al., 2000); [A]-dati no trešās FIAS faktoriālās modifikācijasar satura pārstrukturēšanu, un ar mainītiem skalu nosaukumiem un apakšskalu saturu; [1]-dati no otrāsFIAS adaptācijas, bez faktoriālās modifikācijas; [F]- faktoriāli modificētās skalas, bez satura pārstrukturēšanas, ar nemainītiem skalu nosaukumiem un apakšskalu saturu.*
Avots: Dombrovskis, 2014.

Apakšskalu korelāciju izpēte ir svarīgs posms strukturālās validitātes pārbaudīšanai. No vienas puses, oriģinālā instrumenta apakšskalu savstarpējās korelācijas var salīdzināt ar adaptētā instrumenta apakšskalu korelācijām (skat. 28.tab.), lai secinātu, vai apakšskalu savstarpējās saistības ir atbilstošas jaunajā kultūrvidē. No otras puses, apakšskalu savstarpējās korelācijas var kalpot kā konstruktu validitātes rādītājs, paredzot teoriju apstiprinošas saiknes starp mērāmajiem konstruktiem. 29.tabulā apkopota informācija par apakšskalu savstarpējām korelācijām Gūda (Good et al., 2000) pētījumā un Latvijā adaptētās FIAS pirmās, otrās, un trešās, faktoriāli modificētās, versijas apakšskalu savstarpējo korelāciju dati, kā arī korelācija pēc faktoru nosaukumu maiņas. Apakšskalu savstarpējās korelācijas būtiski neatšķiras no Gūda pētījumā (Good et al., 2000) uzrādītajām apakšskalu savstarpējām korelācijām. Ņemot vērā apakšskalu līdzīgo savstarpējo korelāciju, var secināt, ka strukturālā validitāte adaptētajai versijai ir pieņemama un uzskatāma par apstiprinātu.

Kontentanalīze – satura validitāte

Kā norāda Gūds, tad pirms pētījuma ar FIAS metodi jāveic pantu satura revīzija, lai noteiktu kuri panti izmantojami, kuri dzēšami (Good et al., 2000). Veicot pantu satura un faktoru nosaukumu analīzi adaptētajā versijā un saskaņojot to ar faktoru nosaukumiem un tos veidojošo pantu saturu oriģinālajā versijā, tika veikta faktoru pārsaukšana (skat. 5.tab.) atbilstoši faktoru saturam (skat. 23.; 24.; 25.; 26.; 27. tabulas) un pieskaņojot tos oriģinālo faktoru saturam.

Aktīva iesaiste tiek pārsaukta par *Aktīva feministe*; *Pasīva pieņemšana* par *Dusmas un piesardzība*; *Piederība* par *Atklāsme un sintēze*; *Atklāsme* par *Līdzvērtība*; *Sintēze* par *Diferencēšana*. Faktoru pārsaukšanas rezultātā nemainās faktoru pantu sastāvs, bet mainās tikai faktoru nosaukums, kas ir tuvāks pantu skaidrotajai būtībai.

Konverģentā validitāte

30.tabula. Spīrmena korelācija starp Identitātes Krīzes Aptaujas (IKA) un FIAS oriģinālajām apakšskalām

Rādītāji		Aktīva iesaiste	Sintēze	Piederība	Atklāsme	Pasīva pieņemšana
IKA	Spīrmena korelācijas koeficients	0,23**	0,06	0,26**	0,02	0,23**
	Nozīmīgums (2-pusēji nozīmīga)	0,00	0,18	0,00	0,62	0,00

** Korelācija nozīmīga pie 0,01 līmeņa (divpusējās nozīmības līmenis); *Korelācija nozīmīga pie 0,05 līmeņa (divpusējās nozīmības līmenis); N = 501
Avots: Dombrovskis, 2014.

31.tabula. Spīrmena korelācija starp Identitātes Krīzes Aptaujas (IKA) un FIAS faktoriāli modificētās versijas apakšskalām

Rādītāji		Aktīva feministe	Dusmas un piesardzība	Līdzvērtība	Atklāsme un sintēze	Diferencēšana
IKA	Spīrmena korelācijas koeficients	0,23**	0,22**	-0,03	0,24**	0,06
	Nozīmīgums (2-pusēji nozīmīga)	0,00	0,00	0,53	0,00	0,20

** Korelācija nozīmīga pie 0,01 līmeņa (divpusējās nozīmības līmenis); N = 501
Avots: Dombrovskis, 2014.

Lai pārbaudītu konverģento validitāti, tiek izvirzīta hipotēze, ka Identitātes krīzes aptaujas rādītājiem būtu jākorelē ar FIAS faktoriem. Izvirzītā hipotēze apstiprinājās, jo novērojamas korelācijas (skat. 30. un 31.tabulas starp Identitātes krīzes aptaujas (IKA) (Berman, Montgomery & Kurtines, 2004; Dombrovskis, 2014) rādītājiem un FIAS faktoriem.

Diverģentā validitāte

Diverģentās validitātes pārbaudei tika izvirzīta hipotēze, ka FIAS faktoram *Aktīva iesaiste* nevajadzētu korelēt ar Ģimenes Vides Skalas – "R" reālās vides formas faktoru „*Ekspresija*" (Moss & Moss, 2009; Dombrovskis, 2014). Korelācija starp šiem abiem faktoriem nav novērojama ($r_s = 0,009$; $p = 0,170$), līdz ar to izvirzītā hipotēze ir apstiprināta.

3.tabula. FIAS testa un retesta Spīrmena korelācijas koeficienti.

32.tabula. FIAS faktoriāli modificētās versijas Testa – Retesta rezultāti, N=30.

FIAS Apakšskalas (dimensijas)		FIAS apakšskalas (dimensijas)				
		Dusmas un piesardzība	Līdzvērtība	Atklāsme un sintēze	Diferen-cēšana	Aktīva feministe
Dusmas un piesardzība	Korelācijas koeficients	**0,866**[**]	0,010	0,482[**]	0,323	0,511[**]
	Divpusējās nozīmības līmenis	0,000	0,958	0,007	0,081	0,004
Līdzvērtība	Korelācijas koeficients	0,187	**0,878**[**]	0,247	0,306	-0,111
	Divpusējās nozīmības līmenis	0,323	0,000	0,189	0,100	0,561
Atklāsme un sintēze	Korelācijas koeficients	0,331	0,232	**0,643**[**]	0,394[*]	0,459[*]
	Divpusējās nozīmības līmenis	0,074	0,217	0,000	0,031	0,011
Diferen-cēšana	Korelācijas koeficients	-0,073	0,248	0,133	**0,640**[**]	-0,086
	Divpusējās nozīmības līmenis	0,700	0,187	0,485	0,000	0,653
Aktīva feministe	Korelācijas koeficients	0,573[**]	0,149	0,747[**]	0,406[*]	**0,716**[**]
	Divpusējās nozīmības līmenis	0,001	0,433	0,000	0,026	0,000

* Korelācija nozīmīga pie 0,05 līmeņa (2-nozīmības līmenis)
** Korelācija nozīmīga pie 0,01 līmeņa (2- nozīmības līmenis)

Secinājumi un nobeigums

Tika veikta FIAS pantu vairākkārtēju adaptācija un pantu psihometrisko rādītāju analīze gan pirms, gan pēc faktoranalīzes,tika analizēts pantu satura atbilstība izdalītajiem faktoriem. Izvirzītās hipotēzes konverģentās un diverģentās validitātes pārbaudei ir apstiprinājušās. Faktoriālā validitāte nav apstiprinājusies, bet arī oriģinālajam Bargades un Haides (Bargad & Hyde, 1991) instrumentam faktoru struktūra nav stingri un skaidri noteikta. Strukturālā validitāte sakrīt ar Gūda (Good et al., 2000) aprēķināto strukturālo validitāti. Kontentanalīzes rezultātā, izmainot faktoru nosaukumus, tika palielināta satura validitāte. Tiek nolemts instrumenta faktoriāli modificēto adaptācijas versiju var izmantot turpmākajā pētnieciskajā darbā.

Jāizstrādā papildus jauni instrumenti sieviešu feministiskās identitātes pētniecībai, lai diferencētu un noteiktu, tieši ar kādu, no daudzajiem, feminisma virzieniem sieviete sevi identificē.

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DEMOGRAPHIC CHALLENGES IN CENTRAL AND EASTERN EUROPE IN 21ST CENTURY

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Abstract. *Due to the fact that the least favorable situation in terms of population is in the countries of Central and Eastern Europe, the article presents the demographic position of these countries, the challenges and risks associated with the demographic crisis, the existing policy guidelines for families and points to the long-term perspective to the next 60 years (graying society). The aim of this article is to present the scale of the demographic crisis but also describe the consequences associated with it, and the challenges faced by each country in the future in the relation to the aging population. The research methods used in this work is desk research, analysis and interpretation of available statistical data and descriptive method based on the available literature.*

Keywords: *Demographics, East-Central Europe, family policy, graying society, migration.*

Introduction

Contemporary demographic processes, which became an emanation of population explosion, resulted in the reversal, change the perspective towards the pursuit of sustainability of the population of each country with their to the material, financial and technological potential. In many countries, covering the majority of the current population of the Earth, it is a population policy focusing on efforts to control the growth of population, mainly using „family planning" or birth control. At the end of 2012, the population of the European Union (EU) has exceeded 500 millions. EU demographic picture becomes clear: population growth in countries is driven mainly by immigrants, while in the countries we are dealing with an aging population. The article focuses on the threats and challenges of demography as the worst situation in these countries in the field of statistics on demographic indicators in Central and Eastern Europe.

The demographic situation in Central-East Europe

Region of Central and Eastern Europe is facing major challenges to which, by demographic forecasts of various think-tanks, will have to deal with in the next 30-year period. These regions are included in the so-called 'graying society' which have to deal with an increasing number of older people. It is a consequence of demographic transition and is based on the type of transition societies characterized by very high mortality and fertility to low mortality type and fertility.

The fertility rate in the EU declined in the last decade. For simple generational renewal the amount of 2.1 children per woman is required. The sum

of the fertility rates of all EU countries fell from almost 2.6 in the first half of the '60s to 1.4 in the period from 1995 to 2007.

Relatively fertility rate in the EU member states increased in those countries that have introduced more friendly family policy to the society, for which include among others: the initiation of accessible and affordable childcare, more flexible forms of employment (France, the Nordic countries, the Netherlands) (Eurostat Yearbook , 2012) The lowest fertility rate occurs in the countries of Central and Eastern Europe (Czech Republic, Bulgaria, Greece, Romania, Lithuania, Hungary, Poland, Slovenia and Slovakia), and it is also closely related to the least developed policies for families in these countries (post-communist policy model family) (Saraceno, 2007).

Table 1. The structure of the population by age (primary age ranges) – frequencies distribution

	0-14			15-64			65 and more		
	1990	2010	2012	1990	2010	2012	1990	2010	2012
EU-27	19.5%	15.6%	15.6%	66.7%	67.0%	66.5%	13.7%	17.4%	17.9%
Belgium	18.1%	16.9%	17.0%	67.1%	65.9%	65.7%	14.8%	17.2%	17.3%
Bulgaria	20.5%	13.6%	13.4%	66.5%	68.9%	67.8%	13.0%	17.5%	18.8%
Czech Republic	21.7%	14.2%	14.7%	65.8%	70.6%	69.1%	12.5%	15.3%	16.2%
Denmark	17.1%	18.1%	17.7%	67.3%	65.6%	65.0%	15.6%	16.3%	17.3%
Germany	16.0%	13.5%	13.2%	69.2%	65.9%	66.1%	14.9%	20.7%	20.6%
Estonia	22.3%	15.1%	15.5%	66.1%	67.3%	66.8%	11.6%	17.1%	17.7%
Ireland	27.4%	21.3%	21.6%	61,3%	67.3%	66.5%	11.4%	11.3%	11.9%
Greece	19.5%	14.4%	14.7%	66,8%	66.7%	65.6%	13.7%	18.9%	19.7%
Spain	20.2%	14.9%	15.1%	66,3%	68.2%	67.5%	13.4%	16.8%	17.4%
France	20.1%	18.5%	18.6%	65.9%	64.8%	64.3%	13.9%	16.6%	17.1%
Italy	16.8%	14.1%	14.0%	68.5%	65.7%	65.2%	14.7%	20.2%	20.8%
Cyprus	26.0%	16.9%	16.5%	63.1%	70.1%	70.7%	10.8%	13.1%	12.8%
Latvia	21.4%	13.8%	14.3%	66.7%	68.9%	67.2%	11.8%	17.4%	18.6%
Lithuania	22.6%	15.0%	14.8%	66.6%	68.9%	67.1%	10.8%	16.1%	18.1%
Luxsembourg	17.2%	17.7%	17.1%	69.4%	68.3%	68.9%	13.4%	14.0%	14.0%
Hungary	20.5%	14.7%	14.5%	66.2%	68.6%	68.6%	13.2%	16.6%	16.9%
Malta	23.6%	15.6%	14.8%	66.0%	69.6%	68.8%	10.4%	14.8%	16.4%
Netherlands	18.2%	17.6%	17.3%	69.0%	67.1%	66.5%	12.8%	15.3%	16.2%
Austria	17.5%	14.9%	14.6%	67.6%	67.5%	67.6%	14.9%	17.6%	17.8%
Poland	25.3%	15.2%	15.1%	64.8%	71.3%	71.1%	10.0%	13.5%	13.8%
Portugal	20.8%	15.2%	14.9%	66.0%	66.9%	66.0%	13.2%	17.9%	19.0%
Romania	23.7%	15.2%	15.2%	66.0%	69.9%	68.5%	10.3%	14.9%	16.3%
Slovenia	20.9%	14.0%	14.3%	68.5%	69.4%	68.99%	10.6%	16.5%	16.8%
Slovakia	25.5%	15.3%	15.4%	64.3%	72.4%	71.8%	10.3%	12.3%	12.8%
Finland	19.3%	16.6%	16.5%	67.4%	66.4%	65.4%	13.3%	17.0%	18.1%

| Sweden | 17.8% | 16.6% | 16.7% | 64.4% | 65.3% | 64.5% | 17.8% | 18.1% | 18.8% |
| United Kingdom | 19.0% | 17.5% | 17.6% | 65.3% | 66.1% | 65.6% | 15.7% | 16.5% | 16.8% |

Source: Eurostat, 2012, online data code: demo_pjanind

Table 1 shows that the countries of Central and Eastern Europe are characterized by a higher proportion of people of working age with comparison to Western Europe. Looking at the changes in the population of Central and Eastern Europe for over two decades, we see an increase in the share of people aged 15-64. At the same time, in all populations of the region, there is some increase in the proportion of people of aged 65 and more, accompanied by a decrease in the proportion of the youngest citizens. The largest, more than 10% decline affected Poland and Romania, the lowest (5.8%) - Hungary. Currently, the share of pre-working age people in the countries of the region is between 13.6% (Bulgaria) and 15.3% (Slovakia).

On the one hand, the main reason of this was a continuous decline in fertility and on the other hand decreased tendency to marry. Intensity of marriages and births began to decline in Poland already in '80s, but in the '90s these trends have decisive accelerated. Changes taking place accompanied by changes in patterns of fertility and marriage manifested in delaying the decision about getting married, slow growing proportion of people living in marriages and a relatively rapid increase in the percentage of births out of wedlock.

The reduction of fertility to very low levels (total fertility rate = 1.24) ranks countries in Central and Eastern Europe among others in the EU with the lowest fertility rate. This was accompanied by delaying the decision to give birth to a child. In particular, there has been a strong decline in fertility among women aged 20-24, to a lesser extent - in the group aged 25-29. As a result, the average age of women at birth of first child has increased from 26.3 to 28 years (Duvander, Lappegard & Andersson, 2010, pp. 45-47)

During the transformation of reproduction appropriate to second transition occurred (Durasiewicz, 2011, pp. 9-26):
- decline of fertility and fertility patterns change as a result of deferring decisions of the birth of a child later in life and percentage increase of births out of wedlock;
- changes in pattern formation and disintegration of families resulting from a decline in the propensity to enter into formal relationships, delaying marriage, cohabitation growth rate, growth rate of divorce;
- pattern changes of leaving the family home by adult children (early leaving the family home, but for otherreasons than entering into marriage).

As a result, we should expect that the proportion of elderly in the population of Central and Eastern Europe will grow at a rate much faster than it

will be done in the EU15 countries, which have higher fertility rates, and in addition the negative demographic trends decelerate by the influx of immigrants.

Present generation of working-age people that entering into retirement age, will not be replaced by a sufficient number of young people. While it can expect a decrease premature mortality of men and extend life of those who in the future will enter the category of the elderly (65 and over). As a result, the proportion of elderly in the population of Central and Eastern Europe will increase.

An increasing life expectancy is one of the many factors that contribute to the aging of the European population. Index increases in life expectancy for men and women in Central and Eastern Europe. All facts and statistics suggest that this situation will be maintained. The average life expectancy for men in 2003 was 74.6 and for women 80.8. The lowest rate for men in life expectancy was 75.3, and was registered in Lithuania. As for the women, the lowest rate was registered in Romania - 75.7.

Table2. The fertility rate, the average age of women giving birth to their first child and life expectancy in 2009-2012 - in the countries of Central-East Europe

	Fertility RateTFR				The average age of women giving birth to the first child				The average life expectancy			
	2009	2010	2011	2012	2009	2010	2011	2012	2009	2010	2011	2012
Bulgaria	1.57	1.49	1.51	1.50	26.6	27.0	27.1	27.1	73.4	73.5	73.9	74.4
Czech Republic	1.49	1.49	1.42	1.45	29.4	29.6	29.7	29.8	76.6	76.9	77.2	78.1
Estonia	1.62	1.63	1.51	1.56	29.1	29.3	29.5	29.6	74.5	75.2	75.7	76.7
Lithuania	1.55	1.55	1.56	1.60	28.6	29.0	28.9	29.0	72.5	72.8	73.1	74.1
Latvia	1.31	1.17	1.34	1.44	28.6	29.0	28.7	28.8	72.8	73.1	73.4	74.1
Hungary	1.32	1.25	1.23	1.34	29.1	29.3	29.4	29.4	73.8	74.1	74.5	75.3
Poland	1.40	1.38	1.30	1.30	28.6	28.8	28.9	28.9	75.3	75.8	76.2	76.9
Romania	1.57	1.54	1.46	1.53	26.9	27.1	27.0	27.2	73.3	73.5	74.3	74.5
Slovakia	1.44	1.43	1.45	1.34	28.5	28.6	28.9	28.7	73.7	75.0	75.5	76.3
Slovenia	1.53	1.57	1.56	1.58	29.6	30.1	30.1	30.1	78.5	79.0	79.4	80.3

Source: Eurostat data, 2012, online data code: demo_frate & demo_mlexpec

In recent decades, in all European countries the decision about marriage and starting a family put away to a later date. Also in Central and Eastern Europe the average age of women giving birth to their first child increases.

Disturbing in terms of demography is the fact that the decision on the birth of the first child moves to the age limit of 30.

Although there is no firm evidence that women, pushing the decisions of the birth of the first child for the later years, reduce the number of their offspring born (Kuronen (ed.), 2010), in the countries of Central and Eastern Europe such a negative scenario can be checked.

Another negative factor contributing to the weakening of the demographic situation is negative migration balance. Young people due to unfavorable economic and business emigrate from the country, on the other hand, there is no immigration of persons likely to offset the losses associated with the emigration of young people.

Table 3. Immigration and emigration in 2009-2012 - in Central-East Europe

	Immigration				Emigration			
	2009	2010	2011	2012	2009	2010	2011	2012
Bulgaria	no data	no data	no data	14.103	no data	no data	no data	16.615
Czech Republic	75.62	48.317	27.114	34.337	61.782	61.069	55.910	46.106
Estonia	3.884	2.810	3.709	2.639	4.658	5.294	6.214	6.321
Lithuania	6.487	5.213	15.685	19.843	38.500	83.157	53.863	41.100
Latvia	3.731	4.011	10.234	13.303	38.208	39.651	30.311	25.163
Hungary	27.894	25.519	28.018	33.702	10.483	13.365	15.100	22.880
Poland	189.166	155.131	157.059	217.546	229.320	218.126	265.798	275.603
Romania	135.844	149.885	147.685	167.266	246.626	197.985	195.551	170.186
Slovakia	15.643	13.770	4.829	5.419	4.753	4.447	1.863	2.003
Slovenia	30.296	15.416	14.083	15.022	18.788	15.937	12.024	14.378

Source: http://ec.europa.eu/eurostat/web/population-demography-migration-projections/migration-and-citizenship-data/main-tables, received on: 20.02.2015

The most unfavorable situation is in Romania, who has lost, as a result of emigration, almost 10% of the citizens. The scope and scale of international migration in Poland in the years 1950-2012 influence a number of social,

economic and political factors. Because of the motives and reasons for migration decisions and the circumstances under which they were made, they can be divided into voluntary and forced migration. The first was mainly an economic related to the desire to improve living conditions, the second type of migration was due to unfavorable political situation in Poland, as exemplified by the great wave of migration in the '80s. As for the decline in the population of Lithuania is also significant, due to economic migration.

Latvian Central Statistical Office shows that over the past twelve years the population of Latvia decreased as compared to 2000 up to 340 000 people (Iglicka, 2012). In other countries, the observed decrease in migration is slightly smaller but the reasons for leaving the country are similar to those in Romania, Poland, Lithuania and Latvia. Most migrants choosing to travel abroad to take up a job (labor migration).

Therefore, migration can to some extent replace the social security system, which is able to offer a citizen of the state through its policies and public services, protecting it against various social risks such as: the inability to work due to health reasons, job loss, or problems in entering the labor market, maternity, old age, death of a breadwinner. At the same time, host countries restrict access to the social assistance system, leading to the temporary nature of migration, adhere to certain elements of the sending country, in particular in the field of public services (Kureková, 2011).

Demographic challenges and threats

The demographic situation in Central and Eastern Europe (of post-communist Europe) differs significantly from that in the rest of the continent. The main long-term trends on the continent are: population stabilization, compensation scarcity of births by immigration and population aging. Compared to other continents, these trends arouse concerns and put Europe in an unfavorable position. Central-East Europe is experiencing regression of population, declining birth rates is deeper and usually accompanied by a strong emigration, and the aging of the population has a greater dynamic range. Therefore, in CEE the most serious long-term, demographic challenges are focused.

There are four perspectives of demographic risk description in CEE (Okólski, 2012):

- Traditional (size of the population - regression) - mainly related to a negligible share of Central and Eastern population of Europe. Europe (excluding East): growth (stagnation!) from 440 million to 450 million, Eastern Europe: a decrease from 295 million to 220 million.
- Civilization (decadence) - health crisis (from the '60s to the early '90s and even at least to the beginning of the twenty-first century.). Narrowed reproduction of the population, the phenomenon of „lowest

low" fertility rate (TFR = 1.1, 1.4), continued strong emigration (In the years 1990 - 2012 the population losses were between 5 – 10 %).

- Structural (quality of the population - negative selection) - the effect of protracted 'traditional' social relations, depending imperial effects during the partitions, the effect of repression during the World War II and post-war, the consequences of 'socialist modernization', the effects of war (and latest) waves of migration.

- Functional (impaired balance between the fundamental groups of the population) - 'eternal' relationships: a group of -19 ('reproductive event') almost as large as 20-59 group, fulfilling the basic reproductive function (procreation, education of children, support their families) and marginal group sizes 60+ (negligible 'reproductive value').

Today, more and more alarming is the increase in the number of European countries, which have negative population growth, which means that there is no replacement of generations and reduces the number of citizens of the country. Social policies carried out by individual countries in Central and Eastern Europe have had three current challenges to which they belong (Frątczak, 2011, pp. 11 – 31.):

- demographic challenges - occurring in the European Union, although in a different scale and intensity (decrease in the propensity to marry, the development of new forms of family life, the decline of fertility rates constitutes one of the causes of aging);
- socio-economic challenges - the desire to strengthen the competitiveness of the EU economy and, therefore, the need for human capital development; the labor market situation which is characterized by unemployment, employment instability, the development of new forms of employment, the intensity of the processes of economic activity of women, the development of civil society, the pursuit of social cohesion through the elimination of poverty and social exclusion;
- axiological challenges - on the one hand, the development of values and attitudes characteristic of post-industrial society, on the other to maintain a high rank in the hierarchy of the family.

Post-socialist model policy for families

National family policy is influenced by demographics, economic, social and cultural characteristic of the country. Unprecedented „demographic shrinkage" in the countries of Central-East Europe has increasingly impact on the economy and social life of countries. The shortage of taxpayers destabilizes public finances, increasing their chronic deficit. The lack of payers of superannuation has a bad impact on the social security system, which must be supported by grants from the budget and loans in banks.

An aging population makes the health system breaks under the pressure of the patients. The decreasing number of children results in closing of schools and universities. With the loss of young people also worksites disappear at the same time, the demand for various services is coming down but the demand for expensive medical treatment and care for the elderly is going up.

No young people in the labor market will soon begin to reflect also on the private sector, reducing its innovation, competitiveness and the ability to adapt to changing market conditions. National policies for families in the various countries involved in the solution of this situation.

The countries of Central and Eastern Europe are part of the post-socialist model of family policy (NMS10). It is characterized by the following factors (Głąbicka & Durasiewicz, 2011, p.145):

- *Axiological and demographic conditions*

The family founded on marriage has a long and established tradition in this model. Is undoubtedly associated with the influence of the Catholic religion which considers the sacrament of marriage as indissoluble connection. Marriage and the family occupied and occupy a high position in the hierarchy of generations entering an adult life. However, there are changes in the pattern of marriage, consisting in stretching the decision over a long period of time and what is more it makes that family assume people who are socially very mature with greater financial autonomy. However, this trend has negative implications for the process of procreation, is in fact the most common implementation of the model family with fewer children.

The dominant provider of family policy is the state which acting in a direct way wanting to give families the best possible conditions for the development and meet the needs.

The purpose of this model of family policy is to increase the protection of families being in a difficult circumstances. The dominant instrument, which was used in this model, are cash benefits especially family allowances. They were primarily aimed at families in difficult circumstances. This model is based primarily on: protecting the poorest families, the selectivity of the award of benefits, privileges equality of men and women to the benefits, enhance the impact on the course of demographic processes.

- *Entities of the Family Policy*

The dominant player of family policy is the state, acting directly and separating individual tasks and funding for provincial and local government units.

- *Family Policy instruments*

Selective cash benefits (family allowance additives, temporary allowance, intentional allowance), depending on income. One-time contribution of labor. The system of pro-family tax relief is directed to large families. Difficult access to care and educational institutions - the lack of childcare, lack of places in nurseries and kindergartens, high fees for a place in the nursery and

kindergarten. Maintenance fund for single-parent families - as in the case of the US single-parent mother without an established paternity of the child is not entitled to any benefit.

To sum up, the post-communist model, also called post-socialist, transformation or Eastern Europe is an important characteristic for the group of ten countries of Central and Eastern Europe that joined the EU between the years of 2004 and 2007. It seems, however, in comparison with other models of social policy (Mediterranean, Scandinavian, Anglo-Saxon and continental) the most heterogeneous because its specificity is determined mainly by past - a legacy of the „real socialism" and similar political transformation processes that have left a significant mark on the current shape of the socio-economic development in these countries.

Graying society – the perspective of 50 years

The society in Central and Eastern Europe are at risk in the future of intense process of aging in the future, which is a consequence of the very low fertility, premature mortality in middle-aged men and still lower than in the wealthier countries of the average life expectancy of over 65 years of age (Rychtaříková, 2008, pp. 102-107).
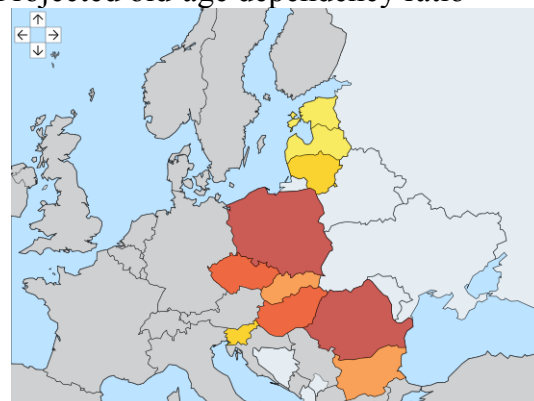
According to Eurostat population projections of EU countries will gradually increase until 2035 after which the number of residents will start to fall. The latest forecasts predict that in 2060 the EU's population will reach 505.7 million which will be accounted for only 1.7% of the increase in population compared to 2008.

Map.1. Projected population and old-age dependency ratio to 2080
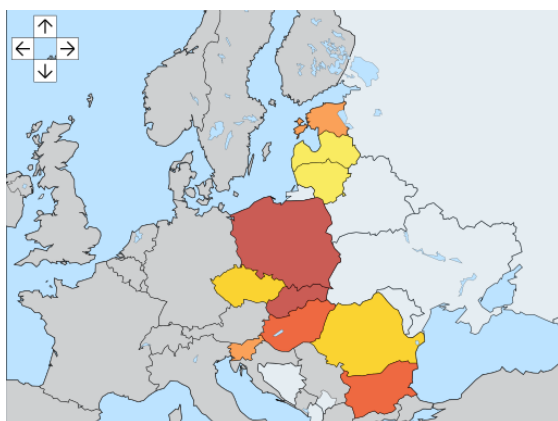
Population   Projected old-age dependency ratio

34.03 to 40.24	1,029,443 to 1,351,057
40.24 to 49.58	1,351,057 to 2,006,508
49.58 to 50.83	2,006,508 to 4,925,270
50.83 to 53.37	4,925,270 to 10,998,397
53.37 to 68.71	10,998,397 to 29,582,117

Source: http://ec.europa.eu/eurostat/web/population-demography-migration-projections/population-projections-/main-tables, received on: 20.02.2015

According to Eurostat projections, by 2050 the population of Bulgaria, Latvia, Lithuania and Romania will be more than 20% lower than today. In Poland and Slovakia will be lower by about 18%, and in Hungary and the Czech Republic about 10%.

The consequences of the aging of Central and Eastern Europe will have a direct financial impact on the public finances of these countries in the form of increased costs of health care and care for the elderly. Therefore, it is essential to adapt the conditions for the growing number of elderly people in each country.

Conclusions

1. Today's generation of working-age people entering retirement age will not be replaced by a sufficient number of young people.
2. Promoting active aging: especially among the older generation of 'baby-boom'. Generation should be able to realize their valuable skills and experience.
3. Diverse social security system is associated with a variety of effects on migration. The lack of appropriate national migration policies will lead to greater outflows of young people for a profit to Western Europe. The solution is the integration of immigrants and their descendants: this is crucial for Europe, because immigrants will constitute an increasing proportion of the labor force in Europe.
4. Adaptation of family policy objectives in each country to the conditions in an integrated Europe - family policy.
5. Increasing awareness of the possibility of combining paid work with having a family, promoting reproductive choices, and thus increases the fertility rate, which is a very important objective of the current population policy. The negative effect of not taking action on this issue will be hindered economic growth of the country, because too many people are not able to use acquired skills and education of the labor market. Particularly vulnerable are women on parental leave.

Recommendations

To successfully create a desirable demographic indicators long-term national strategy of the country's demographic is needed. The example of perfect demographic policy is Australia, where are regularly prepared so calledintergenerational reports. Australian grandparents have also 50 hours a week for caring their grandchildren. The opportunity to get involved grandparents in a situation where parents can not take care of children is creating by Czech Republic, Russia and Slovenia. A similar model intends to introduce by Germany which, in comparison with other countries of the world, quite late realizes the importance of making a breakthrough. As the topic of the public discussion it has been only since about ten years and it is concerned by politics few years ago. Only since the fall of 2011 there is an official

demographic strategy of the federal government. In 2012, the government convened the first Demographic Congress. In the same year an international platform was initiated discussion „Berlin Demographic Forum". Bulgaria has also demographic strategies, which has set a comprehensive solution for the aging population. The Netherlands however has the flexibility of employment strategies factors including the reconciliation of work and family.

Therefore, the countries of Central and Eastern Europe that can meet the demographic challenges in the 21st century should have demographic strategies which would include the diagnosis of the situation and solutions to improve the situation of unfavorable demographics. Strategies must take into account all the public policies (family, education, employment, reward program, health care), and migration policies.

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REFLECTIONS ON EDUCATIONAL WORK IN THE AREA OF ITALIAN MENTAL HEALTH

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Abstract. *The paper specifically reflects on educational work in the area of mental health, on the basis of an empirical research designed to explore the interaction between medical and pedagogical interventions in two Italian mental health contexts.*
The study design was qualitative (Denzin & Lincoln, 2000); specifically a phenomenological-hermeneutical method (Van Manen, 1990) and a case-study strategy (Nagy & Leavy, 2011; Yin, 1994) were adopted.
An analysis of educational work in healthcare contexts was carried out, with a focus on the particular knowledge, professional role and professional practices that identify educators in this field.
The case study pointed up critical and specific characteristics of educational action in the mental health services, which is aimed at striking a balance between the dimensions of caring for, and developing the skills of, people with mental illness.

Keywords: *Educational work, Mental Health area, multi-professional team.*

Introduction

The following reflections about educational work in the area of mental health are related to my PhD project. The aim of my research is to explore how medical and pedagogical knowledge interact in the course of professional practice. Psychiatrics, as a specific area of medicine, provides a particularly rich context for studying this research topic. An empirical study was designed, involving two Mental Health services, in order to investigate the interaction between medical and pedagogical interventions in two contexts in which health and educational professionals worked side by side in their daily practice.

The study design was qualitative (Denzin & Lincoln, 2000); specifically a phenomenological-hermeneutical method (Van Manen, 1990) was adopted. The research followed a case-study strategy (Nagy & Leavy, 2011; Yin, 1994).

The two cases were chosen based on their reported characteristics which seemed to exemplify the type of context under investigation (*extreme* case, Yin, 2006).

Data was collected using several different instruments: ethnographical observation (Anderson-Levitt, 2006; Angrosino & Rosenberg, 2011; Bove, 2009) was used to explore the practical activities performed in the two contexts; semi-structured interviews (Atkinson, 2002; Clandinin & Connelly, 2000; Sità, 2012) investigated participants's reports of their own professional knowledge; the practice of collage-making (Butler-Kisber, 2010; Biffi, 2010) was used to

explore participants' representations of inter-disciplinary interaction. Finally, in line with the chosen research philosophy, a central role in the research process was played by the researcher's own reflective thinking: a research diary helped her to take record and organize her thoughts.

The data was analyzed following a phenomenological-hermeneutical model (Van Manen, 1990). NVivo software was used to conduct the analysis by first storing the data (including the visual data) and then processing it. The categories that emerged from the analysis were related to the different professionals participating in the research, with specific reference to the aspects of "role", "theoretical knowledge" and "practice".This made it possible to define the profiles of all the professionals involved, and to characterise their interactions within the multi-professional team. In particular, the current paper offers a reflection on educational work in the area of mental health, based on analysis of material collected in the two contexts under study.

Italian Mental Health area: the challenge of integration between different professionals

Italian social politics are increasingly oriented towards the integration of social and health intervention: this aim creates the bases for setting up multi-professional teams of health, social and educational professionals.

There is a particular emphasis on integrating social and healthcare services in the area of mental health, thanks to the changes introduced by the revolutionary "Basaglia reform".

The work of F. Basaglia (Basaglia, 1968), based on the thinking of L. Binswanger (Binswanger, 1957), E. Goffman (Goffman, 1961) and M. Foucault (Foucault, 2003), laid the ground for the concrete legislative outcome of Law 180 of 1978, which established that psychiatric services were to be incorporated into the National Health System, psychiatric hospitals abolished and a network of local mental health services developed.

In line with these changes encouraging the integration of social and health intervention, mental health is now one of the areas of healthcare in which social and educational professionals are most present, leading to the creation of multi-professional teams. The aim is to design and implement a social-health system within which all professionals involved are called to actively interact and to re-negotiate their respective areas of competence.

The ultimate goal of such integration is to provide care intervention that is focused on the entire person: this aspect should be the first characteristic of a multi-professional team, in which each different professional must consciously deploy his/her own specific skills to further shared care objectives.

The efforts of these multi-professional groups must be directed at creating a "collective professionalism", in which the interaction of different skills can offer

broader possibilities of understanding and intervention than those stemming from the practice of each individual profession (Motta, 2000, p. 202).

Different professionals may react to the creation of this group synergy in different ways, ranging from attempting to remain within the boundaries of one's own specific discipline and avoiding dialogue with other professional viewpoints, to making the cognitive and operative adjustment required to embrace inter-professional exchange and its outcomes. These attitudes may be promoted or obstructed by personal characteristics, but also by professional cultures or the social meanings attributed to the roles and knowledge of different professionals. For example, within the new network of mental health care services set up after the 1978s reform, the medical/healthcare dimension has retained a strong role. The sudden transition from a psychiatric sector based on medical power prior to 1978, to a system managed by a range of professional actors, has resulted in a residual tendency to focus on the medical aspects of mental health care, because this provides a sensation of therapeutic protection and social guardianship (Del Giudice, Fioritti, Rotelli, & Saccottelli, 2009).

Given this background, I now discuss the specific nature of educational work, in terms of its characteristic role, knowledge bases and practices, in the two multi-professional teams participating in my research. To this end, I first outline the composition of each the two teams, in order to define the contexts in which the educational work is conducted and the different professionals present.

Composition and characteristics of the working groups involved in the research

The first context involved in the present case study is a Therapeutic Community for Adolescents, part of a Paediatric Neuropsychiatry Unit at a District Hospital in Lombardy, Northern Italy.

The Community is managed by a team comprising: a doctor specialising in paediatric neuropsychiatry and head of the team, child neuro-psychiatrist; a psychologist; a social worker; a coordinator (with responsibility for coordinating nurses and educators); three nurses; five full-time educators, and two part-time educators wording on specific projects only.

The coordinator, nurses and educators do shifts and are present 24 hours a day, including during the night.

The entire team agreed to take part in the research project, except for one nurse who was on leave while the research was being conducted. Thus, the final number of participants in this first context was thirteen.

The second context involved in the research is a Rehabilitation Community for Adults, in the mental health sector, again located in the N. Italian region of Lombardy. The Community is currently managed by a social services cooperative, licensed to run a service within the social-healthcare network.

The working group: a coordinator and head of team, with an educational background; two psychiatrists; two nurses; three educators; a psychiatric rehabilitation therapist; a further staff memberwho manages the cleaning and organizational aspects.

The nurses, educators, and therapist work shifts and they are present in the community from 8 a.m. to 9 p.m.

The entire team agreed to take part in the research project. A part-time educator, present in the community only one day a week also wanted to participate. Thus, the final number of participants in the second context was eleven.

Reflections on educational work in two Mental Health Services

Educators (together with nurses) are the professionals most constantly present in each of the two Communities: thanks to the shift-work system, educators are on duty 24 hours a day.

Analysing the material collected during the research process, the concept of "closeness", spanning a number of different dimensions, was highlighted as particularly characteristic of the educators' role, in both the explored contexts.

Educators' continuous presence mean that their particular professional action is perceived as "close" to patients, both in the sense of sharing in aspects of their daily lives and in terms of the relationship with them. This aspect of "closeness" characterized the role of educator in both the contexts under study, yet it was experienced and enacted via different material and reflective practices.

Specifically, in the first service, managing the ongoing daily needs of patients and community appeared to completely "take over" the educators' role, described as strongly focused on these aspects: «*We are the professionals most "taken over" by the practical dimensions of the adolescents' daily life, from reminding them to change their socks, to bringing them to school…*» (Interview 12, Context 1).

In the second context too, managing daily activities was a component of the educational role, but overall this role was described as strongly focused on implementing an educational plan, defined together with the rest of the professional team. The aim of this plan was to create possibilities for change for the patients, including through routine daily activities: «*[An educator] must support [patients] in everyday life, starting from learning how to take care of oneself, and implementing daily actions…and building up to more complex activities, proposed with the aim of thought projects and objectives*» (Interview 9, context 2).

Thus, in the second context, the educators' role seemed to include a more reflective and planning-oriented component, specific to educational practice.

Based on observation of the practices implemented by the educators in each of the two contexts and on participants' descriptions of their practices during the

interviews, it was possible to understand how the educators' role had been translated into professional practice. In both communities, educators' actions were closely related to daily and practical activities. This aspect was reported by all the participants, in relation to their educational practice: «*I went to the open-air market with G., we bought chicken for lunch. When we came back, we set the table, G. helped me*» (Interview 7, Context 1), and also «*We played cards with P....then we did some daily tasks, we washed blankets with P.*» (Interview 5, Context 2).

The researcher's observations similar confirm that routine daily actions are specific characteristics of educators' practices: «*When I arrive, lunch is almost over: some educators are clearing the table, helped by some of the kids*» (Observation 7, context 1), and also «*While an educator is straining rice, at about 12 p.m., she asks some patients to set the table*» (Observation 9, Context 1).

In both contexts, educational practice appeared to be deeply "immersed" in practical, concrete aspects, related to daily life. In relation to this theme, the content analysis carried out with NVivo software allowed me to investigate the words used by participants to describe and narrate educators' action. This semantic exploration showed that educational practice was described using verbs related to the idea of "doing", "concretely acting". Furthermore, these actions were situated in everyday life settings and locations: «*We set the table*» (Interview 7, Context 1), «*We started preparing dinner*» (Interview 4, Context 1), and again, «*We studied with L. all afternoon*» (Interview 12, Context 1). Educational practice inhabits daily places and daily time, it is exposed to continuous relating with the patients; there are no delimited and defined spaces for educators' professional action, as for that of doctors, psychologists and coordinators.

In this sense, educational practice seemed, in both contexts, to be frequently focused on practical actions, however there was a difference between the educators of the two communities in terms of the extent to which these actions were guided by reflection and planning.

The educators in the first context, as we have seen, appear to be totally "taken over" by the practical daily dimensions of their professional practice. It seemed as though there was no room for reflection or for the design and planning of education action beyond the routine management of daily duties: «*Our thoughts too are often focused on these aspects, because we have to make everything "dovetail", between shifts, activities, cooking...*» (Interview 12, context 1).

The comparison with the second community allowed, by contrast, to clearly identify an educational practice focused on everyday dimensions, but guided and oriented by a reflective and planning dimension.

A final aspect to be pointed out in relation to both contexts, is the fact that educators shared their working hours and space with nurses. These two different

professionals met daily in the course of their professional practice. In the first community, this sharing was characterized by a lack of attention to the professional specificity that differentiates educators and nurses. Educators were often involved in nursing tasks, such as administering medicines: «*It happens that we sometimes administer drugs*» (Interview 7, Context 1), and «*We give drugs instead of the nurses, because the nurses are not always her…*» (Interview 12, Context 1). Thus, in the first context educators and nurses engaged in healthcare practices interchangeably, with education professionals performing typically healthcare tasks.

In the second community, on the other hand, a conscious effort was made, by the team as a whole and by each individual professional, to take into account the different disciplinary skills of educators and nurses. This meant that even though working time and space were shared there was recognition for the specific professional practice of both educators and nurses. There was overlap between educators' and nurses' roles and practices in the second context also: «*A nurse cooks or plays cards with patients, like an educator*» (Interview 6 Context 2). Nonetheless, both the team and the individual professionals were careful to consider specific nursing skills. The team's daily work was planned based on an evaluation as to how best to use these competences: thus, for example, nurses are recognized to have specific knowledge: «*Nurses manage the supply of medication; they also check patients' health parameters. The substantial difference with educators is that their duties are more focused on health matters, given their competence in these aspects*» (Interview 9, Context 2); «*Specific nursing competences are required, these skills are demanded of us by the coordinator, by the entire team…We are the professionals who have to monitor and manage health questions on a daily basis*» (Interview 8 Context 2).

Therefore, in the area of mental health care, educators' practice is made up of innumerable aspects, closely related to practical action and carried out in close proximity to healthcare professionals such as nurses.

The knowledge that characterizes educational actions is related to everyday activities and learning by experience. In the first of the explored contexts, these aspects turned out to be central: educational knowledge was narrated as mainly corresponding to experiencing learning.

In the second community, in contrast, more than an emphasis on practical experience, there was recognition for educational knowledge and skills aimed at enhancing patients' autonomy: «*Educators must think about the plan for each person, reflecting on the utility of the proposed activities, including those related to daily life*» (Interview 5 context 2). «*Yes, there is specific educational knowledge, related to what I have studied, otherwise anyone could do this job without training*» (Interview 2 Context 2).

This last quote illustrates the fact that in this context educational practice is built on specific skills and reflection, including when focused on everyday activities. This approach is strongly encouraged by the coordinator, who

promotes a team effort to design, reflect on, give meaning to and orient educational practice.

Thus, it becomes clear that educational work in the area of mental health must be continuously reflected on, in order to be designed and oriented. Educators working in mental health care are part of in multi-disciplinary teams: they need to give voice clearly to and reflect on their educational specificity, so as not to run the risk of losing it, by allowing their identity to become contaminated by other professional identities, or by overlapping too much with other figures in carrying out practical and organizational tasks.

Educational professionals in mental health care: a reflection on working in multi-disciplinary contexts

Based on what has been written, educational practice in mental health may be said to be extremely close to that of other professionals due to the presence of a multi-disciplinary team. What has been noted, in relation to the present empirical research, is a particular proximity between the work of educators and nurses. The risk, for educational practice, is the creation of professionaloverlap.

The contamination of educators by other professionals is facilitated in the two contexts under study in particular, because in the residential mental health services a substantial part of educational practice is focused on day-to-day activities and management. These aspects, when not specifically planned and included in a broader educational reflection, are treated as "normal" everyday actions that may be carried out without any specific professional skills/knowledge or reflection. Thus, an image is created of education as only consisting of concrete action and as not being informed by a specific body of knowledge. This in turn contributes to the overlap of educators with other professionals based on action that is not underpinned by reflection. In this way, educational knowledge and its specific contribution is not seen or taken into account and therefore its potential is lost.

In this sense, within a multi-disciplinary team, exclusive attention to the practical side to education facilitates the loss of reflective thinking which is a valuable part of the professional competence of educators. This is a very important aspect to be considered in relation to educational work in the area of mental health.

Educational work that is exclusively focused on action loses its «epistemological responsibility» (Caronia, 2011, p. 118). When educational professionals give up or overlook signifying their practice, they are no longer using their knowledge, thus reducing the potential for fruitful work in a multi-disciplinary context.

Italian social politics are increasingly oriented towards the integration of social and health intervention: this implies that professionals in the areas of

healthcare, social work and education will be increasingly called on to share professional practice.

For this approach to yield its true potential, it is critical to reflect on the complexity of multi-disciplinary teams and, as in this paper, on the presence of educational professionals in these contexts.

First, it is key to take this complexity into account in the training of the professionals involved, with a focus on defining and recognizing the knowledge that particularly characterizes their discipline. This implies training professionals who are able to recognize their own disciplinary specificity and attribute epistemological meaning to their practice. In this way, a multi-professional team would be constituted by members highly capable of making their own peculiar professional contribution and working in proximity to other professionals without getting confused with them, overlapping or looking to them for security.

Furthermore, this disciplinary identity would enable professionals to interpret and reread their practice, and to learning incrementally from experience.

Experiential knowledge is, in fact, an aspect frequently narrated by the participants in the current research, most of all by educators: recognized professional competence at the disciplinary level could help to create opportunities for reasoned and reflexive learning by doing, guided by a specific professional outlook. In this sense, it could be possible to learn by signifying experience, and not only by virtue of the practical lived event.

Italian professional training for educators as it stands does not help to meet the goals just outlined: it is fragmented and not univocal. This representation of fragmentation crosses over to educational professional identity and educational skills, which are not truly recognized or perceived as useful in professional practice.

Collected data shows that educational knowledge is barely identifiable and recognizable in the planning and implementation of care actions in the explored contexts. Educators, indeed, described themselves as the "practical executors" of the therapeutic programme, designed and planned by other professionals. The fundamental contribution of educational knowledge, based on the capability to signify practical and daily activities within a defined educational programme, is easy to lose in practice, as seen in the two contexts under study. The risk is therefore that of implementing educational work with an exclusive focus on the execution of daily actions, losing the specific expertise of professional knowledge and skills.

In this sense, both the team coordinator and the entire group need to maintain a continuous focus on and valuing of each specific professional profile. This will contribute to designing and implementing a team approach that recognizes and takes advantage of the peculiar contribution of each type of

professional, with the ultimate goal of providing the most comprehensive care possible for patients.

This approach must be adopted not only by the coordinator, but by each individual professional: a mindful educator knows that if his/her action is only focused on the execution of everyday tasks, it will lose the meaningful awareness and the epistemological responsibility that distinguish educational knowledge.

Conclusions

In the two contexts investigated, it is clear that educators did not display high levels of epistemological awareness and responsibility. They were mainly engaged in practical daily activities, missing out on the key component of their professionalism focused on reflecting and attributing meaning to the proposed actions in line with the educational objectives defined.

This tendency bears one main risk: the educational programming is carried out by other professionals, with loss of the specific educational skills available within the team.

It follows that that educational competence is essential to the Italian Mental Health Services, as they are currently organized, in order to plan and implement an educational programme designed to help patients develop greater life autonomy, in line with their particular circumstances. However, it is necessary to continuously highlight and reflect on educational work: as has been noted, it is close to practical and daily life in its realization. This leads us to recall the idea that education is connected with life (Massa, 1986). The link between educational aspects and daily life requires close and careful attention. If education is intended to promote the development and discovery of possibilities for subjects (Dewey, 1929), we can surely accept that this development takes place through, and is related to, daily existence. Furthermore, focusing on the care for these aspects brings us close to the notion of authentic educational care, following M. Heidegger's concept of authentic care with its emphasis on the empowerment and autonomy of subjects (Heidegger, 1972).

Without mindful attention to these components, in a context such as that of residential mental health, in which educational work is closely bound up with daily activities, educators run the risk of transforming their practice into the mere execution of tasks, giving up the effort to reflect and attribute meaning.

In sum, it should be noted that educational roles, knowledge and practice are important components of the multi-disciplinary team in Italian mental health care, but these components must be treated with particular attention so as not to lose their potential.

Firstly, educators must be aware of their professional identity and able to recognize and actively put to use their epistemological point of view and knowledge, in order to signify their practice and the programming of their

interventions.

Subsequently, the team coordinator and the entire working-group must continuously highlight and give visibility to the educational point of view, to reduce the risk of overlap between education and daily management with the consequent loss of specifically educational expertise.

In this way, educators can actively and specifically practice their profession in the area of mental health care, highlighting their peculiar role, recognizing their disciplinary knowledge, used both to design and implement their practice.

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ASSISTANCE TO CHILDREN EXPOSED TO DOMESTIC VIOLANCE: SITUATION IN LITHUANIA

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Abstract. *The purpose of the study is to assess the organisation of assistance for children after domestic violence experience in Lithuania. The methods of scientific literature, analysis of strategic document and legal acts, synthesis and generalisation were used. The main findings:*
Children in Lithuanian mostly experience physical aggression, but in recent year's case of psychological violence are becoming more and more frequent. Increase of psychological violence against children allows to believe that specialists of Child's Rights Protection divisions as well as other specialists more actively and successfully identify the children that experience psychological violence and manifestations of such violence and apply corresponding measures. The legal framework for prevention of violence against the child is and the child's health care has been created. In cases of violence against children support to the victim and his/her family is provided and coordinated systematically by specialists of various fields and institutions, according to the needs of the victim. The complex support required by the children after experienced violence and their families (psychological, social, legal and psychiatric) is basically provided by non-governmental organizations the most of which are located in the major cities. In more remote places for the suffered children and their families it is really confusing to get support, especially the lasting one.

Keywords: *domestic violence, children victims of domestic violence, support for children.*

Introduction

During the recent years in Lithuania the trend of expansion of aggressive behaviour of the society that manifests itself in several forms of violence outbreaks is becoming apparent in many social institutions, the family including. According to I. Michailovič (2012:24), domestic violence is one of the serious problems of the modern states all over the world. Based on the data ofUNICEF 2014, 6 of 10 children from two to fourteen years old continuously experience violence of various nature in their close environment (Hidden in Plain Sight: A statistical analysis of violence against children, 2014).

Attention to the problem of violence in Lithuania was paid in 1990, having restored the independence of Lithuania. But until 2003 the problem of domestic violence attracted only the attention of scientists, mass media and non-governmental organisations. From 2003 the fight with violence gets more and

more attention on political level adopting different programs, strategies and laws.

Special attention shall be paid to protection against violence. Children are considered the most vulnerable groups of society the security of the rights and protection of whom requires special attention. Child's welfare is understood as provision of conditions for the child to live real and full life, his/her rights to protection, the security of assistance and participation in public life. The child's rights experts of the United Nations that encouraged all states and international communities to enforce children's protection against violence see this problem as a priority (For Universal Children's Day, 2013).

Violence against children is a social phenomenon the occurrence of which is predetermined by different circumstances: poverty, unemployment, society values that existed in all times, in all societies and states and legal systems. Only the scale, forms of this phenomenon and the attitude of the society towards it and ways and methods of prevention are different. Scientific researches show that the scale of violence against children spread differs: "the spread of violence against children in the Lithuanian children population according to the data announced in official registered sources is much lower than in other European countries; meanwhile the children mortality because of murder is much higher than the European average (Labanauskienė, 2010).

In the Child's Rights Declaration (1995) it is noted that mankind shall give to the child the best that it has. The child must be guaranteed special protection and provided with a possibility for healthy and normal physical, mental, moral, spiritual development and participation in society. Therefore the security of children's rights is a continuous challenge for every state independently from its political, economic, social or etc. situation. Due to the changes occurring in all areas of life and the challenges determined by them, considering extremely high risk of child's rights violations and threats, more and more high requirements for implementation and protection of the children's rights are established and infixed.

Irrespectively of many legal acts protecting children's rights, violence against children is becoming extremely relevant problem of the society.

The goal of the study is to assess the organisation of assistance for the child – the victim of domestic violence in Lithuania.

The objectives of the study:

- To disclose the situation of the children exposed to violence in Lithuania
- To analyse the assumptions of assistance for children exposed to domestic violence.

The methods of research: analysis of scientific literature, strategic documents and legal acts, synthesis and generalisation.

Situation with children exposed to domestic violence

One of the main functions of the family is growing and education of children: "daily life of the society is reflected on the family life, since parents are participants of the society life. Family develops child's independence, creativity, critical thinking" (Ralys, 2009: 20), in the family the future-to-be personality not just makes the first steps in life, but also develops the first habits of behaviour. According to Sagatis (2006), this in particular determines the significance of the family, as of the cell of the society, in the process of the formation of a human being. Family secures for the child emotional and physical protection against the surrounding world.

Anyhow, as it is noted in the Social Report of the Ministry of Social Security and Labour 2013-2014, acts of violence against children most frequently are committed by the closest family members – the parents, or one of the parents, brothers, sisters. Violent behaviour of parents with their children is understood as non-accidental, child-harmful behaviour expressed in physical, sexual, emotional nature and neglect (Kairienė 2010). All forms of sexual abuse, neglect or negligent care of the child, any other forms of physical and (or) emotional mistreatment, which cause factual or potential harm to health, survival, development or dignity of the child (Kairienė, 2010) are named as violence of parents against children. Based on the research "Favourable environment for children and youth" (2010), the definitions of the forms of behaviour that are harmful to the child do not necessarily contain conscious intention of the grown-ups to harm the child, i.e., unintentional harm should also be attributed to the forms of violence. According to J. L. Postmus (2004), the cases when a child becomes a witness of violence in domestic environment or lives in the environment where violence took place, may be attributed to violence against children.

It is quite difficult to analyse the subject of violence against children in Lithuanian as well as in other EU countries, since there are no reliable data, which could reflect the real situation about individual groups of children exposed to violence or mistreatment. Mostly the grounds are the official statistics and the cases that became public, and that is just the top of the iceberg, in Lithuania " the exact scale of violence against children is not known; there is neither trauma nor children trauma registers" (Labanauskienė & Siaurusaitis, 2008: 203); the statistics of children exposed to violence is shown by the data of State Child Rights Protection and The Adoption Agency at the Ministry of Social Security and Labour of the Republic of Lithuania (hereinafter referred to as SCRPAA). According to the SCRPAA data, in 2013 1454 cases of violence against children were registered. If compared with 2009, it can be seen that the number of children exposed to violence increased 20,1 per cent (from 1203 to 1454).

It should be noted that the State Child Rights Protection and Adoption Service under the Ministry of Social Security and Labour reports on the activities for the year ended (2009, 2010, 2011, 2012, 2013, 2014) data show that the number of victims suffered from their fellow-men from 2009 to 2013 has also increased 2.5 times (from 423 to 1058 registered cases) (Table 1).

It has been established that the majority of the registered cases of violence against children consists of physical and psychological violence cases. The analysis of the research (Stonienė & Narkauskaitė, 2012) data showed that 6,0 per cent of children experienced physical violence from their parents twice or more in the past year, and 7,8 per cent of children experienced psychological violence twice and more in the past two months.

Table 1. Dynamics of registered cases of violence against children (State Child Rights Protection and Adoption Service under the Ministry of Social Security and Labour reports on the activities for the year ended (2009, 2010, 2011, 2012, 2013, 2014) data)

Registered cases	2009	2010	2011	2012	2013	2014
Violence against children	1203	1343	1347	1343	1454	1238
Family members' violence against children	423	794	841	907	1058	964

Physical violence is defined as non-accidental, conscious actions of violence the result of which is a non-accidental trauma or physical injury, which may cause disorders of the child's health and development, as a physical injury of a child under 18 years old, caused by the parents or the carers in other cases than accidents or consent for such injury to happen (Juvenile criminal justice,ʼ 2002).

Physical violence is any impact on the inviolability of the victim's body, therefore its nature may differ: hits, beating, hurting and other impact on the child's body surface and internal organs using physical power, cold iron or fire guns or other items, liquids, substances and other items. Body injuries, physical pain are not indispensable of physical violence. According to Grinevičiūtė K. (2008:109), the law does not require the occurrence of after-effects, but physical violence is orientated towards material after-effects: killing, health disordering, causing pain or other physical suffering, deprivation of freedom or causing the condition of helplessness. The fact that such actions do not leave any traces on the body of the victim does not change the juridical nature of such actions.

It should be noted that cases of physical violence make approximately 50 per cent of all cases of domestic violence against children every year. According to scientists (Labanauskienė & Siaurusaitis, 2008), children traumas experienced because of physical violence are becoming more and more frequent in Lithuania.

Domestic physical violence very often is associated with penalties imposed on a child. Though corporal punishment cannot be justified with the right of parents to educate their children, parents often chose this method of "education"

because they believe it is very efficient, it interrupts improper behaviour of the child in the right moment, at the same time they discharge their anger. According to researchers (Juozulynas et al., 2012), many parents, when educating their children and failing to control their behaviour in other ways, give the priority to corporal punishment (p.11). It is noted that "parents often practice corporal punishment" (Jonikaitė-Kievišienė & Ivanauskienė, 2008), at misdemeanours of different levels, but very often it relates more to parent's feeling unwell, intoxication with alcohol rather than actions of children (Stonienė & Narkauskaitė, 2012).

The research (Use of corporal punishment for children in Lithuania: summary of the research, 2012:5) has established that in the opinion of more than a half of parents (59,6 proc.), corporal punishment should not be applied, but there are situations when it can be justified. About one third (37, 3 per cent) believes that corporal punishment, as a means for children education, should never be used.

Corporal punishment when children smoke, drink alcohol or use drugs is justified by both – the parents (49,5proc.) and the children (57, 1 per cent). Such punishment is also acknowledged by the parents (48, 4 proc.) and the children (65 proc.) in cases when children steal.

In families psychological (emotional) compulsion, as a means of punishment, is quite frequently used against children. According to J. Jonikaitė–Kievišienė and F. Ivanauskienė (2008), "Parents, educators and other grown-ups often forget that the child, overcoming tough inner resistance to follow requirements, to change regimen and etc. experiences emotional violence (p 75).The point of psychological violence is intimidation, i.e., causing the feeling of fear in the child "dangerous intended impact on the psyche of the child, causing the feeling of fear and insecurity". The research (Situation with corporal punishment use on children in Lithuania: summary of the study, 2012:6) showed that practice of humiliating punishment was increasing: 14,4 per cent of children indicated that several times per year they experience public humiliation from their parents, 19,9 per cent indicated the ignore. Commenting on punishment practices parents indicated that, when facing improper behaviour of the child, they often for bad the things that the child liked the most (e.g. computer playing, meeting friends and etc.) (33, 6 per cent) or threatened the child with what would happen if the child did it again (30,1 per cent).

Analysing the reports provided by State Child Rights Protection and Adoption Service under the Ministry of Social Security and Labour for five years (2009-2013) it can be seen that the number of psychological (emotional) domestic violence against children cases has been increasing (from 367 registered cases in 2009 to 647 cases in 2013).

Sexual violence against children means involvement of dependent children in terms of child's development into sexual activity which they are not mature for, which they do not understand and are not able to properly react to, which

violates the social taboo and by which the abuser seeks to satisfy own sexual needs and (or) get profit associated with this activity (Grigutytė et al., 2007). It is noted that sexual violence is not just the sexual intercourse, but other actions as well: touching of the private parts, forcing the child to touch the private parts of a grown-up or of a contemporary; demonstrating of the private parts to the child, open talking about sex, permitting, encouraging or forcing the child to watch porno magazines or films; involvement of the child into pornography or prostitution and etc. (Kuginytė-Arlauskienė & Butvilas 2007:51).

As scientists (Grigutytė & Gudaitė, 2009) maintain, "sexual violence is the most severe form of violence against children, causing notjust short-term after-effects, but also having influence on the entire development of the personality". Lasting after-effects which disturb the development are depressions, trepidation condition, over-reacted vigilance for dangers, sexual dysfunctions, incapability to be happy and etc. The authors note that long-lasting after-effects are common for many victims of sexual abuse and reflect the impact of the primary reaction on psychological development and formation of the personality.

Cases of sexual violence have been recorded sparsely and the decrease in their number has been observed: in 2010 - 11 per cent, in 2011 – 8 per cent, in 2012, in2013 – 6 per cent of all cases of violence. According to the data provided by State Child Rights Protection and Adoption Service under the Ministry of Social Security and Labour, children experienced sexual violence basically from strangers grown – ups (for e.g. mother's cohabitants) and close grown-ups (for example, family members). The research (Grigutytė & Gudaitė, 2009) has established that girls teen-agers exposed to sexual abuse in more than one-fourth of the cases (26,7 per cent) experienced this from a family member.

Statistical data on the children exposed to sexual abuse differ very much (Favourable environment for children and youth: challenges and possibilities, 2010). This particularly proves that the available data do not reveal the real situation and cause difficulties estimating the spread of children's sexual abuse and sexual violence.

During the recent years the negative consequences of violent behaviour in respect of children on further development of the child have been recognised all over the world (Cross et al., 2013).

Scientists note that violence experienced during childhood and being a witness of violence most frequently predetermine aggressive actions of such persons and use of violence in different situations of life, since "violence at home predetermines the attitude of the child towards violence as to the way of own problems solution" (Mikelaitytė & Narkauskaitė, 2010). Violence practicing parents implant in the child the feeling of fear and worthlessness, desire for revenge. It is maintained (Plaušinaitienė & Masiliauskienė, 2009), that "the grown-up members of the family that were victims of violence in their childhood later on themselves treat their children the same, since the images of violence survive in the sub consciousness all life long, and, getting into a critical

situation, manifests itself as aggressive feelings" (p.176). A punished child feels humiliation and wish for revenge. As he or she cannot pay back with the same to the parents, he or she starts harming the weaker ones or one's contemporaries. According to D. Malinauskienė (2011: 221), children watching quarrels, bust-ups, fights, divorce of family members or experiencing offence from them get used to violence, treat it as an example and very often treat their contemporaries in the same way in other environments.

The results of researches (Abromaitienė & Liaudinskienė, 2004; Spinney, 2013) show that children exposed to domestic violence most often have problems in socialising (Baker & Cunningham, 2004), it is difficult for them to find friends, they disagree with their contemporaries, get involved in conflicts frequently (Fantuzzo & Mohr, 1999), their contemporaries avoid them, they have learning difficulties (p.24), and more often behave improperly (Graham-Bermann et al., 2007). Children and teenagers exposed to bullying, psychological or physical violence are one of the groups apt for suicide, i.e., an increased risk group (Lukošienė).

Violence against children is a complex social phenomenon, closely related to the values of the society, resistance to various negative social phenomena: poverty, unemployment and etc. According to researchers (Mikelaitytė & Narkauskaitė, 2010: 21), "violence against children can be considered a consequence". If willing to reduce the indexes of violence against children it is important to establish the main causes of violence, based on which the means for violence prevention could be developed.

Assistance to the child exposed to domestic violence

After the restoration of the Independency of Lithuania already in 1992 the Republic of Lithuania joined the Child's Rights Convention of the United Nations. The Child's Rights Convention of the United Nations (1995) obliges the member states to secure comprehensive safety of the child, social, economic and political rights of the child and to exercise all required means to help the child that has become a victim of any kind of neglect, abuse or brutal or humiliating behaviour.

The duty to take care of children and to secure their welfare firstly is the duty of the parents, but the duty of the state, which is infixed in Article 18 of the United Nations Convention on the Child's Rights to provide the parents with support required for proper education and care of childrenand the duty to protect the child against absence of care or against careless behaviour and etc. which might beexperienced from parents, legal carers or from any other person taking care of him/her, excessing all required legal, administrative, social or educational means, are not less important.

In Lithuania the legal base for prevention of violence and protection of children health care has been established. It is foreseen that the state protects and

cares for family, motherhood, parenthood and childhood; the minor children are protected by the law (Constitution of the Republic of Lithuania, 1992), and the child exposed to a crime, violence or any other wrong behaviour is entitled to assistance so that he/she could recover after the experienced physical or psychological trauma and to reintegrate to the social environment (Law on Fundamentals of Protection of the Rights of the Child, 1996).

In the Civil Code of the Republic of Lithuania (2000) and in the Criminal Code (2000) articles on the family law and criminal law for crimes against the child and the family are provided. In 2002 a Law on the Protection of Minors against the Detrimental Effect of Public Information was adopted. The document specifies that the public information "of violent nature, encouraging aggressiveness or disrespect to life" is attributed to the information having negative influence on the minors and "distribution of such information is restricted or forbidden under the procedure set out by this law".

One more Governmental resolution of the Republic of Lithuania On Establishment of the Competence of the Management of the Child's Right Protection to the Ministry of Social Security and Labour and other Ministries (2003), ensuring prevention of violence and abuse against children entitled the main area of the child's rights protection to the Ministry of the Social Security and Labour. This Ministry forms and implements the policy of the child's rights protection and, together with other national and municipal institutions, ensures proper protection of the child's rights. For this purpose, the Ministry of Social Security and Labour of the Republic of Lithuania performs investigation of violence against children, analyses, announced data in publications "Social Message" (2003-2014), and creates preventive programs.

The program of prevention and assistance to children the continuous National Programme of Violence against Children and Assistance is being implemented from 2008. The National Programme for 2010, 2011–2015 (National Programme for the Prevention of Violence against Children and Assistance for Children for 2011–2015), is meant for prevention of violence of all kinds and any manifestations of it (physical, emotional, sexual) against children, its prevention and intervention. The means of the programme are designated for to the children that might be exposed or are exposed to psychological, physical, sexual abuse and neglect, for protection of their families, prevention of violence and bullying at school.

Prevention of violence is actualised in the Programme of the Child's Welfare 2013–2018 and in the Child's Welfare Development Strategy 2013–2020.

In 2011 the Law on Protection against Domestic Violence was approved. The purpose of the law is to protect persons against violence in close environment, to react quickly to arising threats, to apply prevention means and to provide proper assistance. The document establishes the rights of the persons exposed to violence: to get the information from the police officer and from the

specialised service centre on the institutions providing assistance; to get specialised complex assistance provided for persons exposed to violence; to apply and get assistance as provided for by the law.

Implementing the National Programme of Prevention of Violence Against Children and Assistance in 2011–2015 in Lithuania a special free of charge telephone line (and e-mail) of assistance to children was opened, for the most vulnerable groups of children, including those exposed to violence.

Various different organizations also implement programmes aimed at prevention of violence against children. This includes a public organisation "Save the Children", Association of Psycho-Social Rehabilitation, Child's Development Centre, Public Institution Assistance to Children Centre, Public Institution "Child's Home", Public Institution "Institute of Family Relations" and etc. Those organisations develop their activities implementing various projects and providing complex assistance to children exposed to violence and suffering from their families.

In the Children and Teenagers' Intervention Centre of the Child's Development Centre stationary psychiatric and psychological assistance to the children exposed to violence and bullying, attempted suicide or having emotional or behavioural disorders is provided. It should be noted that, besides of this division, four more institutions provide psychiatric and psychological assistance in Lithuania: Children's Psychiatric Hospitals in Kaunas, Panevėžys, Šiauliai and Klaipėda. This does not satisfy the need for this service; the provision of the service only in five cities restricts active participation of the family in the provision of the service (Favourable Environment for the Children and the Youth: Challenges and Possibilities, 2013).
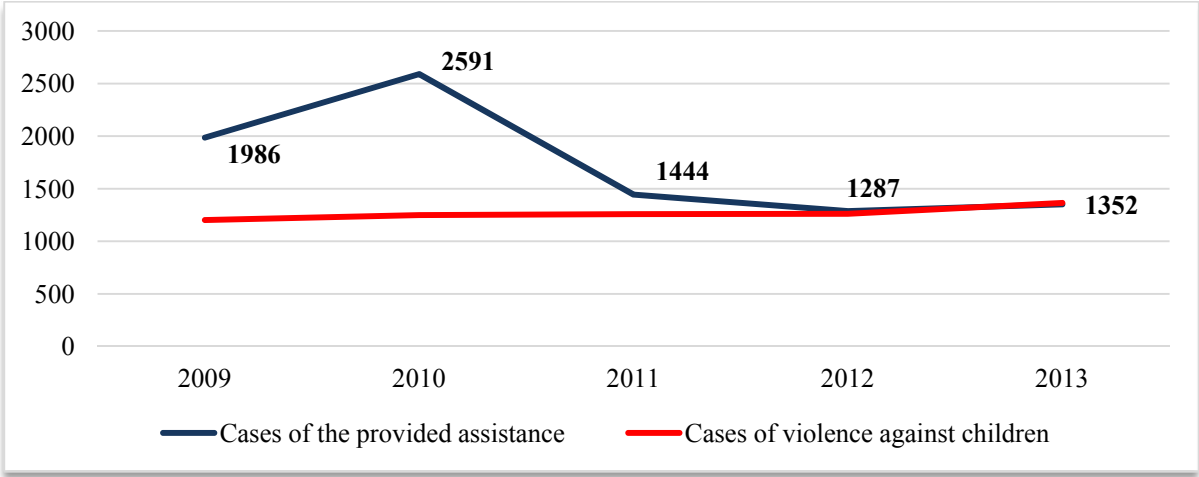

Figure 1. Dynamics of the children exposed to violence and of the provided assistance (State Child Rights Protection and Adoption Service under the Ministry of Social Security and Labour reports on the activities for the year ended (2009, 2010, 2011, 2012, 2013, 2014) data)

According to the State Child Rights Protection and Adoption Service under the Ministry of Social Security and Labour reports on the activities for the year ended (2011, 2012, 2013) data, from 2011 almost all children exposed to violence get assistance (Fig.1).

Both Lithuanian and foreign scientists discuss about the efficiency of the programmes for children exposed to violence – in the opinion of the scientists it is difficult to distinguish the most efficient means of assistance because of the uniqueness of every case (Cross et al., 2013). Just unambiguously everybody admits that the assistance to children should be provided for the whole family and as soon as possible (Snell-Johns, 2004).

There fore in cases of domestic violence against the child assistance is being provided not only to the child, but to the family as well. According to B. Kairienė (2006), seeking for the efficiency of assistance, it should be focused on both participants in a case of violence, on the violator - aiming to interrupt the violent actions and helping to change the set attitude, and towards the child exposed to violence. The persons willing to change violent behaviour always have a possibility to apply to consultancy providing psychologists. But, according to N. Dirsienė and V. Reikertienė (2008: 14) "the experience shows that just psychological consultancy or psychotherapy practices are not always efficient; it does not secure the change of violent behaviour in the family. The persons that tend to violence very often are unmotivated to change their behaviour or do not apply for assistance".

The problem of violence is multiple, it requires holistic method of solution, therefore cooperation of various specialists and complex ways of solution are necessary. Scientists Ch. Potito et al., (2009) note the importance of the availability of the network of specialists and the coordinated cooperation of those specialists. The complexness of the assistance to the child and to his/her family, the importance of the general national programmes is emphasized in the Recommendations of UNICEF (2014) aimed at decrease of violence against children (Ending Violence against Children: Six strategies for Action, 2014). Those principles are infixed in the Law on Protection against Violence in Close Environment (2011). In cases of violence against children most often assistance to the child and the family is provided by specialists of various areas and different institutions (Social Report 2013-2014):municipal services for the protection of children's rights, law enforcement institutions, medical institutions (paediatricians, social workers, psychologists, gynaecologists), social workers of neighbourhoods, social pedagogues employed in schools or care institutions, specialists of crisis centres and etc. Specialists agree and indicate that assistance should be long-term and systematic, corresponding to the needs of the victim, it should be coordinated and provided not just to the victim of violence but also to the family and close environment of the child suffering from violence. The assistance in most cases is being provided to the whole family, only the psychologist's consultancy is individually appointed to the child exposed to

violence, but, when necessary, the child's family members are also involved for it. Summarising, it can be stated that national, municipal and non-governmental organisations act cooperating in this process.

Anyhow, as I. Tamutienė (2005) indicates, "structurally it is not foreseen that a child exposed to violence could have a person whom he or she could address to for help, information or support" (p.70). Assessing the Lithuanian experience in provision of assistance to children exposed to violence, it should be noted that very often the provided assistance is short-term, lacking continuity. So far the possibility to get necessary complex assistance (psychological, medical, legal, social and etc.) is not guaranteed in Lithuania for every child exposed to sexual violence and abuse. Aiming to provide such assistance to the children the Ministry of Social Security and Labour in 2014 approved allocation of financing to the project "Establishment of the Centre for children exposed to Sexual Abuse" and undersigned the Agreement on Implementation. Having established the Centre in Lithuania the children exposed to sexual abuse would be provided with a possibility to get qualified and efficient comprehensive assistance.

There are legal actions meant to stop harmful to the child behaviour. Based on the provisions of the Civil Code of the Republic of Lithuania (2000) and of the Law on Child's Rights Protection (1996), employees of education, training, health care, police and others, as well as any other natural or legal person, having learned of the child that needs assistance, must notify of this the children's rights protection agencies or police. Children's rights protection agencies or police shall react adequately, i.e., to assess the situation and take the necessary actions.

Conclusions

Though the family is considered a hard-core of positive socialisation, cases of abuse and violence against children are more and more frequently registered. The national statistics of law violations register only a small part of all violent crimes in domestic environment. The most of the crimes of this nature are not registered since the victims to not apply to law enforcement institutions. Since violence in domestic environment is latent it is difficult to establish the real scale of criminal activities relating to it.

Children in the family are mostly exposed to physical violence, but the number of cases of psychological violence has been rapidly increasing during the recent years. The increase of the number of psychological violence against children leads to belief that professionals from Children's rights protection agencies and other specialists more actively and successfully identify the children exposed to psychological violence, as well as the expressions of such violence, and take adequate means.

The legal base for prevention of violence against children and health care has been created in Lithuania. Assistance to the child and his/her family is systematically coordinated and provided by specialists of various areas and institutions according to the needs of the victim.

The required over-all (psychological, social, legal and psychiatric) assistance to the children exposed to violence is basically provided by non-governmental organisation, the majority of which is located in the major cities. In remote places it is very problematic for the suffering children and their families to get assistance, especially long – term one.

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OKSFORDAS LAIMES APTAUJAS PIELIETOJUMA IESPĒJAS LATGALES IEDZĪVOTĀJU LAIMES IZJŪTAS STRUKTŪRAS PĒTĪJUMOS

Options of Using Oxford Happiness Questionnaire of Latgale Inhabitants Happiness Structural Studies

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Abstract. *The problem of happiness and psychological well-being is one of the fundamental problems in psychology; therefore it maintains the interest in itself throughout the history of the science of psychology. The demand for the research on the phenomenon of happiness has significantly increased in the world, and that is caused by the increase in the number of everyday stress situations, the increase of complexity of designing one's personal life, more complex choices of directions in life, socialization difficulties, significant changes of social norms and values. A number of studies confirmed the link between happiness and the socio-economic conditions in the country. The low standard of living of Latgale's inhabitants resulted in a fast decline of the number of inhabitants in the region. The unemployment rate in Latgale is the largest rate of unemployment in Latvia. These facts raise the question of choice of valid methodology of happiness studies that meet the Latgale cultural and economic characteristics. The aim of this article is to describe options of using Oxford happiness survey of Latgale inhabitants happiness studies and cultural adaptation of this methodology.*

Keywords: *test adaptation, Oxford happiness questionnaire, feeling of happiness.*

Ievads
Introduction

Pasaulē būtiski palielinājās pieprasījums pēc laimes fenomena pētījumiem, kas ir saistīts ar ikdienas stresa situāciju skaita pieaugumu, cilvēka personiskās dzīves konstruēšanas sarežģītības paaugstināšanos, dzīves orientieru komplicētāku izvēli, socializācijas grūtībām, sociālo normu un vērtību būtiskām izmaiņām.

Pozitīvās psiholoģijas ietvaros tika veikta virkne pētījumu (Adler & Newman, 2002; Diener & Biswas-Diener, 2002; Diener & Seligman, 2004),kuri apstiprina laimes izjūtas saikni ar valsts sociāli ekonomiskajiem apstākļiem. Turklāt tika pierādīts, ka valstiskā līmenī atklājas šāda tendence: jo lielāks ir iekšzemes kopprodukts uz vienu iedzīvotāju, jo augstāks ir šīs valsts iedzīvotāju apmierinātības ar dzīvi līmenis (laimes izjūtas kognitīvais komponents) (Stevenson & Wolfers, 2008; Svence, 2009).

Zemais Latgales iedzīvotāju dzīves līmenis izraisīja strauju šī reģiona iedzīvotāju skaita samazināšanos. No 2000. gada Latgales iedzīvotāju skaits samazinājās par 24%. Iekšzemes kopprodukts uz vienu Latgales iedzīvotāju ir

15 reizes zemāks, nekā IKP uz vienu Rīgas iedzīvotāju (Воронов & Лавриненко, 2011). Bezdarba līmenis Latgalē, saskaņā ar oficiālajiem datiem, sastāda 27%, kas ir lielākais bezdarba rādītājs Latvijā (saskaņā ar Nodarbinātības Valsts aģentūras datiem, 2011).

Minētie statistiskie fakti aktualizē jautājumu par validas metodikas izvēli un adaptāciju Latgales iedzīvotāju laimes izjūtas kvalitatīvā (saturiskā) izpētē.

Šī raksta mērķis ir atspoguļot Oksfordas laimes aptaujas adaptācijas procesu un pielietojuma iespējas Latgales iedzīvotāju laimes izjūtas struktūras izpētē.

Pētījumā tika izmantotas zinātniskās literatūras analīzes, aptaujas un empīrisko datu statistiskās apstrādes metodes ar SPSS 19.0 modifikācijas variantu.

Oksfordas laimes aptaujas teorētiskie aspekti un izvēles pamatojums
Oxford happiness surveys theoretical aspects and justification of choice

Viena no plašāk pielietotajām metodikām kopējā hedonistiskās laimes (laime tiek izprasta kā bauda, kuras svarīgākais komponents ir pozitīvu emociju esamība) izjūtas līmeņa noteikšanai ir „Oksfordas laimes aptauja" (turpmāk „OL"), kuru Oksfordas Universitātē izstrādāja M. Ārgails un P. Hills. Šī metodika tika izveidota ar mērķi kvantitatīvi novērtēt kopējo indivīda laimes izjūtas līmeni. Minētā aptauja tika pielietota lielākajā daļā laimes pētījumu, kuri tika veikti Oksfordā (Hills & Argyle, 2002).

Metodikas oriģinālais variants nesatur faktorus, ar kuriem iespējams izteikt laimes izjūtas struktūru. Metodika tika paredzēta tikai laimes izjūtas līmeņa noteikšanai. Laimes izjūtas līmenis tiek interpretēts 6 ballu skalā, kur: 1 – 2 balles tiek interpretētas kā „Nelaimīgs"; 2,1 – 3 balles – kā „Nedaudz nelaimīgs"; 3,1 – 4 balles – kā „Ne īsti laimīgs, ne īsti nelaimīgs"; 4,1 – 5 – kā „Diezgan laimīgs"; 5,1 – 6 - kā „Laimīgs"; 6,1 un vairāk – kā „Ļoti laimīgs".

Kā redzams no minētās rezultātu interpretācijas, metodikas oriģinālā varianta trūkums saistīts ar to, ka „OL" sniedz tikai kvantitatīvus rādītājus (nosaka kopējo laimes izjūtas līmeni), nenosakot laimes izjūtas struktūras komponentus. Turklāt aptauja līdz šim netika adaptēta Latvijas kultūrvides īpatnībām. Tādēļ pētījumam tika izvirzīts uzdevums adaptēt „OL" pētījumiem Latvijā, kā arī pamatot iespējas izmantot šo metodiku kā laimes izjūtas struktūras izpētes instrumentu, veidojot metodikas indikatoru telpā faktorus, ar kuriem iespējams izpētīt laimes izjūtas struktūru.

„OL" izvēli pamatoja fakts, ka, salīdzinot ar konkurējošām metodikām: Fordisa „Laimes skalu (Happiness measure)", Bredberna „Afektīvā balansa skalu (Affective ballance scale)", Dīnera „Apmierinātības ar dzīvi skalu (SWLS)" un Flenagana „Dzīves kvalitātes skalu (LQS)", „OL" sniedz visplašākās iespējas laimes izjūtas struktūras izpētei, jo „OL" veido 29 indikatori, kurus ar faktoranalīzes palīdzību iespējams grupēt faktoros, kas

ilustrē laimes izjūtas struktūru. Turpretī minētās konkurējošās metodikas satur 2 līdz 7 indikatorus, ar kuru palīdzību nav iespējams kvalitatīvi ilustrēt laimes izjūtas struktūru.

Salīdzinot ar Beka „Depresijas aptauju (BDI)", „OL" raksturo lielāka retestīvā ticamība (Hills & Argyle, 2002).

„OL" ticamības salīdzinājums ar konkurējošām metodikām ilustrēts 1. tabulā.

1.tabula. "OL" ticamība, salīdzinot ar konkurējošām metodikām (Argyle, 2001)
Table 1. „OL" reliability compared to competing methodologies (Argyle, 2001)

Metodika	Ticamības rādītājs
„OL"	α=0,91
Dīnera „Apmierinātības ar dzīvi skala	α=0,84
Fordisa laimes skala	α=0,83
Bredberna afektīvā balansa skala	α=0,74
Flenagana „Dzīves kvalitātes skala"	α=0,69

„OL" izvēli pamato arī šīs metodikas oriģinālā varianta pētāmais fenomens- laimes izjūta. Tieši šis fenomens bija galvenais pētījuma objekts autora veiktajā Latgales iedzīvotāju laimes izjūtas izpētē. Jāatzīmē, ka konkurējošās metodikas pēta atsevišķus ar laimes izjūtu saistītus aspektus.

Oksfordas laimes aptaujas adaptācija
Oxford happiness questionnaire adaptation

Pirmajā empīriskā pētījuma posmā tika veikta „OL" tulkošana un lingvistiskā adaptācija, kā arī pilotpētījuma rezultātā tika noteikti metodikas ticamības stabilitātes rādītāji.

Metodikas „OL" lingvistiskā adaptācija ietvēra metodikas oriģinālā varianta tulkošanu latviešu valodā un atkārtoto tulkošanu angļu valodā. Tulkošanas procesu veica divi neatkarīgi angļu valodas speciālisti (Rēzeknes Augstskolas angļu valodas studiju kursu docētāji). Tulkotie anketas varianti tika nodoti triju neatkarīgu ekspertu vērtējumam, kura rezultātā tika veiktas nepieciešamās korekcijas un precizējumi, salīdzinot ar aptaujas oriģinālu.

Lai pārbaudītu tulkojuma kvalitāti, tika veikts pilotpētījums, kurā Rēzeknes Augstskolas „Tulks referents" specialitātes studentiem (n=10) tika veikta atkārtotās testēšanas procedūra: pirmajā etapā studenti aizpildīja anketas oriģinālo variantu, otrajā etapā tika aizpildīts anketas tulkotais variants. Tika noteikts, ka korelācija (Spearman's rho Correlation Coefficient) starp oriģinālās un tulkotās metodikas indikatoriem variē ir 0,711 – 0,797 robežās, kas liecina par pietiekamu lingvistiskās adaptācijas kvalitāti.

Turpmākā metodikas „OL" adaptācija tika veikta pamatpētījuma etapā, izmantojot pētāmajā izlasē (n=475) iegūtos datus.

Pamatpētījums tika veikts Latgales reģionā, iekļaujot respondentus no Balvu, Ludzas, Rēzeknes, Preiļu, Daugavpils un Krāslavas novada. Pētījums tika veikts kā individuāli, tā arī frontāli respondentu brīvajā laikā pēc iepriekšējās vienošanās ar viņiem. Piedalīšanās pētījumā bija brīvprātīga.

Empīriskā pētījuma bāze: valsts izglītības iestādes, Latgales reģiona valsts iestādes un privātie uzņēmumi.

Metodikas „OL" adaptācija iekļāva aptaujas faktoru struktūras analīzi, iegūto faktoru interpretāciju un to iekšējās saskaņotības analīzi, divpakāpju klasteranalīzi, Pīrsona korelācijas koeficienta noteikšanu.

Iegūtais Kaizera – Meiera – Olkina izlases adekvātuma kritērijs (KMO=0,909) norāda uz faktoranalīzes veikšanas lietderību dotās metodikas adaptācijā.

Tika veikta eksploratorā (pētnieciskā) faktoranalīze ar faktoru atlasi izmantojot galveno komponentu metodi un turpmāko Varimaks - rotāciju (Extraction Method: Principal Component Analysis.Rotation Method: Varimax with Kaiser Normalization). Veiktās faktoranalīzes rezultātā „OL" aptaujas indikatoru telpā tika iegūti trīs faktori (skat. 2. tabulu), kas raksturo respondentu hedonistikās laimes izjūtas (turpmāk HLI) struktūru.

2.tabula. "OL" faktoru struktūra un indikatoru faktorslodzes
Table 2. „OL" factor structure and factor loadings of indicators

Faktori	Indikatori	(1)	(2)	(3)
(1) Apmierinātība ar dzīvi kopumā	Es protu atrast skaisto daudzās lietās	0,698		
	Es jūtos pilnīgi možs	0,622		
	Dzīvē mani viss apmierina	0,598		
	Es varu atrast laiku visam, ko vēlos darīt	0,561		
	Man nav viegli pieņemt lēmumus	0,562		
	Dzīve ir skaista	0,551		
	Es jūtu, ka mani pārpilda enerģija	0,527		
	Pamodies es reti jūtos atpūties	0,496		
	Man vienmēr ir, ko darīt, ar ko nodarboties	0,471		
	Es jūtu, ka dzīve ļoti atalgo mani	0,447		
(2) Pozitīvu emociju esamība	Es neizjūtu prieku no saskarsmes ar cilvēkiem		0,688	
	Es esmu patiesi ieinteresēts citos cilvēkos		0,578	
	Es uzskatu, ka vairums lietu manā dzīvē ir iepriecinošas		0,575	
	Es neuzskatu, ka esmu pievilcīgs		0,569	
	Es neuzskatu, ka pasaule ir laba vieta		0,561	
	Es bieži priecājos un sajūsminos		0,526	
	Man ir ļoti siltas jūtas gandrīz pret ikvienu		0,551	

(3) Pozitīvs dzīves novērtējums laika perspektīvā	Es īpaši neizjūtu, ka manai dzīvei ir jēga	0,657		
	un mērķis	0,632		
	Es jūtos spējīgs paveikt visu	0,605		
	Es parasti spēju labvēlīgi ietekmēt notikumus	0,552		
	Es vienmēr labi iespaidoju citus cilvēkus			
	Es jūtu, ka ne sevišķi labi kontrolēju savu dzīvi	0,517		
	Es nejūtos sevišķi apmierināts ar to stāvokli dzīvē, kurā esmu	0,460		
	Ir atšķirība starp to, ko es vēlētos izdarīt, un to, ko es esmu izdarījis	0,456		
	Savu nākotni es nevērtēju īpaši optimistiski	0,415		
Summārā dispersija pēc rotācijas		18,6%	15,1%	10,1%
Kronbaha alfa		0,880	0,823	0,641

Jāatzīmē, ka atbildes uz negatīvi formulētiem jautājumiem tika pārkodētas, tādēļ visas 2. tabulā ilustrētās faktorslodzes ir pozitīvas.

Tika noteiktas arī summārās dispersijas, kuras izskaidro katrs no faktoriem. Lielākais summārās dispersijas procents (18,6%) izskaidro pirmo faktoru „Apmierinātība ar dzīvi kopumā”, bet mazākais (10,1%)- trešo faktoru „Pozitīvs dzīves novērtējums laika perspektīvā”.

Kronbaha Alfa kritērijs variē 0,65 – 0,88 robežās, kas raksturo metodikas ticamību kā pietiekamu vai labu.

Tādējādi zinātniskās literatūras (Argyle & Martin, 1991; Argyle, 2003; Diener & Ryan, 2009; Diener & Arora, 2010;) analīzes, un empīriskajā pētījumā iegūto datu faktoranalīzes rezultātā noteikts, ka hedonistiskās laimes izjūtas struktūru, izmantojot „OL”, raksturo šādi faktori:

- „Apmierinātība ar dzīvi kopumā”;
- „Pozitīvu emociju esamība”;
- „Pozitīvs dzīves novērtējums laika perspektīvā”.

Ar minēto faktoru palīdzību iespējams veikt laimes izjūtas strukturālos pētījumus. Līdz ar to tiek rasta iespēja izmantot "OL" ne tikai laimes izjūtas kopējā līmeņa noteikšanai, bet arī pētīt minētā fenomena kvalitatīvos rādītājus.

Latgales iedzīvotāju hedonistiskās laimes izjūtas analīze

Metodikas "OL" kā laimes izjūtas strukturālās analīzes instrumenta pielietojuma ilustrācijai turpmāk tiek atspoguļoti Latgales iedzīvotāju HLI izpētes rezultāti minētajā respondentu izlasē.

Izmantojot divpakāpju klasteranalīzi tika veikta respondentu klasifikācija izdalīto HLI faktoru telpā. Tika iegūti pieci klasteri, kas uzskatāmi ilustrē Latgales iedzīvotāju HLI struktūru (skat. 1. attēlu). Noteiktais Silhouette koeficients (0,5) liecina par vidēju klasterizācijas kvalitāti.
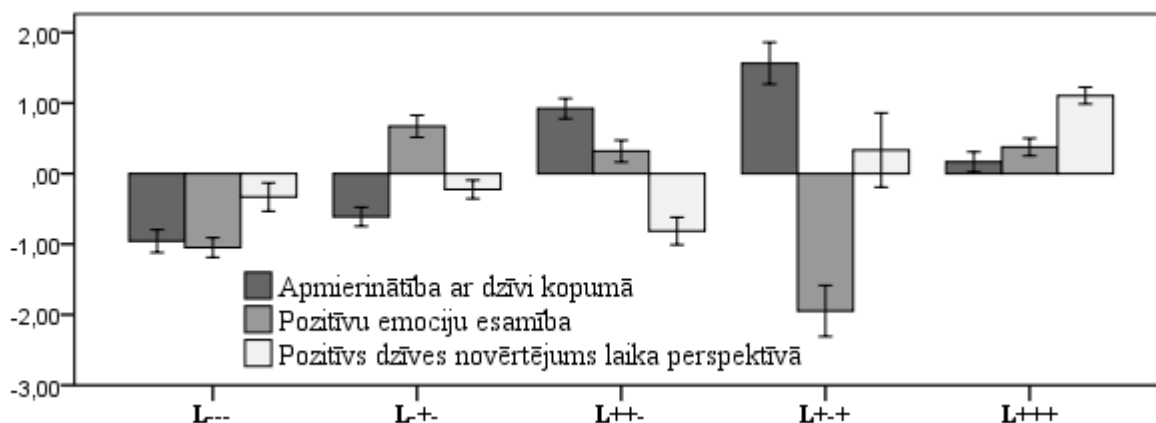
1.attēls. Pētāmās izlases respondentu HLI struktūra
Figure 1. Structure of hedonistisc happiness sense of investigated sample

„L---" grupā visi HLI faktori izteikti zemāk par izlases vidējo līmeni. Respondentiem raksturīga neapmierinātība ar dzīvi kopumā un atsevišķiem tās aspektiem, pagātne tiek vērtēta kā neveiksmīga, trūkst pozitīvo emociju, un raksturīgas pesimistiskas nākotnes prognozes. Šīs grupas respondentus iespējams klasificēt kā nelaimīgus.

„L-+-" grupai raksturīga pozitīvo emociju dominante, neskatoties uz neapmierinātību ar dzīvi kopumā un nelielu neapmierinātību ar pagātni un dzīves perspektīvām. Šīs grupas respondentu laimes izjūtu var izskaidrot ar optimistisku nostādni pret dzīvi, kā arī temperamenta īpatnībām (ekstraversija un zems neirotisms) un internālo kontroles lokusu. Ņemot vērā pozitīvo emociju dominanti šīs grupas respondentus iespējams klasificēt kā laimīgus ar zemu apmierinātību ar dzīvi kopumā un nākotnes perspektīvām.

„L++-" grupai raksturīga apmierinātības ar dzīvi izjūta, tajā pašā laikā respondentus raksturo zināma vilšanās savā pagātnē un neprasme saredzēt dzīves perspektīvas. Ir izteikta pozitīvo emociju dominante, tādēļ šīs grupas respondentus kā laimīgus ar zemu apmierinātību ar nākotnes perspektīvām.

„L+-+" grupā, neskatoties uz izteiktu pozitīvu savas dzīves notikumu vērtējumu kopumā, kā arī zināmu pozitīvu attieksmi pret savu pagātni un spēju novērtēt dzīves perspektīvas, konstatēts spilgti izteikts (viszemākais izlasē) pozitīvu emociju trūkums. Šī iemesla dēļ minētās grupas respondenti tiek traktēti kā nelaimīgi ar apmierinātību ar dzīvi kopumā un nākotnes perspektīvām. Šo īpatnību var izskaidrot ar ģenētisko faktoru ietekmi un temperamenta īpatnībām – intraversiju un paaugstinātu neirotismu.

„L+++" grupas respondentiem visi HLI faktori izteikti virs izlases vidējā līmeņa. Šo grupu raksturo apmierinātība ar dzīvi kopumā un atsevišķiem tās aspektiem, pozitīvu emociju dominante, pozitīvs pagātnes un savu sasniegumu vērtējums, kā arī dzīves perspektīvas redzējums. Pamatojoties uz minētajiem faktoriem, šīs grupas respondenti tiek klasificēti kā laimīgi.

2.attēlā ilustrēts pētāmās izlases procentuālais sastāvs pēc izdalītajām respondentu grupām ar dažādu HLI struktūru.
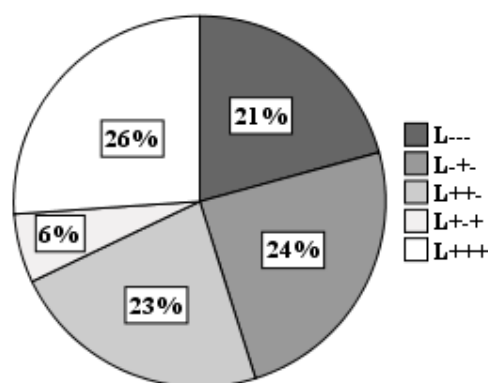
2.attēls. Latgales iedzīvotāju ar dažādu HLI struktūru procentuālās attiecības
Figure 2. Latgale population with different percentages of HLI structure

Kā redzams 2. attēlā, procentuāli lielāko izlases grupu (26%) veido respondenti ar laimes izjūtas struktūru „L+++". Otru lielāko grupu (24%) veido respondenti ar laimes izjūtas struktūru „L-+-". Jāatzīmē, ka 21% no pētāmās izlases veido grupas „L---" respondenti, kuru laimes izjūtas struktūru raksturo zems visu HLI faktoru līmenis.

Lai noskaidrotu HLI faktoru savstarpējo korelāciju, tika izmantots Pīrsona korelācijas koeficients (skat. 3. tabulu).

3.tabula. HLI faktoru savstarpējā korelācija grupās ar dažādu laimes izjūtas struktūru
Table 3. Factor correlates of hedonistisc happiness in groups with various happiness structure

Respondentu grupas ar dažādu hedonistiskās laimes izjūtas struktūru	Faktori	Apmieri-nātība ar dzīvi kopumā	Pozitīvu emociju esamība	Pozitīvs dzīves novērtējums laika perspektīvā
L---	Apmierinātība ar dzīvi kopumā	1,000	-0,170	0,064
	Pozitīvu emociju esamība		1,000	-0,349**
	Pozitīvs dzīves novērtējums laika perspektīvā			1,000
L-+-	Apmierinātība ar dzīvi kopumā	1,000	-0,158	-0,212
	Pozitīvu emociju esamība		1,000	-0,058
	Pozitīvs dzīves novērtējums laika perspektīvā			1,000
L++-	Apmierinātība ar dzīvi kopumā	1,000	-0,008	0,390**
	Pozitīvu emociju esamība		1,000	0,304*
	Pozitīvs dzīves novērtējums laika perspektīvā			1,000
L+-+	Apmierinātība ar dzīvi kopumā	1,000	-0,037	-0,027
	Pozitīvu emociju esamība		1,000	-0,269
	Pozitīvs dzīves novērtējums laika perspektīvā			1,000
L+++	Apmierinātība ar dzīvi kopumā	1,000	0,180	-0,360**
	Pozitīvu emociju esamība		1,000	-0,290*
	Pozitīvs dzīves novērtējums laika perspektīvā			1,000

Laimes izjūtu veidojošo faktoru korelācijas visā pētāmajā izlasē ilustrētas 4. tabulā.

4.tabula. HLI faktoru savstarpējā korelācija pētāmajā izlasē
Table 4. Factor correlates of hedonistisc happiness in researched group

HLI faktori	Apmierinātība ar dzīvi kopumā	Pozitīvu emociju esamība	Pozitīvs dzīves novērtējums laika perspektīvā
Apmierinātība ar dzīvi kopumā	1,000	-0,045	0,315[**]
Pozitīvu emociju esamība		1,000	-0,284
Pozitīvs dzīves novērtējums laika perspektīvā			1,000

Iespējams konstatēt, ka HLI struktūru veidojošo faktoru korelācijas ir vājas, turklāt tika konstatētas arī negatīvas faktoru korelācijas.Veiktā analīze apstiprina laimes izjūtas struktūras, nevis kopējā laimes izjūtas līmeņa izpētes aktualitāti – vājās faktoru savstarpējās korelācijas ierobežo iespēju izmantot agregētu kopējo HLI līmeņa rādītāju laimes izjūtas pētījumos.

Secinājumi
Conclusions

Pētījuma gaitā autors nonāca pie šādiem secinājumiem:
1. Oksfordas laimes aptauju iespējams izmantot ne tikai laimes izjūtas kopējā līmeņa noteikšanai, bet arī laimes izjūtas struktūras pētījumos.
2. Laimes izjūtas struktūru Oksfordas laimes aptaujas indikatoru telpā iespējams izteikt ar 3 faktoru palīdzību: "Apmierinātība ar dzīvi kopumā", "Pozitīvu emociju esamība" un "Pozitīvs dzīves novērtējums laika perespektīvā".
3. Tika veikta Oksfordas laimes aptaujas adaptācija izmantošanai Latvijas kultūrvidē. Iegūtās korelācijas vērtības liecina par pietiekamu lingvistiskās adaptācijas kvalitāti. Metodikas indikatoru faktorslodzes un noteiktais Kronbaha Alfa kritērijs raksturo metodikas ticamību kā pietiekamu vai labu.
4. Laimes izjūtu veidojošo faktoru savstarpējās korelācijas apstiprina laimes izjūtas struktūras, nevis kopējā laimes izjūtas līmeņa izpētes aktualitāti.
5. Oksfordas laimes aptaujas adaptācijas gaitā tika noteikta Latgales iedzīvotāju laimes izjūtas struktūra, un noteiktas piecas raksturīgākās grupas ar atšķirīgu laimes izjūtas struktūru.
6. Tika noteikts, ka 21 % respondentu raksturo zema apmierinātība ar dzīvi kopumā, pozitīvu emociju trūkums un zema apmierinātība ar dzīvi laika perspektīvā, bet 6% respondentu raksturo pozitīvu emociju

trūkums. Šie rezultāti apliecina laimes izjūtas problemātikas aktualitāti Latgales reģionā.

Summary

The aim of this article is to present options of using Oxford happiness questionnaire of Latgale inhabitantshappiness studies and cultural adaptation of this methodology.

The key concepts of this article are „test adaptation", „Oxford happiness questionnaire", „structure of happiness". The article is based on positive psychology findings about the phenomenon ofhappiness and its socio-demographic determinants.

The novelty, scientific and practical significance of this research associated with the detailed study of structure of happiness andOxford happiness questionnaire adaptation for use in Latvian cultural environment. It should be noted, that analogous studies in the Latgale region so far had not been carried out.

The adaptation of the questionnaire took place involving the respondents (n=475) of the Balvi, Ludza, Rezekne, Preili, Daugavpils and Kraslava region.

Following research methods were used: M. Argyle's „Oxford Happiness Questionnaire" (Hills & Argyle, 2002), methodology „Socio-demographic stratification questionnaire" (Kalvans, 2011).

The results of the research are as follows:

1. Oxford happiness questionnaire can be used not only for detection of level of happiness, but also for happiness structural studies.
2. The structure of happiness in space of Oxford happiness questionnaire indicators can be expressed with the help of three factors: "Satisfaction with life in general", "Existence of positive emotions" and "Positive assessment of life in time perspective''.
3. The Oxford happiness questionnaire adaptation for use in Latvian cultural environment was carried out. The resulting correlation (Spearman's rho Correlation Coefficient) indicates a sufficient quality of linguistic adaptation. Methodology indicators factor loadings and Cronbach Alfa specified criterion characterized the reliability of the methodology as satisfactory or good.
4. The correlation between happiness-forming factors confirms actuality of happiness structure research.
5. Adaptation process of Oxford happiness questionnaire identified structure ofLatgale inhabitantsfeeling of happiness and were determined five groups with different characteristic of happiness structure.
6. It was determined that 21% of respondents characterized by low satisfaction with life in general, the lack of positive emotions and low satisfaction with life in time perspective, while 6% of respondents characterized by a lack of positive emotions. These results confirm the actuality of happiness problematic in Latgale region.

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СОЦИАЛЬНАЯ КОММУНИКАЦИЯ В ОБЩИНЕ: МОСТ МЕЖДУ ПОКОЛЕНИЯМИ

Social Communication in a Community: the Bridge Among Generations

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Abstract. *Referring to scientific literature, the article aims to define criteria of social communication, which are identified by socio-cultural, psychological, communication competences that in value viewpoint are essential for partnership relations among generations. The article presents network characteristics of successful partnership among generations. On the basis of theoretical works' analysis the research methodology as well as quantitative and qualitative research instrument, which allowed performing the empirical research, has been designed. The article also presents essential results of the research: how social communication and partnership networks create premises for bridges among generations in a community. The research has been performedin N community in Lithuania's second largest city. In this article the authors pursue to find the answer to the problematic question – what experience of communities' creation of bridges between social communication and partnership networks can strengthen bridges among generations.*

Keywords: *social communication, partnership, bridge among generations.*

Введение
Introduction

Актуальность данной статьи обусловлена процессами глобализации, проявлением отчуждения в человеческих отношениях, осложнением диалога между поколениями старшего возраста и так называемого самого молодого поколения - Z - это в основном учащиеся, выделяющиеся своими исключительными компетенциями методов цифровой коммуникации, использованием информационных технологий.

Авторы статьи считают целесообразным коротко представить различные поколения. Поколение Z (от 1-18 лет) родилось на грани поколения Y. Поколение Y – это поколение, родившееся в период 1980-2000 г. г. Представители этого поколения уверены в себе и своём отличии от других, знают себе цену. Они бунтари, не спешащие взрослеть, стать посерьёзнее. Они пытаются найти равновесие между карьерой и свободным временем. Это образованные и технологически высококомпетентные, оптимистичные и живущие с верой о лучшем

будущем люди. Поколению Y, т. е. людям от14 до 34 лет не нравятся строгие правила, традиции, иерархические отношения.

Поколение Y – с 14 до 34 идут по стопам своих матерей (бабушек), т. е. поколения X. А ведь этим жителям, т.е. представителям поколения X сейчас от 34 до 54 лет. Многие из них жили, учились, воспитывались на основе совершенно других ценностей. Они рациональны, реалистичны, слегка осторожны, ценят тяжёлый труд и самостоятельно заработанные деньги. Найти свободное время и уделить его своей семье для них важнее нежели для их родителей, однако, по мнению их детей (поколение Y) – они проводят слишком много времени на работе. Поколение X довольно консервативно в своих взглядах. Авторы предполагают, что большую часть активных и инициативных граждан общины составят представители поколения X, нежели поколения Y (с 34 до 54).

Самое молодое поколение – это поколение Z. В этой статье, ссылаясь на проведенное научное исследование (McCrindle, 2010) целесообразно отметить, что результаты исследования показывают, что Z поколение официально признано самым образованным поколением за всю историю. Это первое поколение, отмечающееся технологической грамотностью. Социальную коммуникацию они воспринимает иначе: дети этого поколения «мигрируют» по просторам Интернета при помощи ссылок, с легкостью находя и усваивая информацию из различных источников. По сравнению со старшим поколением они проводят много времени в много-виртуальном пространстве, они более толерантны, ведут активное общение в социальных сетях. Цифровое Z поколение прочнее, чем старшее поколение. Это поколение постоянно находится в виртуальной общине. Вот почему нахождение желаемого диалога со старшими поколениями в территориальной общине - пока нерешенная проблемой.

Социальная коммуникация между старшим и младшим поколениями в территориальной общине приобретает характер не только практической, но и научной проблемы, которую можно сформулировать вопросом - какими личными практиками характеризуется социальная коммуникация между поколениями в территориальной общине и каковы причины, создающие препятствия для успешного «строительства моста» между поколениями по ближайшему месту жительства?

Цель этой статьи - на основе научных трудов проведенного эмпирического исследования показать важность социальной коммуникации в общине при укреплении «мостов» между поколениями.

Следуя цели, авторы попытались раскрыть понятие и параметры социальной коммуникации, общими чертами охарактеризовать поколение Z и, с помощью созданных инструментов провести исследование: интервью с экспертами – активными деятелями территориальных общин, ас помощью письменного опроса старшеклассников школы N

территории – раскрыть проблемы социальной коммуникации между поколениями.

Теоретические аспекты социальной коммуникации по совместной деятельности поколений
Theoretical aspects of joint activity of generations' social communication

Анализируя научные труды зарубежных авторов (Gudikunst, Mody, 2002) становится ясно, что слабость глобализации констатируется из-за культурного суверенитета создателей правил и проявления гражданственности. Глобализация насыщает пространство культуры, которая в свою очередь имеет претензии, влияющие на лица, форму политики, средства массовой информации (СМИ) и открывающие пространство новым формам участия и проявления гражданственности.

В этом контексте появляется ещё один параметр в образовательном пространстве межкультурной коммуникации – социальная коммуникация, позволяющая оценить успешен или нет опыт участия граждан и подвергать его коррекции, пополняя сегментами удачной практики. Таким образом, социальная коммуникация создаёт главные условия для общения и сотрудничества в среде и выделяет аспект участия, необходимый для существования межкультурной коммуникации.

Широкое поле интерпретации понятия социальной коммуникации создаёт возможность понять социальную коммуникацию как и средство коммуникации, так и как процесс (Philapsen, 1192, Ruben, Budd, 1975, Kim, 2005).

Зарубежный автор (Philapsen, 1992) отмечает, что социальная коммуникация может быть охарактеризована изменениями символов, понятий, предположений.

В «Гипотетической модели основных параметров межкультурной коммуникации и соотношений с образовательными инновациями» (Kvieskaitė, 2011) выделена социальная коммуникация, которая определяется следующими характеристиками:
1) Социальная коммуникация – это знания о психо-культурной, социокультурной и культурной среде; локальное воздействие индивида или групп, использование организационных знаний о социокультурной среде для создания местных инноваций; модульное воздействие: использование организационных знаний о социокультурной и культурной среде индивидами, группой или организацией; системное воздействие на индивида, группу или организацию с использованием знаний о психо-культурной, социо-культурной и культурной среде для создания системных инновация;

2) Социальная коммуникация – это мотивация к общению и сотрудничеству; локальное воздействие на индивида, группу, организацию к мотивации общаться и сотрудничать в специфической деятельности, достигая местных инноваций; модульное воздействие на индивида, группу, организационные знания о психо-культурной, социокультурной и культурной среде, мотивация к общению и сотрудничеству, стремление к модульным инновациям; системное воздействие: мотивация индивида, группы или организации к общению или сотрудничеству с целью системной инновации;

3) Социальная коммуникация – это развитие компетенции общения и сотрудничества во внутренних и внешних сетях; локальное воздействие: компетенция общения и сотрудничества во внутренних сетях, инициируя и воплощая локальные образовательные инновации; модульное воздействие: компетенция общения и сотрудничества во внутренних и внешних сетях, инициируя и воплощая модульные образовательные инновации; системное воздействие: компетенция общения и сотрудничества во внутренних и внешних сетях, инициируя и воплощая системные образовательные инновации.

Глядя на гипотетическую модель главных параметров социальной коммуникации стало ясно, что проявление связи между социальной коммуникацией и образовательными инновациями раскрывается благодаря знаниям о гражданственности, гражданских ценностных установках, участия граждан в объёме локального, модульного и системного воздействия.

Анализ научных трудов ещё одного известного зарубежного учёного (Longworth, 2003) позволяет раскрыть черты сети удачного социального партнёрства, актуальные для проблематики данной статьи:

1. Социальное партнёрство должно быть полезным для всех партнёров и участников. Односторонняя польза чревата потерей мотивации у партнёров.

2. В сети социального партнёрства должно участвовать как можно больше к нему принадлежащих членов организации.

3. Все члены организации должны быть информированы о целях сети социального партнёрства и эффективности осуществляемой деятельности.

4. Члены организации имеют возможность внести предложения для усовершенствования сети социального партнёрства в качестве управления структурой или конкретной деятельности.

5. Каждое социальное партнёрство должно поставить перед собой ясные цели и задачи.

6. Хоть один из руководителей каждой организации в сети социального партнёрства должен нести ответственность за удачу реализуемого партнёрства.
7. Собрания социальных партнёров должны созываться не реже раза в четверть года.
8. Сеть социального партнёрства должна иметь руководителя и секретариат, гарантирующий удачную и пристальную деятельность.
9. Управление социальным партнёрством должно поощрять граждан и организацию для участия в важных и запланированных делах, а также вносить свой вклад.
10. Управленцы социального партнёрства должны организовывать праздничные мероприятия этой сети.

Социальное партнёрство, социальная коммуникация в общине в основном создаётся и осуществляется для оптимизации хороших добрососедских отношений как между различными организациями, так между гражданами, внедрений инновационных проектов в сфере социально-культурной образовательной деятельности в ближайшей среде обитания человека, укрепляя «мосты» между поколениями.

Сеть социального партнёрства обычно бывает горизонтально организованным объединением. Оно открывает возможности для разновидных вертикальных отношений между участниками, каждый из которых является совершенно автономным. Отсутствует какой-либо иерархический контроль «из центра», хотя стратегическое режиссирование вполне возможно.

В первую очередь внимание уделяется межличностным отношениям между участниками сети. Структура социальной сети довольно свободна, поэтому сеть (социальное партнёрство) может быстро приспособиться к новшествам социального развития.

Институции и специалисты, подключившиеся к сети, склонны постоянно интересоваться деятельностью всей социальной сети и делиться с коллегами деловыми знаниями и особенностями деятельности.

Достойны внимания суждения зарубежных учёных о создании моста между поколениями путём социальной коммуникации. По мнению этих ученых (Lorning, McLamey, 1997) пользу совместной деятельности разных поколений в общинах можно охарактеризовать следующими аспектами:
1. Старшее поколение, общаясь с молодёжью, получает возможность быть в курсе самых последних достижений науки.
2. Оба поколения имеют уникальную возможность познать друг друга, не руководствуясь ранними установками и стереотипами, научиться общаться не только со своими сверстниками.
3. Молодёжь, в общей деятельности со старшими жителями территориальной общины (района, города, села и т.д.) имеют

хорошую возможность научиться принимать ответственность за свои поступки и деятельность, обрести практику принятия решений, общаясь со старшим поколением. На основе опыта старших младшее поколение сможет обрести больше самостоятельности.

4. Молодёжь имеет возможность получить советы о том, как продуктивнее использовать усвоенные знания в школе или ВУЗ-е, опытом, способностями и умениями.

5. Социальная коммуникация поколений является лучшей возможностью научиться солидарности, уважению, эмпатии и толерантности.

Совместная социокультурная деятельность, гражданская инициатива поможет приостановить (решать) конфликты между поколениями. Разные поколения могли бы стать надёжными и сильными социальными партнёрами, достигая цели и защищая свои права и интересы. По мнению (Camino, 2000), изучающего отношения между поколениями, «молодёжь в общей со старшим поколением деятельности по месту жительства или другой социокультурной среде имеет возможность непосредственно увидеть компетенцию старших, принимая решения, проявляя доблесть, целенаправленность при достижении общей цели.

В книге «Партнёрство молодых и старших» (Kerneth, Perkins, 2003) авторы подчёркивают, что для того чтобы общая социокультурная деятельность была продуктивной, интересной и полезной: старшее поколение должно быть готово от души делиться своими знаниями и ответственностью, а молодёжь в свою очередь должна быть готова взять ответственность за свои действия. Оба поколения должны действовать по принципу творчества и сердечности. В дискуссии об общей деятельности поколений (Carpenter, 2003), каждый представитель поколений должен задать себе следующие вопросы:

1. Готов ли я ценить и уважать мнение коллег или волонтёров в общине, не обращая внимания на разницу в возрасте?

2. Буду ли я стараться общаться с людьми не только своего поколения?

3. Имею ли я ярко выраженную мотивацию участвовать в общей деятельности с людьми другого поколения?

4. Сумею ли я взять ответственность за свои поступки в общей деятельности?

5. Каких изменений я жду от отношений в совместной деятельности с другим поколением?

Авторы (Lorning, McLamey, 1997) представляют два деловых компонента, которые полезны при ожидании общей гармоничной деятельности поколений и укрепления межличностных отношений:

1. Личные качества человека: энтузиазм, чувство юмора, любопытство.
2. Деловые факторы социально-педагогической деятельности: ясность и конкретность деятельности, качественная и чёткая передача информации.

Lorning и McLamey выделили деловые компоненты, которые полезны при ожидании общей гармоничной деятельности поколений и укрепления межличностных отношений: уверенность в себе, совместное сотрудничество, деление опытом, стремление к общей цели, уважение общих правил общения, обоюдное доверие, сердечное и открытое общение, общее уважение и толерантность.

Camino L., опираясь на труды своих научных коллег (Mender Weld, Norman, 2001, Zeldin, Olson, 2000) представляет шаги удачной социокультурной деятельности между поколениями: шаг 1-ый - вызов интереса у разных поколений в общине общей деятельности; шаг 2-ой - ознакомление представителей разных поколений общины с пользой общей деятельности, консультация представителей поколений, моделирование желаемого настроения в процессе будущей деятельности; шаг 3-ий - организация общей деятельности поколений, учитывая пожелания поколений; шаг 4-ый - наблюдение за деятельностью разных поколений; шаг 5-ый - анализ общей деятельности поколений, усовершенствование, внедрение новых видов общения, расширение связей между поколениями.

Результаты исследования социальной коммуникации между поколениями в территориальной общине
Research results of social communication among generations in a community

Методология исследования.

Для получения ответов на проблемные вопросы был подобран инструмент качественного и количественного исследования. Используя полуструктурированное интервью было опрошено 6 экспертов территориальной общины X. Это самые активные деятели общинного центра, на которых наложена вся организационная работа по укреплению «мостов» между поколениями средствами социальной коммуникации. Респондентами количественного исследования были выбраны учащиеся 10-12-ых классов двух средних школ, находящихся в территориальной общине X. По предварительному мнению исследовательниц - это дети поколения Z, характеристика которых представлена в теоретической части статьи.

Ограничение исследования объясняется отбором респондентов по принципу неожиданности, что обозначает, что не каждый член популяции территориальной общины имел возможность попасть в число исследуемых. Участники исследования должны были соответствовать

критериям отбора, количество респондентов было предвидено заранее. Участники качественного исследования должны были соответствовать следующим критериям: являться активными членами общины, участвовать в социально-педагогической деятельности по месту жительства, владеть компетенциями организовать деятельность путем социальной коммуникации между поколениями.

Письменным опросом (анкетированием) было охвачено 100 учащихся 10-12-ых классов, проживающих в данной территориальной общине. Опрос проходил по комбинированному принципу, т.е. в нём присутствовали открытые, смешанные и закрытые вопросы. Опрос информантов, т. е. экспертов интервью методом имел свои преимущества и недостатки. Преимуществом можно считать то, что информанты легко включались в разговор, в процессе интервьюирования можно было избежать двусмысленных вопросов, речь экспертов была естественной, живой, выдержана объективность. Однако, к недостаткам интервью с экспертами можно отнести некоторую скованность, робость, поскольку интервью с экспертами проходило в помещении муниципального подразделения той территориальной общины, в рабочее время, по этому в коридоре были слышны голоса и шаги служащих законного учреждения. Интервью с каждым экспертом длилось более часа. Немало времени отняла расшифровка данных, записанных на диктофон.

Оба исследования были проведены в мае 2014 года, при непосредственном участии самих исследовательниц. При проведении исследования авторы придерживались принципов этики: получили соглашение на участие в исследовании, гарантировали анонимность респондентов. Участникам исследования была объяснена цель исследования. Экспертам во время интервью было задано 14 вопросов по соответствующей тематике, а учащимся были розданы анкеты, включающие три типа вопросов и состоящие из 26 вопросов.

Далее авторы данной статьи представляют основные результаты, полученные во время интервью с экспертами. Эксперты отметили, что помощниками общинного центра активизируя социальную коммуникацию между поколениями являются «…активные родители детей, которые посещают школы, семьи, издавна проживающие на территории, изредка молодежь, с целью определить будущую пользу социальной коммуникации между поколениями». Однако, эксперты не отметили помощь из желания самих учащихся общаться и совместно работать с взрослыми на благо укрепления мостов между поколениями.

Более мотивированными членами территориальной общины, по мнению экспертов являются сами учредители (инициаторы) общинного центра, которые стремятся путем социальной коммуникации воспитывать чувство коммунитарности (общности), «…создать условия, позволяющие раскрыть творческие таланты различным поколениям, развивать

способности, самореализацию при социальной коммуникации», «…поощрением участвовать в построении моста между поколений являются современные танцы, вокальные ансамбли».

По мнению экспертов, т. е. самых активных организаторов социальной коммуникации в общении, на помощь в развитии социокультурной деятельности «…приходят будущие специалисты-социальные педагоги, социальные работники, с целью по глубже познать суть общинной деятельности различных поколений, чтобы в дальнейшем полученные знания могли быть использованы в профессиональной работе». Инициаторами построение «моста» между поколениями являются жители старшего поколения. Так действовать их поощряет моральное удовлетворение, «потребность к самореализации, общению», по их словам «…работать добровольцем приятно, делать полезные дела», «…хочу осуществлять идеи, которые для меня очень интересны», «…хочется общаться, встречаться с соседями, старыми знакомыми, знакомиться с их детьми», «…активно участвовать в социальной жизни общины».

Распространение информации о возможностях социальной коммуникации в общении по словам экспертов-информантов возможно при помощи Итернета: «информации достаточно, в тои числе и для молодых людей», «объявления есть, а вот желания встретиться в общинном центре – нету», «информации достаточно, но люди скептически к ней относятся, даже критикуют организаторов за инициативу общаться поколениями», «учащиеся приходят на общие мероприятия только тогда, когда это организует классный руководитель».

Потенциальные участники – «строители мостов» между поколениями – «члены общинного центра», «активные учителя местных школ: полезно раскрыть свои возможности, почувствовать себя полноценным человеком», «…ученикам общественно полезная работа включена в программу информативного просвещения», «…пожилые люди, которые всю жизнь были активными общественными деятелями».

Причинами, мешающими восстановлению социальной коммуникации между поколениями, по мнению экспертов-участников интервью является не заинтересованность молодежи в жизни и деятельности старшего поколения, «…молодые люди не находят времени для того, чтобы поинтересоваться, избегают контакта со старшими», негативное мнение молодых о старших: «…старшие уже не в силах, пусть лучше они сидят дома…», «мнение старших уже устарело». Исследование раскрыло недоверие со стороны старшего поколения к молодым, категорическое общение: «…старшие владеют свойственным им чувством недоверия к молодёжи», «…слишком игнорируют молодых», «…старшее поколение склонно руководить молодым поколением, указывать, не считая молодых своими полноценными партнёрами в общине».

Интервью с активными деятелями-экспертами работы в общинном центре показала, что мероприятиями, сплачивающими поколения являются: подготовка социальных проектов, «расширяется мировоззрение, кругозор, умение общаться», акция «банк пищевых продуктов»: «…удовольствие при участии, в процессе сбора продуктов…», субботники: «…позволяют поколениям пообщаться, почувствовать себя наравне», «…улучшаются мнения друг о друге», «…спортивные состязания, походы, «…для построения моста между поколениями очень полезны общие культурные походы, экскурсии, праздники».

Качественное исследование выявило причины кратковременности общения между поколениями: первой причиной информанты указали на недостаток волонтеров или профессиональных работников, которые занимались бы сплоченностью поколений путем разновидной деятельности: «…нет человека, который горел бы энтузиазмом, вдохновлял, поощрял, предлагал новые идеи…», «…сама молодежь могла бы быть активнее». Кратковременное общение поколений обуславливается отчуждением, отсутствием основных ценностей, элементарной культуры, отсутствием модели удачный современной семьи: «…нет семейных традиций по отношению добрососедства социального партнерства между поколениями», «…родители не передают свой положительный опыт общения между поколениями». Обобщая качественное исследование-интервью с экспертами отметим, что она помогло раскрыть положительные черты совместной деятельности поколений в общине, а также выявить препятствия, затрудняющие найти более конструктивный диалог между поколениями в территориальной общине.

Основные результаты опроса учащихся показали, что только 51 проценту пришлось участвовать на некоторых мероприятиях общины, 30 процентам учащихся – ни разу. Часто в деятельности общин из опрошенных учащихся 10-12-ых классов в деятельности приходилось участвовать только 19 процентам.

По мнению учащихся школ территориальной общины, люди старшего поколения с ними не дружественны. Респонденты это мнение подтвердили следующими признаками: 20 проц. - ноют, жалуются, выражают недовольство, 25 проц. - необщительны, 15 проц. - заботливые, 5 проц. - душевные, 13 проц. - хорошие, 10 проц. - дружные, 7 проц. - злые, 5 проц. - недружные.

Сами учащиеся 10-12-ых классов X общины заявили, что только 28 проц. принимает участие в организуемых субботниках, 28 проц. помогает подготовить мероприятия общинного центра, 2 проц. помогает организовать благотворительные акции, а 29 проц. подтвердили, что в работе местной территориальной деятельности участия не принимают, потому что не имеют на это времени, 12 проц. не участвуют в деятельности общинного центра потому что им неинтересно. Только 22

проц. школьников заявило, что участие в совместной деятельности со старшими позволяет поближе познакомиться со старшим поколением. 15 проц. учащихся на общую со взрослыми деятельность привело любопытство, 9 проц. - желание найти друзей.

Выводы
Conclusions

Обоснование представленных результатов исследования, опираясь на теории социальной коммуникации, которые отличаются такими параметрами как: знаниям о психо-культурной, социо-культурной и культурной среде: мотивация общаться и сотрудничать, основанная на ценностных установках; компетенциями общаться и сотрудничать как во внутренних, так и наружных сетях.

Социальное явление обшей деятельности разных поколений существует в том случае когда поколения имеют общие цели и стремятся к ним в обшей деятельности.

Исследование показало, что возможности общей деятельности различных поколений существует в таких сферах как: волонтерская работа с пожилыми жителями общины, при подготовке общих проектов, в культурно-просветительной деятельности, спортивных состязаниях.

Успех этой совместной деятельности в общине, судя по результатам исследования, обуславливает особенности межпоколенного общения, такие как – обоюдное уважение, толерантность, равноправность в общей деятельности поколений в территориальной общине. Исследование показало, что учащихся старших классов, как представителей Z поколения N общины не так охотно принимают участие в совместной деятельности по месту жительства, как этого хотелось бы старшему поколению. Исследование выявило некоторые аспекты конфликтов между старшим поколением и поколением Z территориальной общины: недоверие к молодому поколению, недопонимание, недооценка, отсутствие толерантности.

Исследование выявило, что упадок фундаментальных моральных ценностей в семьях, индивидуализм, потребительская культура, отчужденность, цифровая социализация являются теми основными причинами проблем, тормозящими построение прочного моста между поколениями в территориальной общине.

Summary

The article presents research methodology, which is based on the theory of social communication that distinguishes in the following parameters: knowledge on psycho-cultural, socio-cultural and cultural environment; motivation for communication and collaboration that is based on value attitudes; communication competences and collaboration both in external and internal networks.

The research disclosed that possibilities for joint activity of generations reveal in such areas as volunteers' work with elderly members of a community in preparing common projects, culture-education activity, sporting events. Referring to the research results it is evident that the success of the joint activity of generations is determined by mutual respect, tolerance, equality in solving community problems.

The research showed that the pupils from senior forms (the Z generation representatives) do not willingly take part in the joint activity with elderly people; the grown-up members of a community would highly appreciate.

The research disclosed certain conflicts among generations in a community: distrust of the elderly people in senior pupils, incomprehension, misjudgment of youth possibilities, and the lack of tolerance.

The research showed that the lack of fundamental, moral values in families, individualism, and consumer culture are the main reasons that impede the building of 'the bridge' among generations.

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MYTHS IN CONTEMPORARY UPBRINGING IN A FAMALY

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Abstract. *Family discourse has been topical in all periods of anthropogenesis; also nowadays it hasn't lost its topicality because family is declared as one of the principal values also in this period. Family structure (number of parents and children) is emphasised mainly in contemporary public discourse about a family. Concurrently it is discussed unconnectedly in the public discourse on different kinds of children behavioural difficulties. In this discourse, an important family function – upbringing is disregarded. Aim of upbringing is improvement of attitudes by cooperation of all participants of upbringing in the upbringing environment. Children perspective idea is the leading one in the postmodernism leading pedagogical paradigm that has become the ruling one in the theory and practice. Irrespective of the declared humane principal approaches and principal values myths manifest in the public discourses and in the upbringing area in a family that are made legitimate. Myths develop actively in places where there is lack of information and knowledge and where it is necessary to maintain a sense of safety and emotional balance. So innovative processes of contemporary society activate also the issues on place of myths on the upbringing process.*
Aim of the article is to analyse theoretically the subjective and objective provisions for creation of myths, their importance in the upbringing process in a family, outlining the risks in upbringing.

Keywords: *upbringing in a family, myths in upbringing, pedagogical trend, family.*

Introduction

Family and upbringing in a family cannot be analysed separately from the understanding of the particular persons (family members) on this social unity. D. Matsumoto related the upbringing in the family also with the social context, emphasising that upbringing is related with understanding of the particular society on the purpose of personality development (Matsumoto, 2000). Also L. Juang and R. Silbereisen emphasise that upbringing is to be analysed in the particular social context that is named by the authors as the social niche (Juang & Silbereisen, 1999). V. Maksakova emphasises that a child in contemporary family perception is regarded as an active partner in the upbringing process (Максакова, 2008). This opinion is substantiated by V. Maksakova in the philosophical traditions of anthropology – a person in a unique entirety, but upbringing process – a specific type of human existence and special life action of a person the essence whereof is cooperation pointed to self-completion. That is why the needs and abilities of a person to take part actively in the upbringing process is one of the basic principles of this contemporary upbringing direction. The competence of parents in upbringing improves during the life action (Максакова, 2008). N. Peseshkian regards that upbringing firstly

is the understanding of parents about their behaviour and its consequences (Peseshkian, 1987). Respectively, to implement the ideological concept of contemporary upbringing in practice, one must start with self-awareness, reflexion and self-criticism (Rubene, 2008) or social facilitation of pedagogical thinking (Böhnisch, Schröer, Thiersch, 2005) that activates the importance of self-education of a person. However, self-education of people in Latvia is still a new and unclear social construct. On the one hand, there are many discussions on problematic behaviour of children, diagnosis (e.g. diagnoses "hyperactivity", "autism spectrum disorders") and different artificially created social statuses ("indigo children", "crystalline children") are inadequately used in the pedagogical practice, but the issue on upbringing and self-education in not included in this discourse. Belief system of parents on the upbringing of children is created by their views on child's development, on social place and role of a child in the society and family and understanding on their own personality and behaviour. If these views are blurred and expectation as to the development and child's personality and upbringing process in general don't match with the reality, disappointment develops in parents. Disappointment is an emotional state that most frequently justifies the disinclination to act, respectively, disinclination to assume responsibility. Disappointment acts as an initiator of psychological safeguard mechanism, in the result of it myths in upbringing are created or maintained.

In the theories of mythology (Bart, 1957, Hubner, 1985, Losev, 1994) it is regarded that a myth is a wide culturologicalsense that includes the understanding of world's being, it exists in the cognition of each person including the opinion of a person about himself/herself, other persons, environment and historical time. In the source of anthropogenesis myth occurred as a type to explain the world and place of a person in it. This explanation was a construct of understanding of a person that is why it not always justified the reality and the explanation has an allegoric and symbolic importance. From the very beginning myths explained important information through symbolic figurativeness. Myth didn't become a scientific and conceptual form of representation of reality because it didn't have an analytically synthesised vision of the world, but it had an absolute matrix. Also nowadays there exist and are created myths in upbringing perhaps because a myth has an absolute matrix also nowadays irrespective of scientific vision of the world and fundamental changes in the understanding of the world. They are construed and legitimized by postmodernism ideas and rapidly growing mobility of persons, contemporary types of communication, and subjective comprehension-incomprehension of oneself and the world. In the result of it new myths in upbringing increasingly occur.

Postmodernism situation and challenges created by ordinary upbringing create a necessity to analyse theoretically the creation of myths in upbringing,

the subjective and objective conditions of their development, their importance in the upbringing process in the family.

Subjective level of myths development

Family myths and legends are important in family morphogenesis. Family myths is a definite unconscious agreement among the family members that maintain the unity of a family and regulate the family provisions (Черников, 2005, Эйдемиллер et al., 2006). At family level, myth creates inadequate views of family members about their own group (Эйдемиллер et al., 2006). Function of a family myth is to hide a deniable information about a family member or the whole family from the cognition by creating a positive vision of an event (Stierlin, 2001). Family myth is a specific protective mechanism that ensures the entirety of a family (Stierlin, 2001, Эйдемиллер et al., 2006). Myths are characterized by irrationality therefore they limit the possibilities of a family to solve difficulties (Шнейдер, 2007). A myth can exist in a functional and dysfunctional family (Черников, 2005). When analysing the importance of a family myth, E. Eidemiller, I. Dobryakov and I. Nikolskaya specify that myths are topical in all family development cycles, but they are most necessary when a third person enters into the family, during serious social changes or in case of family dysfunction (Эйдемиллер et al., 2006, Лидерс, 2008). A. Napier and K.Whitaker emphasise that, when accumulating, myths so significantly raise the level of anxiety and/or wish for the freedom that family members cannot afford to confess in the mtyh (Napier & Whitaker, 1988). H. Stierlin divides myths as follows: harmonizing, apology, reconciliation and saving myths (Stierlin, 2001).

Family myths inhibiting aspect is that a family gets rigid and resists the changes that are determined by the changes of family life cycle. In the first generation, for example, a myth ensures a compensating strategy that a response to past problems, thus activating a huge, but real accomplishment motivation. However in each following generation this myth is more and more separated from the reality and it increasingly deliberately moved. This can cause serious narcissistic disorders of family members and/or incite to unproductive activities (Олифрович et al., 2007). So content of a myth in the following generations may be obstructive for development of family functions because it causes an inadequate self-perception and unproductive behaviour patterns, although in the first generation a myth had a protective function.

Family legend is defined as true or fictional interpretation of individual facts of family history that allows maintaining the myth of the 'correct, successful, heroic, friendly, loving' family. A legend also has a protective function and it can refer to micro, macro and individual family functioning level (Эйдемиллер et al., 2006). Legend, unlike a myth, has an intentional character, it is accepted as truth or misrepresentation of information.

Another phenomenon of psyche gives raise to myths. Structures and models of dynamic cognition that determine the understanding, interpretations, values, aims and strategies in upbringing of children reduce the uncertainties and adapt child's development with the upbringing implemented by the parents to their understanding about upbringing and life in general (Harkness et al., 2000). So parents may adapt the specific features of child's development, behaviour and relations to their understanding about these issues; such solution of situations gives raise to myths because it denies reality.

Objective level of myths development

Postmodernism includes the ideas of pluralism, democracy, liberality, freedom, consumerism, varied information, entertainment, mobility, choice. Dynamic uncertainty of contemporary world determined not only the skills o manage this situation, but paralelly also skills and dare to maintain personally important values, irrespective of the fact that traditional and classical perceptions and concepts are impulsively interpreted. Concurrently with constructive, creative manifestations, postmodern perceptions outlays also trends that indirectly changes the perceptions about a family and upbringing because anything can be deconstructed, mixed, levelled, mocked, disarranged, fragmented from the postmodern point of view. People get concepts on current events and leading ideas in contemporary science or particular scientific discipline from public discourses. Nowadays they are mass media that form the views of persons and understanding on a particular issue, because in accordance with the idea S. Moscovici, social perception of journalists as representatives of mass media is generalized in the society, including also about the upbringing. Social perceptions occur by integrating the new information by way of communication in new knowledge (Moscovici, 1981). Public discourse forms mediated and often uncritically the attitude of a person towards himself/herself, others and the world, including the upbringing. This combines different experiences, opinions of upbringing, but often fails to include methodological and axiological principles that allow a person to act freely and manifest reflection of activity in relation to the upbringing thus creating an illusion of consent and in the result – imitation of the upbringing process. Therefore upbringing experts shouldn't simulate the illusion and irrationality. This fact on principle burdens the (implicit-explicit) complicated way of transfer of most important upbringing values from one generation to the other, because first, parent may have a unilateral view on the essence of upbringing or they get confused in the diversity and ambiguousness of opinions, secondly theoretical cognitions are detached from ordinary practice because representatives of mass media perhaps have a tendency to interpret and put accents in upbringing issues within the framework of their understanding that not always is scientifically and rationally justified. Thirdly, experts in upbringing that are chosen in the

particular discourse do not correspond perhaps to the status of an upbringing expert and thus parents receive unprofessional explanations. Besides, it must be taken into account that there are professionals in Latvia who support and postulate focusing on intuitive searches of spirit essence of a person (Reņģe & Austers, 2008). In everyday situations these persons don't notice the not very rational nature of their thinking (Kahneman & Tversky, 2000) thus facilitating the scientific illiteracy in the society (Miller, 2007). In pedagogy it is called theorization of one's experience, namely, conditional new construction of subjective ideas that includes an authority subject to conditions and subjectivity in perception about *conditio humana* (Winkler, 2006). Thus subjective hopes and views on results and consequences are offered instead of theoretical advances (Winkler, 2006).However, it must be admitted that this situation is not unequivocal, because on the one hand public discourse forms the social perceptions of persons about the upbringing, but on the other hand public discourse activates those issues which the society expects from them. Thus the public discourse activates the expectations and understanding of the society.

Consequently, mythology in contemporary upbringing created by the public discourses marks risk, because it has become one, but important developer of basic attitudes of cognition of the society. In the result there is risk that mythism in upbringing can increase because the information gap phenomenon is created (Frith, 2000). Information gap in the upbringing discourse means influence of unilateral and ambiguous information on perception and knowledge of parents about the upbringing they implement in the life action of the family. Respectively, perception and volume of knowledge in one part of society increase (those who know another language, are interested to search for other information resources), but decrease in the other part (those who use only one mass media, don't know other languages), in the result the knowledge gap between different social groups increases. Consequently communication potential is created (Mqueil & Windhal, 1993). This includes totality of properties and/or factors that determine the skills of parents to handle information thus facilitating or hindering the communication (Mqueil & Windhal, 1993), in case of upbringing implementing or not implementing the offered professional information in the ordinary upbringing process. So, on the base of specific influence of contemporary public discourse on formation of understanding, knowledge and attitudes of members of society, this situation increases the risk that a vicious circle develops in the upbringing (Medne, 2012). It can develop because, firstly, contemporary mythism gets deeper – myths are created where there is lack of information, perception and knowledge (Raipulis, 2008) and they legitimize irresponsibility in the upbringing. Perhaps it is connected also with the ideas of radical humanism that postulate mysticism and occultism becoming more topical in Latvia (Reņģe & Austers, 2008). But mythism facilitates creation of products of pedagogical fashion. In the result artificially and uncritically formed peudosocial statutes (indigo children,

crystalline children) and pseudovalues in upbringing are legitimized, but the issue of family and upbringing is left in second plane in this situation (Mollenhauer et al., 1978, Bergmann, 2006, Raipulis, 2008). Such social phenomena as pedagogical "fashion" are not accidental, they cannot be ignored (Bergmann, 2006). E. Pikler calls such action of parents as illusion of parent's pride because they proudly postulate that their children are more special instead of looking for causes or analysing children's behaviour (Pikler, 2007).

Myths in upbringing can be created also from scientific cognitions, such as limited understanding of dialectic methodology or unskilful interpretation of the obtained data levels the pedagogical situation to statistical data and isolates it from side factors. Dilemma is in the fact that when empirics and data turn, tradition of understanding of ideas gets lost from the point of view of science, respectively, with all empiric research data of pedagogical phenomena one cannot understand anymore what characterizes them as pedagogical phenomena; research obtains important knowledge on schools, kindergartens and families, but cannot formulate none of assertions on practical reality of upbringing where its participants are involved as actors (Winkler, 2006). Such myths facilitate inadequate expectations of parents as to positive changes in development of personality, unilateral understanding of upbringing contradictions, conflicts and difficulties in upbringing as negative and unproductive phenomena. This is perhaps M. Winkler states an opinion that "as trivial it would sound: scientific discipline and profession, teachers who work practically and theoreticians of this field must have an idea of what they are talking about, what they research theoretically or empirically" (Winkler, 2006). Therefore the upbringing discourse should create real base for vision of the world, social ideal, real vision of child's future portrait that would stimulate parent to assume responsibility for their decisions with a real purpose and upbringing methods to reach this aim. For this to happen, scientific contemplations about pedagogy, upbringing theory, pedagogical reflexion must create the readability of the works, so it is connected with texts and reflexion that works already in the approximate and strange because it thematizes limits and draws attention to border crossings (Dux, 2000).

Conclusions

Theoretical analysis of problem stimulates to draw a conclusion that myths in upbringing

- are connected with perception of public discourse on the essence of upbringing process and aim thereof by directing the perception about the upbringing in a family,
- manifest as important regulators of parents' behaviour in the upbringing process by attributing a particular meaning and direction to the upbringing,

- are not accidental products of unconsciousness, but are a type of perception and implementation of knowledge, but they are not rationally justified and works as a psychological self-protection mechanism.

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SOCIAL PEDAGOGY IN RUSSIA: TRENDS, PROBLEMS, IDEAS

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Abstract. *The given paper is concerned with holistic approach to social pedagogy in Russia. It covers the key trends in development of social pedagogy over the last 25 years. The main objective of the given paper is to give coverage to the researches that make significant contribution to development of social pedagogy in Russia. The author of the article highlights the key directions of the researches in the domain of social pedagogy, such as providing scientific grounds for the new direction of pedagogical knowledge, creation and development of schools of thought in social pedagogy, specific features of socialization of a growing personality, content and techniques of professional social education. The author states that only studying positive experience is the way to solving the problems that modern social pedagogy faces nowadays.*

Keywords: *helping pedagogy, paradigm, public assistance system, re-socialization, socialization, social education, social pedagogue, social pedagogy.*

Introduction

In modern Russia, social pedagogy, treated as a social and humanitarian science that investigates problems of interrelation between personality and society, is one of the key directions in the development of modern pedagogical thought. Pedagogical activity in modern education is undergoing significant changes. In particular, we can witness reorientation from knowledge-based approach to personality paradigm, underpinned by humanistic values. In this respect, the key aspect of education is to encourage children to find their bearings in lives, in the field of self-organization rather than acquire sound factual knowledge in various subject areas and about different world phenomena.

The relevance and high priority of social pedagogical approaches has been stated by the Government of Russia and the mechanisms of education development are declared on the nation-wide scale. It is the question of socio-cultural modernization of education, development of social competence and encouraging initiative of the Russian youth in various spheres of economy and social life. This approach also deals with creating social pedagogical conditions for preparation of children to professional identity and life self-determination; with interdepartmental integration in holistic (city, rural) educational space, social partnership and state-public poly-subject mechanisms of developing educational system in the open socio-cultural environment; social pedagogical

support of family and personality at various stages of its development, groups of social risk and some other related issues.

Due to a number of complicated issues that underpin development of social pedagogy in Russia, it is relevant to give a review of the modern trends in this domain of national and cross-national studies. The main objective of the given paper is to give coverage to the researches that make significant contribution to development of social pedagogy in Russia. I am absolutely sure that only studying and sharing positive experience is the way to solving the problems that modern social pedagogy faces nowadays.

Theoretical Grounds of Social Pedagogy in Russia

Social pedagogy in modern Russia has recently faced a wide range of problems and challenges which didn't use to be on the agenda of society and are bred by new social conditions of life. Nowadays, a considerable number of topical issues are in the focus of its attention, namely: the problems of personal deadaptation and social maladjustment to ever changing conditions of life in society; lack of harmony in relations between a man and society; educational inconsistency and upbringing failures of some parents; interethnic tension, conflicts of interethnic kind; low level of culture, poor erudition and bad manners; dehumanization of public life; lack of continuity in various branches of industry and social sphere; overcoming youth infantilism; deformed relations within families and breaking good neighborly ties; social ill-being of children and family problems.

Social pedagogy in Russia as a science and branch of education elaborates progressive ideas of pedagogy that date back to the beginning of XXI century, integrating them with foreign experience. To certain extent, it has the status of developing natural experiment so far. Nevertheless, modern state of social pedagogy in Russia is characterized by a variety of approaches to definition of its frameworks, goals and objectives. Thus, social pedagogy is understood as one of the functions or directions of social work (I.A. Zimnaya, 1992), theoretical background of the trade "social work" (Bocharova, 2004), a part of general pedagogy focused on problems of social education (Mudrik, 2010; Semenov & Wulfov, 1981).

In the framework of establishing social pedagogy as a science at the present stage of its development certain vectors can be mentioned: theoretical and methodological problems, in particular, definition of the subject of social pedagogy in the concept by A.V. Mudrik (Mudrik, 2010) which is based on the approach by German professor P. Natorp. Definition of socialization and the role of personality in this process are considered in researches by F.A.Mustayeva (Mustafayeva, 2001) and V.A.Nikitin (Nikitin, 2002).

Doctoral thesis by V.G.Bocharova became the first research which at the beginning of the 1990s enabled to lay foundation of social pedagogy in Russia

in conditions of the new reality. Publication of the book "Pedagogy of Social Work" (Bocharova, 1994), supported by Soros Foundation, is the proof of this fact. In 2001 V.G.Bocharova together with I.A.Lipsky (Bocharova & Lipsky, 2001) published a teaching manual called "The main directions of scientific researches in the field of social pedagogy". According to the authors, they include:

- socio-cultural concept of development of socially focused pedagogical phenomena, systems and processes;
- "personality – society – activity" based concepts of scientific knowledge and transformation of socially significant pedagogical practice;
- functional concept of methodological analysis of socially focused pedagogical knowledge;
- the concept of social development focused on personality and setting;
- problem and activity based concept of social development of various groups of the population;
- the concept of poly-functionality of socially focused pedagogical theory and practice;
- the concept of activity based social education and professional training in social sphere;
- the concept of finding scientific grounds fortransformation practice in society (Bocharova & Lipsky, 2001).

Let us dwell onsome relevant issues which the school of thought headed by V.G.Bocharova sets forth. Primarily, they are as follows:

- studying methodological background of social pedagogy, structure and content of it treated as a scientific discipline;
- researches of theoretical and methodological grounds of social education of school children;
- research in to the features of social work in rural society (Bocharova, 2014).

At epistemological level, the optimal model of the development of social pedagogy as a science is connected with studying and scientific substantiation of the spheres of interaction with other sciences and scientific disciplines of higher methodological status (social philosophy, political science, sociology, social psychology, social medicine, social work, pedagogy, in particular, junogogy, andragogy, gerontology).

At the level of the world outlook studies, researches in to opportunities of social pedagogy in terms of getting knowledge about the world and transforming society in changing economic, political, social conditions become relevant.

At logical level, the framework of categories and concepts of social pedagogy is elaborated.

At technological level, existing socially focused pedagogical technologies get piloted, while new ones targeted as various socially significant aspects are worked out and shaped.

At methodical level, work aimed at research into the structure, content, boundaries and rules for application of methods of practical, socially focused pedagogical activity, scientific research, and preparation of experts of social sphere as well as requirements to these methods will be continued (Bocharova & Lipsky, 2001).

To get insight of becoming and development of modern paradigm of social education, we have carried out theoretical analysis of the main researches which findings are reflected in manuals, monographs and dissertations of the end of the XX - beginning of the XXI centuries. Post-soviet period in Russian social pedagogy is associated with emergence and active development of a number of scientific schools, for example, the school of thought headed by S.A. and I.V.Mavrin (Omsk); Novosibirsk scientific school (headed by prof. T.A. Romm and Z.I.Lavrentyeva); Chelyabinsk scientific school (prof. R.A.Litvak); Kostroma scientific school (prof. N.F. and V.M.Basov, A.G.Kirpichnik); Saint-Petersburg scientific school (prof. S.A.Raschetina); Tula scientific school (V.A.Fokin); Mari scientific school (N.S.Morova); Yaroslavl scientific school (prof. M.I.Rozhkov); southern scientific school (prof. T.D.Molodtsova, E.N.Sorochinskaya): Moscow scientific school (prof. A.V.Mudrik, L.V.Mardakhayev).

An outstanding researcher of the Russian Academy of Science, doctor of pedagogical sciences M.P. Guryanova has also made a great contribution to the development of socially significant pedagogical problems. Conceptual approaches to teaching and developing viability of rural school pupils are in the focus of attention of M.P. Guryanova (Guryanova, 2014).

Social education and upbringing seen as "assisting activity" are referred to as socially pedagogical help, socially-pedagogical rehabilitation, correction or social support in various research papers. In other words, scientists are concerned with technologies aimed at organization of help (pedagogically focused, expedient system of public aid) for inclusion of an individual in to social life. As for the main institutions that render social education, they include specialized services, establishments, rehabilitation centers and some other similar institutions (Nikitin, 2002).

A.V.Mudrik was the first to offer the new, updated paradigm of social upbringing. The scientist worked out the theory of social upbringing in the context of cultural shock which is understood as the conflict between old and new cultural norms and orientations of society. It is the conflict between the society that an individual has left and the new kind of society where he/she has arrived. In the monograph "Socialization of an Individual" he supplements the features of the issue under study with the fact that social education and upbringing can take place in criminal and totalitarian, political and quasi-

religious communities. In this connection, de-social and counter-social education types are mentioned (Mudrik, 2010). The renewed paradigm of social education sets forth the idea of multifacetedness of social environment of a person which is revealed in the system of interpersonal relations and communications, in the activity of a person in his/her setting.

The problem of classifying diverse aspects of development of social pedagogy and professional social education on the basis of historical analysis of pedagogical reality in order to forecast their development is still insufficiently resolved. Singling out stages in development of social pedagogy and social professional education and their system analysis make it possible to predict prospects of development of the given field of pedagogical science.

Professional Social Education: the key priorities

Professional social education is in its early days in Russia and is the subject of research of many pedagogues. As for the content of professional social education, it includes: knowledge about individual and group behavior of people (about relations of an individual with social structures and institutions, about participation of a person and public structures in social processes, knowledge of laws and norms of social processes, etc.); knowledge of the theory and practice of social work (principles, means, methods, techniques employed in practical work for achievement of general goals of social well-being or specific objectives for each separate case); particular professional knowledge (specific technologies of social work);

In theoretical aspect, it is necessary to lay grounds for the development of pedagogical technologies of professional social education, first of all, to provide integration of theory and practice. Modular-based training should be based on working out modular blocks of academic courses for experts of social sphere which eventually leads to breaking barriers between different subjects, courses, levels.

In the nearest future we should develop effective technologies and principles of professional training of social pedagogues. Technologies like that include competence-based approach; continuity principle; multi-levelness and gradualness; diversification. They will help to provide development of the basic system of professional social education as long as other principles of development of modern system of professional education are taken into account. These fundamental milestones of professional education are: encouraging initiative; "case work" or social therapy; self-education and self-reflection.

Theoretical background of professional social education in the Russian Federation is based on the system of knowledge about the foundation and structure of social pedagogical theory, principles, approaches and ways of getting the knowledge that reflects social reality as well as the system of acquiring this knowledge and providing grounds for establishing the logic and

methods for estimating the quality of social pedagogical education (Sorochinskaya, 2014).

Some mainstream trends in development of the theory of professional social education typical for the end of XX - beginning XXI centuries can be singled out. They include granting official status to preparation of social pedagogues as a special direction in professional education; increased role of practical activities in preparation of social pedagogues; integration of social pedagogical education into the complete system of pedagogical education in the country; interdepartmental, continuous, poly structural nature of professional preparation of social pedagogues (Aliyeva, 2011; Lefter, 2012).

During the specified period a number of concepts of social pedagogy in Russia were worked out. Let us mention the most significant ones (Sorochinskaya, 2012):

1) the concept of professional readiness that considers professional preparation of social pedagogues as the process of developing pedagogue's personality and social professional position of an expert proceeding from the synthesis of moral, psychological, theoretical and practical (technological) aspects of readiness which provides the necessary level of their professional competence; the concept of regional socially-pedagogical education is based on the complex, multi-level, integrative approach; the key idea is to take into account social order and labor market demand for training personnel resources for enterprises, establishments, firms and different social institutions of the region relying on teaching staff called to provide academic process according to the state standards;

2) "the concept of socialization" based on professional training of social pedagogues for transferring social knowledge and development of socially significant skills that promote socialization of a child; fostering socially significant qualities of children's personalities necessary for successful socialization;

3) "the concept of social didactics" that considers vocational training of social pedagogues as their preparation for social pedagogical support, assistance and consultation of a child proceeding from integration of domestic and foreign experience; it also deals with study of interference of socialization and education by means of analysis of social interaction, communication and behavior of pupils in academic setting; analysis of aggressive behavior of children as a socially pedagogical problem and search for ways to overcoming it; the concept of general professional readiness (as in the case of orthodox higher educational institution);

4) "the concept of social education" which is understood as creation of favorable nurturing conditions for providing positive development of

an individual and a group of future social teachers in their professional training.

Analysis of becoming and development of the theory and practice of vocational training in European countries (Germany. Lithuania, Latvia) proves that they have well-developed sector of preparation of experts to work with physically challenged children, prevention of deviant behavior of children and youth, purposeful work with family, various effective technologies of socially-pedagogical work (Majauskiene, 2008; Juris, 2012; Lelugene, 2014)

Conclusion

Professional preparation of social teachers can be of high quality and effective only if it is based on the consistent theoretical approaches. In this connection, they are supposed to prove to be real insight into specific aspects of professional work of a social pedagogue, the heart matter of social pedagogy as a branch of scientific knowledge and shape the kernel of theoretical preparation of social pedagogues. Integrating role of practice in professional preparation of social teachers is also the issue of special importance.

Professional becoming and further development of the institutions of social pedagogy in Russia assume consecutive solution of a number of problem sat the state, nation-wide level. As the given research has shown, a great deal of unsolved problems mentioned above constrain and make efficient use of all the opportunities offered by this institution quite difficult in modern national practice of social work.

The modern condition of the theory and practice of Russian social pedagogy is characterized by a great variety of approaches to definition of its heart matter, tasks and objectives. Since the beginning of the 1990s, some models based on continuity of the historical experience of Russian charity institutions and development of public tutorship were defined. Modifying European and American models of socially-pedagogical work and combined models combining the elements of both are actively elaborated. Social policy of childhood at the state level contributed to creation of the infrastructure for the state support of family, motherhood and childhood. The following tendencies of development of the theory of professional social education in Russia at the end of XX - beginning XXI centuries can be referred to: registration of vocational training of social teachers in the special direction of education; high priority of practical activities in preparation of social teachers; integration of socially-pedagogical education into a complete system of pedagogical education in the country; giving to vocational training of social teachers of interdepartmental, continuous, poly-structural nature.

Professional becoming and further development of institution of social teachers assumes development of network interaction as important source of exchanging positive experience in conditions of social differentiation, development of joint complex programs that can effectively counter the

challenges of the XXI century and lead to improvement of quality professional socially - pedagogical education.

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SOCIĀLĀ DARBINIEKA PROFESIONĀLĀS KOMPETENCES PILNVEIDE DARBAM AR SOCIĀLĀS ATSTUMTĪBAS RISKA JAUNIEŠIEM

The Development of Social Worker's Professional Competence for Work with Youth Exposed to the Risk of Social Exclusion

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Abstract. *The dynamic transition to a knowledge society, the growth of quality, quantity and volume of knowledge, technological, global scale (globalization) of political and social processes, as well as demographic changes are new challenges which require a new approach that involves all educational stages during the whole human life. The development of social worker's professional competence for work with young people exposed to the risk of social exclusion must be perceived multilaterally in contemporary Europe. They must be viewed in relation to the cultural diversity of people's economic and social rights, human rights, equality and gender equality of rights. The development of social worker's professional competence for work with young people exposed to the risk of exclusion does not mean only teaching, but it also includes life-long learning, mobility, integration, continuing education and other areas. The improvement of social worker's professional competence for work with young people exposed to the risk of exclusion is observed in adult activities related to professional activities. Analyzing the concept of competence, it is important to emphasize the idea of competence as the basis of an independent thinking and acting.*

Keywords: *development of professional competence, Socio-pedagogical work with young people exposed to the risk of social exclusion.*

Ievads
Introduction

2002. gadā Latvijā tika izveidots pamatdokuments *Baltā grāmata*, kurā Latvijas sociālās labklājības sistēmas reformas gaita tika balstīta uz situācijas un tās perspektīvu izvērtējumu, noteikti attīstības mērķi, stratēģiskās ievirzes un uzskatu kopumi nākotnē izvirzāmajām prasībām. Cilvēka pilnvērtīga attīstība notiek sociālajā vidē, pārņemot apkārtējās sociālās vides pieredzi, tiek apgūtas zināšanas, attieksmes, prasmes, veidojot vērtību orientācijas uzvedību, bērns apgūst sociālās lomas (Špona, 2006). Sociālpedagoģiskās palīdzības uzdevums ir samazināt vai likvidēt jauniešu attīstības nepilnības, veicot mērķtiecīgu veicināšanu grupu darba vai individuālās palīdzības formā. Pētījuma mērķis: izpētīt sakarības starp sociāli atkarīga jaunieša vēlmi socializēties un sociālā darbinieka piedāvāto sociālpedagoģisko palīdzību.

Kompetences jēdziena vēsturiskā attīstība
Historical development of the concept of professional competence

Kompetenču attīstības teoriju Latvijā ir pētījusi I. Tiļļa monogrāfijā „Sociālkultūras mācīšanās organizācijas sistēma", kurā atzīmē, ka zinātniskajā literatūrā kompetences kategorijas lietošanai pedagoģijā nav vienotas izpratnes un skaidrojumos to lieto gan kā spēju kopu, gan kā darbības rezultātu (Tiļļa, 2005). Nozīmīgu ieguldījumu kompetenču pētniecībā Latvijā ir devusi Ineta Kristovska disertācijā „Tālmācību studiju atbalsta sistēmas pārvaldība pieaugušo kompetenču pilnveidošanas procesā", kurā akcentē to, ka viens no aktuālākajiem mūsdienu sabiedrības jautājumiem ir pieaugušo kompetenču (kompetence – nepieciešamās zināšanas, profesionālā pieredze, izpratne kādā noteiktā jomā, jautājumā un prasme zināšanas un pieredzi izmantot konkrētā darbībā) pilnveide. I. Kristovska pievērš uzmanību pieaugušo kompetenču attīstībai, lai nodrošinātu to pilnveidošanos atbilstoši katra individuālo vajadzību apmierināšanai visa mūža garumā (angl. lifewide and Life-long), tāpēc jāmaina izglītības saturs, forma, metodes, līdzekļi, to pārvaldības koncepcijas un principi. Kristovskas pētījumā tiek akcentēta doma, ka mūsdienās pieaugušo izglītībā būtu nepieciešams veidot un attīstīt šādas kompetences: pašizziņas, sociālās, komunikācijas, profesionālās un tehniskās, pārvaldības kompetences (Kristovska, 2005).

Sākotnēji tiks apskatīta kompetences jēdziena vēsturiskā attīstība, kas apkopota 1. tabulā.

1. tabula. Kompetences jēdziena vēsturiskā attīstība

Autors	Atziņas par kompetences jēdzienu attīstību
Giesecke,1987	Pedagogs Gīzeke runā par sociālā pedagoga kompetencēm, viņš tās iedala pedagoģiskajās kopetencēs un kompetencēs, kuras, galvenokārt, nepieciešamas sociālajā darbībā
Geißler & Hege,1999	Sociālpedagoģijā kvalifikācijas pamatā ir trīs kompetences: instrumentālā, refleksīvā un sociālā.
Špona, 2001	Kompetenci saista ar cilvēka pieredzi, ko nevar uztvert standartizēti, jo mainīga ir pati sabiedrība. Pieredzes bagātināšana veicina profesionālo kompetenču attīstību.
Tiļļa, 2003	Uzskata, ka kompetences būtība ir gatavība dzīvesdarbībai, tā atklājas gan procesuāli (spēju un iespēju potenciāls darbībai), gan rezultatīvi (darbības kvalitāte un pieredze).
Laiveniece, 2003	Par kompetenci sauc kvalitatīvu prasmju izmantojuma līmeni, kurš nepārtraukti tiek pilnveidots un kuru iespējams sasniegt, aktīvi darbojoties un sistemātiski izmantojot savas spējas, zināšanas un pieredzi.

Sociālā darbinieka profesionālās kompetences pilnveidē darbam ar sociālās atstumtības riska jauniešiem ir novērojamas pieaugušo darbībā, kas saistās ar profesionālo darbu. Patstāvīgas domāšanas un darbības pamats definējams kā

personas sevis organizēšanas dispozīcijā darboties garīgi un fiziski, lai risinātu konkrētas problēmas. Lai radoši atrisinātu problēmas, šī dispozīcija spēj apvienot personas motivācijas, emocijas, spējas un profesionālo pieredzi, kā arī visas kompetences – profesionālās darbības integrējot tās vienotā gribas ierosmē un veiksmīgi realizējot savu rīcību: lemtspēju, gatavību novitātēm, gatavību grūtībām, vēlēšanos izveidot, mobilitāti, enerģiju, iniciatīvu, optimismu, sociālās saistības, atjautību, mērķtiecīgu darbību, konsekvenci, neatlaidību. Šādas kognitīvās kompetences – vispārēju inteliģenci, darbības inteliģenci, praktisko inteliģenci, garīgo elastīgumu, komplekso domāšanu, koncentrēšanos un vērīgumu, plānošanu un vadīšanu, aktīvi darbojoties un sistemātiski, izmantojot savas spējas, zināšanas, pieredzi.

Izstrādājot sociālā darbinieka profesionālās kompetences pilnveidi darbam ar sociālās atstumtības riska jauniešiem, akcentētas vairākas darbības pamatkompetences (skat. 1. tabulu), kuras var dēvēt par profesionālās kompetenču pilnveides klasēm: personālās, darbības un pārmaiņu, profesionāli metodiskās, sociāli komunikatīvās kompetences. Kopumā šīs kompetences veido metakompetences, kas uzskatāmas par pamatkompetencēm.

Galvenās problēmas, ar kurām ģimenes nonāk dienas centrā ir konflikti un vardarbība ģimenē, nespēja nodrošināt bērniem droši vidi, sociālo prasmju un iemaņu trūkums. Atstumtību veicinošs faktors ir negatīvs psiholoģiskais klimats skolā un ģimenē, psihiskās attīstības traucējumi dažādos vecumposmos, bērna personības iezīmes, psiholoģiskās barjeras, komunikācijas traucējumi saskarsmes procesā, vajadzības un to apmierināšanas neiespējamība un ierobežota pašizteikšanās. Kaut arī sociālā darba speciālistu skaits pašvaldībās ar katru gadu pieaug, tas joprojām nav pietiekošs, kā arī tikai nepilnai trešdaļai speciālistu ir atbilstoša izglītība. Liela daļa sociālā darba speciālistu praktizē arī nevalstiskajās organizācijās, valsts un pašvaldību sociālo pakalpojumu sniedzēju institūcijās – dienas centros, krīzes centros, ārstniecības iestādēs, probācijas dienestos, ieslodzījuma vietās, sociālās aprūpes un rehabilitācijas institūcijās u.tml. Sociālā darba speciālistu profesionalitāte un kvalifikācija lielā mērā ietekmē dažādu iedzīvotāju grupu sociālo problēmu (atkarības no alkohola, narkotikām, vardarbības ģimenē, klaiņošanas, u.c.) risināšanas pakāpi. Īpaši aktuāli ir strādāt ar ģimenēm, kurās ir bērni – sociālo grupu, kura visbiežāk pakļauta sociālās atstumtības riskam. Ļoti būtiski, lai sociālais darbs ar ģimenēm un bērniem tiktu attīstīts tieši sociālajos dienestos, kas bieži ir vienīgā institūcija pašvaldībā, kas nodrošina šo pakalpojumu.

Sociālpedagoģijas darbības koncepcija ar sociāli atstumtiem jauniešiem
Implementation of social pedagogics concept with socially rejected youth

Sociālā kompetence ir spēja iejusties un izprast klienta vajadzības un prasības, kā arī pārdomāt situāciju un tās priekšnoteikumus, nezaudējot pārskatu (Plaude, 2003). Sociālās kompetences gadījumā sociālais darbinieks strādā,
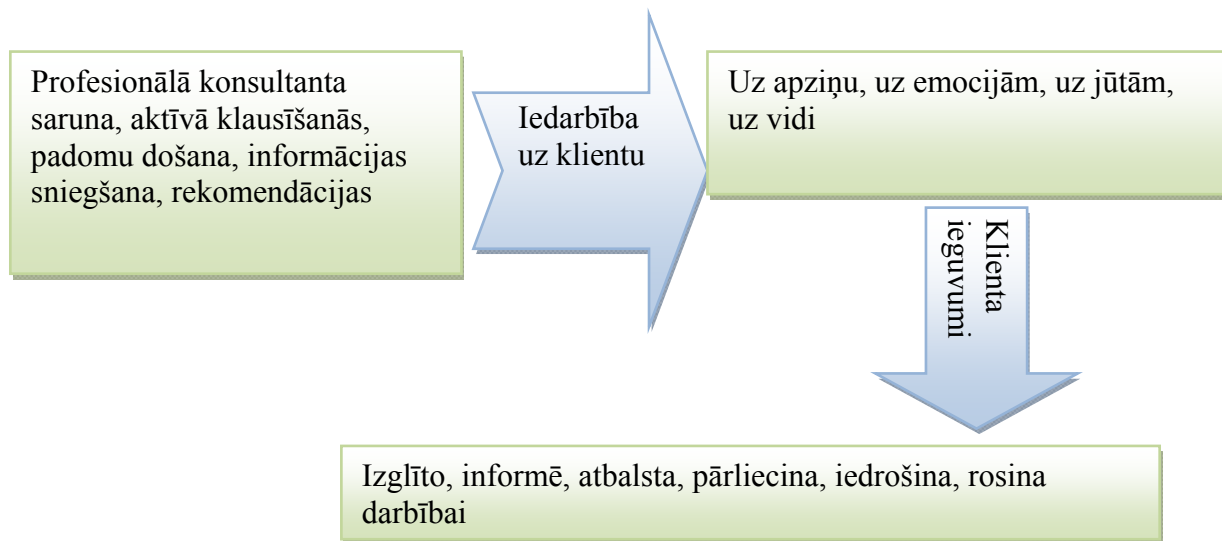
galvenokārt, ar aktuālo pieredzi. Svarīgi ir tas, kas notiek tagad un šeit. Sociālo kompetenci var apgūt studiju procesā, mācoties pēc modeļiem, pārspriežot attiecību konfliktus, asimetriskas komunikācijas struktūras un lomu sadalījumus. Tomēr pilnībā sociālā kompetence attīstās tikai profesionālajā darbā, tādēļ ir nepieciešama tālākizglītība.

Sociālpedagoģijas prakses darbības koncepciju pamatā ir profesionālās darbības formas ierosme, veicināšana un konsultācija, kas blakus mācīšanai, audzināšanai un pārvaldei pieder pie sociālās pedagoģijas pamatuzdevumiem (Plaude, 2003). Praktiskas konsultēšanas darba prakse ietver sevī daudz vairāk par informācijas sniegšanu. Tas ir process, kurā domas, jūtas, idejas un cerības nav vienīgās, ar kurām cilvēki apmainās, bet ir nepieciešams „tikt saprastam kopā" (Seden, 2005). Krievu psihologs S. Petrušins raksta, ka konsultēšanas mērķis ir palīdzēt cilvēkiem satikties ar sevi (Petrušins, 2006). Autors arī uzsver, ka problēmas rodas nevis no tā, ka cilvēks negrib kaut ko mainīt iekšējā pasaulē, bet no tā, ka pats nevar sev palīdzēt (Petrušins, 2006).

Sociālā darbinieka profesijas standartā noteiktas profesijas kopīgās prasmes nozarē, kas ietver: atbalstīt klienta spējas pielāgoties sociālajai un fiziskajai videi; veicināt klienta pašnoteikšanās spējas, pašiniciatīvu, līdzdarbību, motivāciju. Augstāk minētās profesijas standartā noteiktās kopīgās prasmes pamato sociālā darbinieka nepieciešamību veikt klientu konsultēšanu, lai sasniegtu kopējo sociālā darba mērķi, kas noteikts Latvijas Republikas „Sociālo pakalpojumu un sociālās palīdzības likumā" (spēkā no 01.01.2013). Sociālajā praksē konsultācija ir komunikācijas process starp konsultantu un klientu, kurā konsultants cenšas izprast klienta problēmas un sniegt klientam ierosmi un palīdzību pašpalīdzībai. Konsultants norāda uz aspektiem, kas ir būtiski problēmas risināšanā, palīdz definēt problēmsituāciju un, pamatojoties uz savām zināšanām, sniedz pārskatu par dažādu risinājuma iespēju sagaidāmajiem rezultātiem (Seidenstücker, 1980). Svarīga loma ir ne tikai konsultanta zināšanām, bet arī jauniešu attieksmei pret savu problēmu.

Zinātnieki norāda, ka konsultēšanas paņēmieni ir: saruna, aktīvā klausīšanās, pārfrāzēšana (Vilciņa, 2008). O. Galustova izdala šādas pieejas konsultēšanā: uz problēmu orientētā, uz personību orientētā, uz lēmumu pieņemšanu orientētā, uz garīgumu orientētā. Uz problēmu orientētā konsultēšana risina klientu problēmu ņemot vērā ārējos faktorus. Klients pats risina problēmu, konsultants viņu atbalsta, iesaista arī klienta ģimeni. Uz personību orientētā konsultēšana neanalizē ārējos faktorus, bet tikai iekšējos problēmas iemeslus. Tā ir psihodinamiska metode un konsultants ir profesionāls psihologs vai psihoterapeits (Galustova, 2006). Līdz ar to sociālais darbinieks profesionālajā praksē šādu pieeju neizmanto, bet, saskatot nepieciešamību sniegt šādu konsultēšanu klientam, piesaista psihologu. Uz lēmumu orientētā konsultēšanā uzmanība vērsta uz personības resursu meklēšanu un izmantošanu. Šajā konsultēšanā notiek klienta pārliecināšana lēmumu pieņemt jau pašreizējā brīdī. Uz garīgumu orientētā konsultēšanā konsultants sniedz palīdzību iekšējās

un vecumposmu krīzes gadījumā un ar to saistīto problēmu risināšanā. Arī šajā gadījumā sociālais darbinieks piesaista citus sociālā darba speciālistus vai psihologu. Konsultācijas galvenā forma ir saruna (Vilciņa, 2008). Konsultatīvās sarunas notiek ar praktiski veseliem cilvēkiem, kuriem ir grūtības dzīves uzdevumu risināšanā. M. Galaguzova nosauc konsultatīvās sarunas paņēmienus: emocionālā uzlādēšana, iedvesmošana, pārliecināšana (Galustova, 2006). N. Samukina raksta, ka var būt: vienas fāzes konsultēšana (ar vienu klientu); divu fāžu konsultēšana (kad pie konsultanta griežas viens no ģimenes ar cita ģimenes locekļa problēmu); trīs fāžu konsultēšana (tiek izstrādāti ieteikumi) (Samukina, 2003). Konsultēšanas metodes būtību var attēlot shematiski, kas uzskatāmībai apkopotas 1.attēlā.

Profesionālā konsultanta saruna, aktīvā klausīšanās, padomu došana, informācijas sniegšana, rekomendācijas

Iedarbība uz klientu

Uz apziņu, uz emocijām, uz jūtām, uz vidi

Klienta ieguvumi

Izglīto, informē, atbalsta, pārliecina, iedrošina, rosina darbībai

1. attēls. Konsultēšanas metodes būtība
Figure 1. The nature of consultation method

Sociālpedagoģiskajā praksē izmanto vairākas konsultāciju formas: klasiskās psihoanalītiskās koncepcijas, nedirektīvās (uz klientu orientētās) koncepcijas, piemēram, sensitīvais treniņš, tematiskā interakcija (Plaude, 2003).

Uz klientu vērsta koncepcija jeb nedirektīvās konsultācijas koncepcija balstās uz Karla Rodžersa (Carl Rogers) personības teoriju. Pašnoteikšanās un pašrealizācija aizvien vairāk iegūst formu mijiedarbībā ar apkārtējo vidi. Kļūstot par personību, cilvēks uztver ierosmes un apkārtējās pasaules. Daļu no šīm ierosmēm viņš ignorē, jo tās neveido attiecības ar viņa iekšējo uztveres struktūru, tās var tikt arī noraidītas vai uztvertas sagrozītā veidā. „Psihiskā piemērošanās rodas tad, ja radies indivīda paškoncepts. Tas nozīmē, ka visa organisma fiziskā un garīgā pieredze simboliskā līmenī ir asimilēta ar konceptu par sevi.

Psihiska nepielāgošanās ir tad, ja organisms pirmsapziņas līmenī noliedz svarīgu fizisku vai garīgu pieredzi, tādejādi šī pieredze netiek simbolizēta un nav organizēta indivīda iekšējā struktūrā. Rodas psihiska spriedze, neintegrētā

pieredze rada draudus, indivīda iekšējais „es” no tās norobežojās un nocietinās" (Rogers, citēts pēc Wolf, 1983, 40.f., tulk. - I.P.). Mērķis – konsultācijas metodes vēlamais rezultāts ir cilvēka labāka pielāgošanās viņa dzīves situācijas prasībām, mainot iekšējo personības struktūru indivīda paštēla ideālā paškoncepta ietvaros. Līdz ar to konsultāciju kā komunikatīvu sarunu var attēlot shematiski, kas apkopots 2.attēlā.
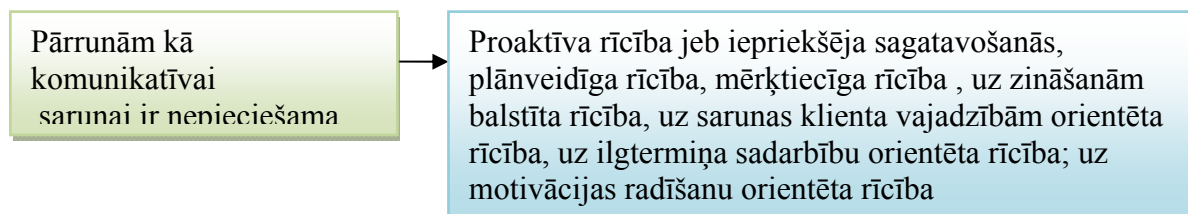
2.attēls. Konsultēšanas rīcības būtība
Figure 2. The nature of consultation action

Pedagogs H. Opašovskis uzskata, ka pašreizējā sociālpedagoģijas palīdzība ir uz problēmu un konfliktu risināšanu vērsta pieeja (Opaschowski, 1996). Sociālpedagoģijas palīdzības mērķis ir sociālās atstumtības riska jauniešiem palīdzēt tikt galā ar individuālām problēmām un atrisināt grūtības.

Secinājumi
Conclusions

Klients ir atkarīgs no palīdzības sniedzēja. Klienta jūtu atpazīšana un atspoguļošana ir viena no galvenajām tehnikām konsultēšanā. Jūtu atspoguļošana palīdz klientam labāk saprast savas bieži vien pretrunīgās jūtas un tādējādi atvieglo iekšējo konfliktu risināšanu. Lai atspoguļotu jūtas, tās ir jāatpazīst. Tāpēc svarīgi ir pievērst uzmanību ne tikai pārrunām un stāstītajam saturam, bet arī emocionālajam tonim, pozai, sejas izteiksmei. Svarīgi ir atcerēties, ka jūtas slēpjas ne tikai tajā, kas ir pastāstīts, bet arī tajā, kas netiek pateikts, tāpēc konsultantam ir jābūt sensitīvam attiecībā uz dažādiem mājieniem, noklusēšanu, pauzēm. Veiksmīgai klientu konsultēšanai pamatā ir saskarsmes un komunikācijas norise. Tās rezultātā ir iespējams sasniegt kopējos sociālā darba mērķus un veicināt klienta izkļūšanu no negatīvā sociālā stāvokļa, un sociālo problēmu mazināšanos klienta tiešajā vidē. Sociālpedagoģijas konsultatīvajā darbā ar sociāli atkarīgiem jauniešiem īpaši svarīgi ir šādi aspekti: uzvedības terapeitiska konsultācija, uz klientu vērsta konsultācija, psihoanalītiska konsultācija, uz īstenību orientēta konsultācija.

Summary

In the publication there have been updated the summarized theoretical research studies in social sciences significant for the exploration of the concept of competence development that views the essence and role of cognitive approach in work with young people exposed to

the risk of exclusion. Basing on the analysis of scientific literature, there have been described teachers' social competences that are divided into pedagogical competences and the competences, which are mainly necessary in social work, as well as it is described that there is a need for instrumental, reflexive and social competence of social pedagogy in work with young people exposed to the risk of exclusion. The article views the concepts of the basic competencies, which can be called classes of competencies: personal, activities and changes, methodological and socio-communicative competences, but overall they form meta-competences. This aspect is connected with the need to integrate various approaches and to develop a handbook for work with the topical target groups of social services (from psychoactive substances and gambling abusers, victims of violence, long-term (over a year) unemployed; young people who do not study, do not workand have behavioural problems or lack basic skills for independent living; persons released from prison, minors / young parents.

In Latvia 2030 there is highlighted the basic value of Latvia - a human capital. When there is the reduction in the number of inhabitants and the population is aging, it is important not to reduce the value of the human capital base and to increase its productivity. Guidelines for the Development of Social Work is a prior long-term objective to ensure the participation of all potential human resources, particularly inhabitants exposed to poverty and social exclusion, in labour market ,to improve their health, social care and social security, as well as the services and efficiency of lifelong learning system.

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MEDIĀCIJAS IEVIEŠANAS SKOLĀ: PROBLĒMJAUTĀJUMI LATVIJĀ

Implementation of Mediation in Schools: Issues in Latvia

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Abstract. The article provides overview of issues related to the implementation of mediation in schools in Latvia, as well outlines the practical research carried out in Rezeknes Augstskola. This is another attempt to trigger the topic and to initiate the discussion in Latvia on mediation as a modern and alternative method for problem and conflict solution in schools, involving in the process both students and adults thus endorsing tolerance, empathy, and non-violent communication.

Keywords: mediation, mediation process, social pedagogue, non-violent communication.

Ievads
Introduction

Gan Latvijā, gan Eiropā kopumā skolas mediācijas ieviešana notiek mediācijas ieviešanas un veicināšanas procesa kontekstā citās sabiedrības jomās. Iepriekšējā mediācijas ieviešanas skolā tematam veltītajā rakstā (*Truskovska, Orska, Ušča, 2014)* tika noskaidrots, ka mediācija iegājusi daudzās jomās, piemēram, kopdzīves pārtraukšanas – šķiršanās mediācija, bērnu un jauniešu tiesību mediācija, mediācija mantojuma jautājumos, kaimiņu attiecību mediācija, mediācija īres vietās, biznesa mediācija, iestāžu iekšējā mediācija, vainīgā – upura izlīgums, utt. *(Trosens, Hofmans & Rotfišere, 2004).*Veicot zinātnisko atziņu analīzi tika sniegts *mediācijas skaidrojums* – t.i. brīvprātīgs un strukturēts sarunas process konflikta risināšanai ar trešās personas palīdzību (starpniecību), no kura pozitīvs ieguvums ir visiem procesā iesaistītajiem (*Truskovska, Orska, Ušča, 2014).* Noskaidrots, ka mediācijas prakse veicina *spēju mainīt perspektīvu* kā neviens cits sociālais process, no kāpinātas konfliktsituācijas - uz sadarbību (*Edelstein, 2006),* jo *mediācijas procesā* citādāk nekā pārējos konflikta risināšanas veidos tiek pieņemts lēmums un/vai risinājums. To nosaka nevis mediators, bet gan konflikta partneri - medianti.

Tāda veida konflikta risināšana ir iespējama tikai ar *mediatora starpniecību.* Būtiski izprast mediācijas procesa ideju un iespējas, ka prasmīgi vadīts ar daudzveidīgu metožu, paņēmienu un tehniku palīdzību īpašs savstarpējā izlīguma process pa soļiem ir jauna un alternatīva iespēja risināt

konfliktus. Mediācija nav padomu došana. Mediatora loma ir vadīt procesu, atbildība par iznākumu/vai rezultātu ir iesaistīto procesā dalībnieku ziņā.

Pētījuma mērķis: sniegt ieskatu mediācijas ieviešanas skolā Latvijā problēmjautājumos un to iespējamajos risinājumos, rosinot turpināt diskusiju par šo jautājumu.

Tas ir turpinājums aizsāktajam pētījumam par mediāciju kā mūsdienīgu un alternatīvu problēmsituāciju un konfliktu risināšanu skolā Latvijā.

Pētījuma metodes: izmantota zinātniskās literatūras analīzes metode, kā arī autoru personiskā un profesionālā pedagoģiskā refleksija; empīriskā pētījuma veikšanai izmantota aptaujas metode, iegūstot kvantitatīvus un kvalitatīvus datus.

Pasaulē daudzās valstīs, tostarp ASV un Vācijā jau ir uzkrāta zināma pieredze skolas mediācijas praksē. Mediācija konfliktos skolas organizācijās, piemēram, starp vecākiem un skolotājiem pakāpeniski tiek ieviesta arī Eiropā *(Jefferys – Duden, 2005),* izglītojot par mediatoriem gan skolotājus, gan skolēnus (*Philipp, Rademacher, 2002*). Piemēram, Vācijas federālajās zemēs mediācija skolās ienāk jau kopš 1995. gada. Mūsdienās federālajās zemēs Vācijā pastāv mediācijas programmas skolās, lai arī tās pielietojuma koncepcija un apjoms ievērojami atšķiras (*Will, 2005, 2011*).

Latvijā dažādi pasākumi, kas skaidro mediācijas procesu, tā priekšrocības ir jau no 20.gs. deviņdesmitajiem gadiem. Kopš 2004.gada biedrības „Integrācija sabiedrībai" Cietušo atbalsta centrs (mediacija@mediacija.lv) nodarbojas ar mediācijas popularizēšanu, organizē informatīvus seminārus par mediāciju un tās iespējām dažādām profesiju un interešu grupām. 2007. – 2008. gadā organizēja un vadīja seminārus 207 Latvijas pedagogiem un skolēniem no dažādām Latvijas skolām. Tas deva stipru impulsu un pirmās zināšanas par mediāciju skolā.

Arī augstskolu studenti iesaistījās zinātniskos pētījumos, kas veltīti mediācijas skolā ieviešanas problēmjautājumiem. Rēzeknes Augstskolā 2008-2012 aizstāvēti vairāki zinātniskie darbi 2.līmeņa profesionālajā programmā „Sociālais pedagogs". 2012.gadā aizstāvēts bakalaura darbs par tēmu "Mediācijas metodes pielietojums sociālā pedagoga darbā konstruktīvas saskarsmes veidošanā pusaudžiem". ESF Twinning projekta ietvaros tika sagatavoti mediatori darbam ar tā saukto integrēto mediācijas metodi (*Bolis, 2010).* 2010.gadā Biedrība „Integrācija sabiedrībai" organizēja projektu „Vienaudžu mediācija – ceļš uz sadarbību!", kas tika īstenots ar Rīgas domes Izglītības, kultūras un sporta departamenta finansiālu atbalstu. Projekta ietvaros notika divi bezmaksas apmācību semināri tikai Rīgas skolu pedagogiem, skolu psihologiem vai sociālajiem pedagogiem, „Vienaudžu mediācijas organizācija skolā". Kā redzam, Latvijā ir neilga un fragmentāra pieredze mediācijas skolā ieviešanā.

Latvijā mediācija ir mūsdienīga un jauna pieeja problēmsituāciju un konfliktu risināšanā skolā. Lai arī skolotāji mediatori tiek sagatavoti, taču

meditācija vēl nav integrēta skolas ikdienas procesos. Biežāk tā ir tāda metode, ko izmanto skolotāji skolēnu konfliktu risināšanai. Viens no iemesliem šādai pieejai varētu būt neticība skolēnu spējai patstāvīgi risināt konfliktsituācijas, skolēnu neuztver kā vienlīdzīgu partneri. Kā vēl vienu iemeslu lēnajam mediācijas skolā ieviešanas procesam varētu minēt vienotības trūkumu skolas pedagogu kolektīvā. Skolotājiem jābūt gataviem atteikties no sankcijām (parasti brīdinājums vai sods), viņiem jāakceptē risinājumu, kuru izstrādājuši skolēni, ja risinājumu abas puses ir atzinušas par labu un taisnīgu. Skolotājiem daļu savas varas jānodod cerībā, ka mediācija starp skolēniem ar konsensā izstrādātu risinājumu ir konstruktīva un izbeidz konfliktu. Pedagogiem jāuzticas skolēnu atbildības spējai un jādefinē savas attiecības ar skolēniem mazāk hierarhiski, bet vairāk kā partnerattiecības. Skolotāju gatavība šādām pārmaiņām ir dažāda. Ir viedoklis (*Will, 2005, 2011*), ka par skolas mediatoru var kļūt jebkurš speciālists. Savukārt, šī raksta autores uzskata, ka šai lomai visvairāk bāzes izglītībā ir sagatavots sociālais pedagogs. Turklāt apgūtās zināšanas un prasmes mediācijā un iegūtais sertifikāts atbilstoši situācijai Latvijā vēl vairāk nostiprinātu sociālā pedagoga pozīcijas un atpazīstamību skolā, pašvaldībā un sabiedrībā kopumā.

Raksta autores iesaistījušās Latvijas skolu sociālo pedagogu izglītošanā par mediāciju skolā projekta „Improvement of Social Pedagogues Professional Qualification by Mediation Implementation" (MeImp) Nr. LLP-LdV-TOI-2013-LT-0141 ietvaros. Ieskats praktiskā pētījuma rezultātos sniedz informāciju par sociālo pedagogu apmierinātību ar iespēju gūt zināšanas un prasmes skolas mediācijā, kā arī par mediācijas ieviešanas skolā problēmjautājumiem un iespējamiem risinājumiem sociālo pedagogu skatījumā.

Ieskats praktiskajā pētījumā
Insights in the practical research

Lai izvērtētu projekta „Improvement of Social Pedagogues Professional Qualification by Mediation Implementation" (MeImp) Nr. LLP-LdV-TOI-2013-LT-0141 ietvaros notikušā mācību semināra skolu sociālajiem pedagogiem „Mediācija skolā" kvalitāti un atbilstību mērķauditorijas vajadzībām, semināra noslēgumā dalībniekiem tika piedāvāta *novērtējuma anketa*. Tika izdalītas 15 anketas. Pilnīgai datu analīzei tika izmantotas 12 anketas. Tika iegūti kvantitatīvie un kvalitatīvie dati, veikta to apstrāde, analīze un interpretācija.

Semināra satura atbilstību iesaistīto sociālo pedagogu konkrētā brīža izglītības vajadzībām skolas mediācijā raksturo atbildes uz pirmajiem trim anketas jautājumiem. Katru no piedāvātajiem izteikumiem respondenti vērtēja 10 punktu skalā. Rezultāti atspoguļoti 1. attēlā.
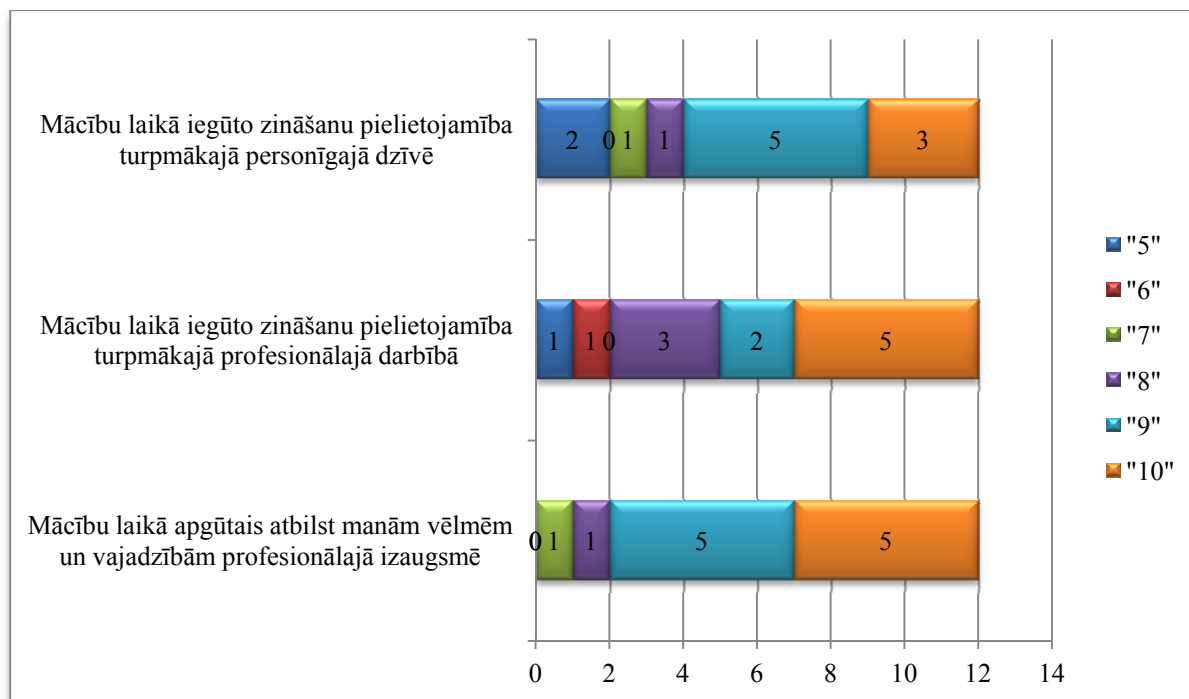
1.att. Semināra atbilstība respondentu izglītības vajadzībām
Fig. 1 Compliance of the training with the educational needs of the respondents

Kvantitatīvie rezultāti liecina, ka visās pozīcijās vērtējums ir no 5 ballēm un augstāks. Detalizēta rezultātu analīze liecina, ka, novērtējot semināra atbilstību respondentu vēlmēm un vajadzībām profesionālā izaugsmē, vidējā vērtība novērtējumam ir 9,167, novērtējot iegūto zināšanu pielietojamību turpmākajā profesionālajā darbībā, vidējā vērtība novērtējumam ir 8,583, bet novērtējot pielietojamību profesionālajā dzīvē, vidējā vērtība novērtējumam ir 8,333.

Komentējot vērtējumu, kursu dalībnieki raksta:

„Man bija vēlme, nākot uz šo semināru, gūt citu pieredzi mediācijā. Šī vēlme tika apmierināta, iegūtas zināšanas par padziļinātu konfliktu risināšanu”.

„Izmantošu gūtās atziņas, papildināšu ar savām izjūtām un praktisko darbību”

„Pat ļoti atbilst. Tas ir liels ieguvums manai izaugsmei”

„Šo apmācību rezultātā ir radušās pāris jaunas idejas par turpmāko profesionālo darbību saistībā ar mediāciju”.

„Uzskatu, ka man tagad ir labs „instruments” konfliktu risināšanai. Domāju, ka tieši to es vēlējos”

Organizētā semināra kvalitātes novērtējumam tika izvirzīti tādi rādītāji kā *lektoru komunikācijas kvalitāte, psiholoģiskā komforta zona, metožu atbilstība, praktiskās darbības kvalitāte, atgriezeniskā saite un supervīzija*. Katru no rādītājiem respondenti vērtēja 10 punktu skalā. Iegūtie rezultāti apkopoti 2.attēlā.

Redzam, ka katram no kvalitātes rādītājiem ir augsts novērtējums (robežās no 7 līdz 10). Komentāros atzinīgi vērtētas gan izmantotās darba metodes, gan komforta zona, gan lektoru darbs satura realizācijā utt.. Piemēram:

„Augstu vērtēju lektoru profesionalitāti"

„Lektori profesionāli, draudzīgi komunicēja ar auditoriju"

„Jutos labi, emocionāli bagāta...emocionāls kontakts"

„Treniņi – ļoti jauki, tie rosināja, lika domāt. Ļoti veiksmīgi – pieredze un darbošanās kopā"

„Atgriezeniskā saite augstā līmenī"

„Pirmo reizi esmu seminārā, kad nejūtu robežu pasniedzējs – studējošais. Tāpēc jutos brīvi savu domu izteikšanā"

'„Īpaši patika darīt praktiski. Vienlaicīgi praktizējot mediāciju un saņemot supervīziju"

„Lektoru zināšanas un iepriekšējā darba pieredze ir ļoti liels pluss – viņas prot strādāt ar auditoriju, izsmeļoši atbildēt uz jautājumiem, radīt drošu vidi, sniegt atbalstu, ja kaut kas neizdodas"

„Uzskatu, ka supervīzijas ir nepieciešamas turpmāk (vismaz dažas), lai pārrunātu ar speciālistiem to, kā izdodas ieviest mediāciju skolā"

„Kolosālas praktiskās nodarbības. Iespēja būt uzklausītam, darboties, saņemt vērtējumu"

Trijos gadījumos respondenti uzsver, ka vēlētos vairāk laika veltīt šāda veida nodarbībām, vienā gadījumā izteikta vēlme iegūt vairāk teorētiskās informācijas.
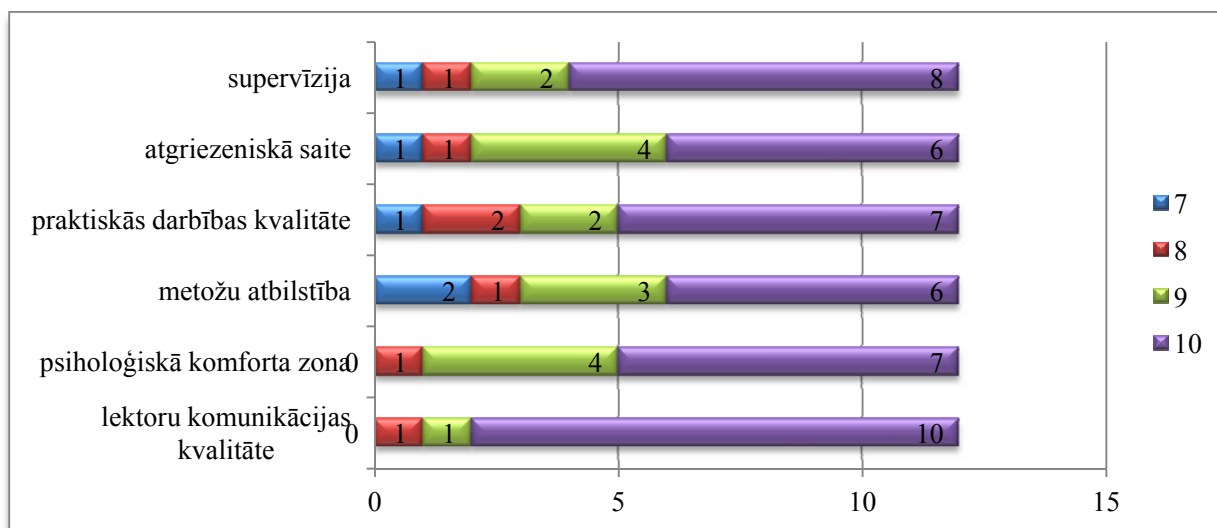
2.att. Kvalitātes rādītāju novērtējums
Fig.2. Evaluation of quality indicators

Veicot komentāros ietvertā teksta kontentanalīzi, tika identificēti šādi jēdzieni: *atbilstība vajadzībām, lietderība, satura realizācijas kvalitāte, lektoru*

profesionalitāte, tālākizglītības nepieciešamība Identificēto jēdzienu lietojuma biežums redzams 1.tabulā.

1.tabula. ontentanalīzē identificēto jēdzienu lietojuma biežums
Frequency of use of the terms identified in the content analysis

atbilstība vajadzībām	lietderība	satura realizācijas kvalitāte	lektoru profesionalitāte	tālākizglītība
10	20	37	30	18

Respondenti uzsver, ka viena semināra ietvaros nav iespējams apgūt visas nepieciešamās zināšanas, jo *„šie bija tikai pamati. Iegūtā informācija bija ļoti laba, bet periodiski to vajag atkārtot, pilnveidot, zināšanas vajag nostiprināt”*. Tādēļ respondenti uzsver tālākizglītības (*minēts 18 gadījumos*) nepieciešamību, turklāt ne tikai sociālajiem pedagogiem, bet arī priekšmetu skolotājiem, sevišķi klašu audzinātājiem. Respondenti uzsver arī supervīziju (*minēts 10 gadījumos*) nepieciešamību gan veiksmīgas mediācijas kā problēmsituāciju un konfliktu risināšanas metodes ieviešanai skolā, gan kopumā savas profesionālās darbības īstenošanas skolā efektivitātei..

Semināra dalībniekiem (15 respondenti) noslēguma nodarbībā tika piedāvāts izvērtēt mediācijas skolā ieviešanas problēmjautājumus, izmantojot esošās situācijas raksturojumam SVID analīzes metodi un prezentēt savu veikumu. Iegūtie rezultāti apkopoti 2.tabulā.

Semināra dalībnieki SVID analīzes sadaļā "Stiprās puses" norāda uz iespējām, ko sniedz mediācijas ieviešana skolā. Dažādu sociālo prasmju, piemēram, saskarsmes prasmju, konflikta risināšanas prasmju, pašanalīzes prasmju, atbildības, tolerances attīstīšana ir svarīgākās iespējas personības attīstīšanas procesā. Līdzīgas idejas ir paustas arī sadaļā "Iespējas". Mediācijas ieviešana skolā risina daudzus svarīgus jautājumus, kas šobrīd skolā ir ļoti aktuāli: vardarbības prevencija, nevardarbīgas komunikācijas un interakcijas kultūras veicināšana, sociālas kompetences kā empātijas, sadarbības, perspektīvas maiņas spējas attīstīšana, skolēnu pašapziņas un pašcieņas celšana.

Pamatotas un saprotamas ir semināra dalībnieku paustās idejas SVID analīzes sadaļās „Vājās puses" un „Draudi": mediācija skolā nav līdzeklis, kas palīdz visos gadījumos, panākumi ir atkarīgi no iesaistīto personu (skolas vadība, skolotāji, skolēni, vecāki) mediācijas izpratnes un akceptēšanas, nepietiekamas izglītības gadījumā pastāv iespēja, ka var neizdoties pirmie mēģinājumi mediēt konfliktus. Par šīm problēmām tiek minēts arī Vācijā veiktajos pētījumos par mediācijas ieviešanu skolā (*Pētījums Lejassaksijas (Vācija) skolās, 1999.*) Semināra dalībnieki, veicot SVID analīzi, vadījās pēc savu skolu situācijām. Tradicionālā skolas sistēma sniedz maz vietas un laika mediācijai, jaunievedumi bieži vien sākumā tiek uzņemti ar lielu skepsi, neticību. Semināra dalībnieki, prezentējot SVID analīzes rezultātus, runāja arī

par nepieciešamību papildināt zināšanas psiholoģijā, jurisprudencē, lai varētu kvalitatīvāk sagatavot skolēnus mediatorus.

2.tabula. Mediācijas skolā ieviešanas SVID analīze
Implementation of mediation in schools: SWOT analysis

STIPRĀS	VĀJĀS
➢ Iespēja pašiem atrast risinājumu ➢ Iespēja saskatīt problēmas vai konflikta dziļākos slāņus ➢ Gandarījuma sajūta ➢ Iespēja tapt uzklausītam un sadzirdētam ➢ Rodas jauni resursi ➢ Abas puses ieguvējas ➢ Nevardarbīgs konflikta risinājums ➢ Konflikta risinājums pilnveido prasmes ➢ Uzņemas atbildību ➢ Iespēja pašam domāt un rīkoties ➢ Brīvprātīga izvēle ➢ Individuāla pieeja ➢ Attīsta sociālās prasmes	➢ Pieredzes trūkums mediatoriem ➢ Rūpīgi iepriekš jāsagatavojas ➢ Motivācijas trūkums ➢ Ne katrs gadījums ir mediējams ➢ Mediējamo personu īpatnības ➢ Konfidencialitātes pārkāpšana vai neievērošana ➢ Resursu trūkums- vide, laiks, pieredze ➢ Laika resurss- laikietilpīgs ➢ Mediatoram jābūt prasmīgam vadīt procesu ➢ Pacietības trūkums ➢ Zema motivācija
IESPĒJAS	DRAUDI
➢ Sabiedrību kopumā attīstoši ietekmē, jo māca kā risināt konfliktus ➢ Pozitīvi iegūst abas puses ➢ Mazina agresiju, vardarbību ➢ Citāda pieeja konflikta risināšanai ➢ Pilnveido prasmes ➢ Atrisināts konflikts ➢ Pašanalīze ➢ Uzlabojas skolēnu savstarpējās attiecības ➢ Pozitīvas vides izveide- daudz ieguvēju ➢ Mazinās atstumtība vienaudžu vidu	➢ Laika trūkums ➢ Aizdomīgums pret jaunievedumiem ➢ Nav administrācijas atbalsta ➢ Konfidencialitāte ➢ Parādās informācija, kas var rosināt jaunu konfliktu ➢ Finansiāls atbalsts ➢ Konfliktu var neatrisināt ➢ Nespēja pieņemt šo inovāciju ➢ Sabiedrība kopumā nav gatava ➢ Mediatoram jābūt harmonijā ar sevi

Diskusijai

Mediācijas skolā ieviešana ir jāskata kā mūsdienīga un konstruktīva pieeja problēmsituāciju un konfliktu risināšanai skolā starppersonu attiecībās.

Mediācijas ceļā atrisināti konflikti vairo pieredzi un prasmes risināt domstarpības un konfliktus nevardarbīgā ceļā, kas, savukārt, uzlabo vidi skolā un mazina spriedzi sabiedrībā kopumā.

Mediācijas ieviešana skolā risināma sociālās un skolas politikas līmenī kā daudzpakāpju ilglaicīgs un pēctecīgs pasākums, paredzot tam finansu līdzekļus un sagatavotus tās ieviešanai cilvēkresursus, neatkārtojot iepriekšējo gadu

pieredzi, kad mediācijas ieviešana skolā bija, lai arī veiksmīgs, tomēr īslaicīgs un fragmentārs pasākums projekta ietvaros, kuram netika nodrošināta pēctecība.

Summary

In Latvia nowadays, there is no need to prove anyone in the schools or in the society in general that it is necessary to search for new tools for diminishing various conflicts and violation. In fact, for the conflicting parties, involved in the process of mediation, it is a new experience of acceptance and conciliation, for the leaders of the mediation – a new professional instrument that increase their capacity in carrying out their professional tasks, for the society in general – a possibility to learn new conflict solution skills that allow to have more winners than losers. That results in multiplying the tolerance and empathy in the society that is so essential in the modern conflicting world as a whole.

Even though fragmentarily and temporally, there are teachers, education psychologists, and social pedagogues – mediators being prepared in Latvia. However, mediation is not integrated in the daily processes of the school. Most often, this is a method, which is used by the teachers for conflict solution among the students.

The results of the empirical research show that there is an interest among different groups of the society about mediation and its advantages in schools, however, the traditional school system provides a little space and time for mediation, innovations are accepted with immense scepticism and distrust. The teacher, who has studied mediation, cannot once and for all to assure the colleagues; it is necessary to search for allies in order to explain the benefits of implementation of mediation together. That means it is necessary to organize more seminars to hasten implementation of mediation in the school life. The participants of the seminar, presenting the results of SWOT analysis, have discussed as well about the necessity to supplement their knowledge in psychology and law to perform better in training students-mediators.

One of the basic preconditions of the education in the 21st century is openness towards change, cooperation, communication, growth. Humanistic approach emphasizes the absolute freedom of the student and a special role of the enhancement of independence in the continuous personality development process. A student and a teacher are equal subjects of the pedagogical process. Introduction of mediation in schools would enhance the level of adequacy of personal self-esteem of the students, dynamics of self-confidence processes, and development of the structure of self-concept.

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MENTOR – A TRUSTEE FOR DISADVANTAGED YOUTH

Lubova Vasechko

Abstract. *The perception of oneself and the surrounding environment are developed during childhood. The behaviour of others directly influences the attitude towards oneself and decisions and observations about one`s value. One of the biggest deficiencies of institutional out-of-family care that significantly hinders the comprehensive development of children is the inability of children to form close bonds with adults. To come to a conclusion that you are not loved and worthless means the feel of deep disappointment. The child becomes shore that he has been deceived and abandoned. These thoughts evoke protests, depression, and insecurity. Due to these misconceptions the socioemotional development of children is hindered. The main goal of the mentor programme is to provide an emotional support and promote the well-being of the young people not having felt a real family environment and care. Youth mentoring in Latvia is a comparatively new concept, and there are only few non-governmental organisations providing this kind of support for young people in the high-risk group. It should be mentioned that there has not been a theoretical study about mentoring so far.*

Keywords: *mentor, mentee, mentor programme, young adult.*

Introduction

Equality creates friendship
/Plato/

Each of us in our lives has met a person who have affected the development of our system of values or even radically changed our decision making process. When reading or hearing stories about famous people who have achieved something wondrous in art, sport or business, often there has been a specific person who has provided support or has been an idol, thus helping to achieve these results: someone said a thought that later became a motto; someone helped to become more self-confident and to start believing in self; maybe someone just pointed out the deficiencies or introduced to the right people in the relevant area. This can be called situation monitoring that unnoticed happens daily. It is difficult to assess its value in the respective moment. Mentor only acknowledges situation and offers help – then someone can either accept or decline the offer. The true meaning and importance of these people becomes clear only later.

Mentoring is one of the first means of the development of the society. In the ancient times, leaders of tribes passed their knowledge to their youth. That was their role for the development and preservation of civilisation. The origins of the word *mentor* can be traced to the antique Greece mythology. There is a myth about Mentor in the Odyssey by Homer. The name of the teacher of

Telemachus was Mentor – he was a wise old man that often shared with his life lessons. Mentor`s task was to prepare the son of Odysseus for his mission, his destiny set out since the moment of his birth. Mentor was responsible not only for the education of the young man, but also for his character, decision making, determination and clearness of mind (Homer). This myth demonstrates the legend behind mentoring and provides insight into the development of various values characteristic to mentoring, as well as distinguishing the most important ones. For example, Homer stresses these guiding words Mentor explains to the young man – sometimes work must be carried out even if you do not have the necessary courage or resources because none of the works is valuable enough if there is no long-term goal or agenda.

Later the meaning of the word *Mentor* expanded: trustworthy advisor, trustee, tutor, old friend. The main goal of a mentor is to provide help to young people understand their abilities and become valuable members of the society.

Mentoring is a culture of mutual influence and cooperation. Mentoring also can be described as a determined action carried out using specific methods and techniques. Mentoring as a method is compiled of a row of processes that encourages development and support of relationships. A supportive, developmental, and helpful mutual cooperation is created between a mentor and mentee – one person donates his time, knowledge, and efforts to another person for the development of his skills, knowledge, and convictions. Mentor follows the needs of a mentee that the mentor perceives as being important (Jusela, Lilija, 2005). Mentoring is characterised as a developing and learning process of both parties in which a mentor and mentee spends a lot of time and energy (Rivža, Konstantinova, 2006).

Mentoring (as a method based on partnership) is well-known in management theory and entrepreneurship. In these the Mentor provides his professional support to the mentee, thus promoting the development of his career and business. However, in past few decades, mentoring has become known as a development method in social work and education. It was started to be used as a support for new teachers in the USA in 1980s. In Latvia, mentoring has being researched only for the last decade – starting with the business sector (Konstantinova, 2007) and later in education (Akopova, 2004; Kačkere, Odiņa, Rieksta, 2005).

Mentoring has become a trend of the 21st century and is perceived as an educational process that transfers knowledge between two people and is based on the non-formal education.

Mentoring of Youth

The first researcher who proposed this mentoring idea was Hirschi in his social control theory (1969). This theory was based on the perception that crimes and violation of law (delinquent behaviour) are expressed when people`s

ability to follow rules and order is diminished or non-existent. The socialisation process, that usually advances the understanding of life in the society lived by specific rules, has not been successful. Hirschi uses this to propose that all people have born with tendencies towards delinquent behaviour (Bartol, 2004). The interaction of risk and resilience (rehabilitation, rejuvenation) was researched and that provided basis for the idea of youth mentoring (Garmezy & Masten, 1986; Werner, 1995). A big influence came from Werner`s opinion (Werner, 1986). He believed that to help the young people who have committed crimes and undergo rehabilitation process at least one adult should be involved.

In 1995 in the USA, a study was carried out (Public/Private Ventures) about the contribution of public mentoring programme *Big brothers Big sisters* (Tierney, Grossman & Resch, 1995). During that period, only not so well acknowledged scientific research served as evidence for the contribution of mentoring programmes, thus approving the usefulness of it and starting to attract funding (Boyle, 2007). The conclusions of the study approved the positive theory about mentoring: the young people who were supported by a mentor were 46% less likely to abuse drugs, 27% less likely to abuse alcohol, and 33% less likely to get involved in fights (Tierney, Grossman & Resch, 1995).

Baker and Maguire believe that the youth mentor programmes have a great potential, but they should be thoroughly developed. They indicate that historically the goal of mentor programmes was charity: give to those who have received the less. Charity organisations provided an adult for the disadvantaged youth in order to provide a positive example (Baker & Maguire, 2005). The idea that an adult could help (not hurt) disadvantaged youth was considered as self explanatory with the conviction that an adult would be able to help to live according to the law. Nowadays, we have information and studies about the young people who have committed crimes and the reasons for such actions (Cavell, Hymel, Malcolm & Seay, 2007), as well as the negative consequences that could arise from not particularly well organised programme (Dishion, McCord & Poulin, 1999) or inclusion of insufficiently situated mentors (Grossman & Rhodes, 2002).

51 years ago, Caplan had discussed the necessity of a support person that operates out of family borders – he would be older and with good reputation or very wise. He indicated that this person geographically and socially could be much closer to those in need of help than the professional workers (Caplan, 1964). Sociologists use similar arguments when talking about the importance of a mentor in the lives of disadvantaged youth (Lefkowitz, 1986; Williams & Kornblum, 1985).

The model of youth mentoring proposed by Rhodes indicates that the mentoring relationships can introduce positive changes in various processes in the young people. These relationships would especially promote the socioemotional, cognitive development and development of identity (Rhodes, 2002). The model states that the positive mentoring results can be

achieved only if such a personal bond is created that can be characterised by trust, empathy and mutual respect. Theoretically, meaningful relationships can be achieved only if a mentee is ready to share (open himself) his emotions and self-perception, and is actively participating in the building of relationships (Csiksizentmihalyi & Rathunde, 1998).

It is important to note that the mentor`s role is not only intricate, but also very emotional. Mentor deals with the success and failure of his mentee through his own personal emotions (Bullogh & Draper, 2004). The mentor wishes to stay and be respected, to be valued. Cullingford concludes that the majority of the studies of the feelings and attitude produced and received by mentors have found out that they feel valued and isolated. At the same time, if they take part in the mentor programmes full of enthusiasm and interest, after a short while, they came to a conclusion that there are requirements and responsibilities they had not anticipated (Cullingford, 2006). This is the reason why the selection of mentors, support, and consultation throughout the whole programme are necessary.

Mentoring relationships can be both formal and informal. The informal or natural mentoring bonds are: relationships with an adult who is not older (trainer, neighbour, teacher, etc.); the bonds that have been developed spontaneously by receiving a positive encouragement and guidance (Baker & Maguire, 2005). The formal or planned mentoring is organised via a mentor programme with the purpose of providing individual relationships between an adult and young person. The formal mentoring can be carried out in schools, youth organisations, workplaces, etc. (DuBois & Karcher, 2005). The formal mentoring can have various forms: one-on-one relationships between a young person and adult using a schedule; group mentoring – an adult develops relationships with a group of young people; team mentoring – several adults develop relationships with a group of young people; peer mentoring – the mentor is a young person as well, for example, if the goal is to help with fit in a school; internet mentoring (Mentor/National Mentoring Partnership, 2006).

Theoretical literature provides a division of mentoring: mentoring – relationships; mentoring – context.

The first part stresses the relationships themselves; a vital part of mentoring. If there are no relationships, no mentoring can be carried out (Rhodes, 2005). The young people who have received mentoring do not talk about mentor programmes; they talk about relationships (Rhodes & DuBois, 2008). The researchers of youth mentoring have concluded that the quality of relationships (stability, length) is the defining factor that indicates success or failure of the mentoring programme (Parra, DuBois et. al., 2002; Rhodes, Spencer et. al., 2006). Only if the bond is full of trust and relationships between mentor and mentee are close, the mentee can benefit greatly (Rhodes, DuBois, 2008). Theoretical models unequivocally put forward the individual approach – the importance of one-on-one relationships that promote unity,

empathy, and trust (Rhodes, DuBois, 2008, Rhodes et. al., 2006). The importance of relationships has also been underlined in the mentoring definition by DuBois and colleagues: intervention programme with the goal to promote positive results via relationships of young people (18 years old or younger) and adults who have joined the programme voluntarily and are not the parents for these young people. There have been studies about the ratio of the quality of relationships and benefit for the young people involved. There is a correlation between these to factors. Two possible scenarios exist: conflict and premature leave from the programme or strong relationships and a noticeable result in the end of the programme (Cavell et. al., 2009; Rhodes et. al., 2005).

Mentoring as a context exist in cases when the goal of a mentoring programme is to provide experiences for the young people involved and organise necessary preventive activities. There are some kind of relationships between the mentor and mentee, but the strength of those is meaningless. This could be the case when a mentor is a substitute for practise or the young people have been involved in non-formal education. In these cases, the success or failure of the programme do not depend on the quality of relationships (DuBois et. al., 2011).

Contribution of Mentoring

Usually the one who benefits from the mentoring programme is the one who captures the experience. However, the mentor can gain new knowledge and skills as well. Sometimes even more than the receiver of the experience provided. The most typical effects are:
- ability to stop and look at his/her achievements;
- ability to question his/her opinion, thoughts, and beliefs, as well as to avoid learning about things not topical at the given moment;
- ability to develop his/her leadership – not through giving orders, but through providing support;
- ability to listen to the people around, to ask questions correctly, because these are the preconditions for the creation of good mutual relationships (Rivža, Konstantinova, 2006).

The most typical effects for the young people are:
- psychological, intellectual, and social support;
- valuable advice, a helping hand in problem solving;
- experience of positive relationships with an adult;
- spending spare time differently;
- opportunity to acknowledge appropriate behaviour of each gender (single parent cases) (Buckley & Zimmermann, 2003).

The cooperation of a mentor and mentee is successful if:
- positive mutual relationships have been created;
- cooperation goals and basic principles are clear;

- both have time for meetings;
- not too great distance in between;
- trust has been developed (Rivža, Konstantinova, 2006).

Conclusions

Apart from origins of mentoring found in the ancient world, 21st century is marked as the birth of mentoring theory in academic literature. Studies conclude that mentoring is a successful tool for diminishing social exclusion, promoting social development, carrying socialisation process, and promoting the feeling of comfort, being safe.

Those young people who have not experienced enough love and care form family due to several factors (for example, the lack of parental love and support, parents are alcoholics, the young people lack self-confidence and self-respect, the social skills of the young people are poorly developed) are perceived as a potential risk group that could start abusing alcohol, narcotics, or other similar substances. A different positive experience could be provided by a mentor, or advisor – trustee who provides support for the young people by listening to them, devoting undivided attention, and spending time together in various social activities. Mentors can serve as models with whom youth might identify, leading to increased socially appropriate behaviour and reduced delinquent behaviour. A support of a motivated mentor through close and individual relationships could serve as strong basis for the development of the young people involved.

Discussion

The article analyses the concept of social mentoring and its differences with mentoring in the work place. The author's interest towards this concept stems from taking part in the mentoring programme for the young people who grow up outside of family unit. The distinctive feature of social mentoring is that it is based on voluntary work. It implies developing relationships between the mentor and a young person.

Social mentoring programmes become more and more popular worldwide. That's why it is important to research programme's outcomes and sucess criteria based on gained experience. The future research could include some comparison with the countries where mentoring is more advanced, for example, United Kingdom and Norway.

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VOCATIONAL GUIDANCE IN LITHUANIAN GENERAL EDUCATION SCHOOLS: ACHIEVEMENTS AND ASPECTS TO BE IMPROVED

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Abstract. *This paper summarizes the achievements and aspects to be improved in vocational guidance in Lithuanian general education schools in order to stimulate discussion about the experience in vocational guidance. The object of the research is an analysis of achievements and challenges in vocational guidance in Lithuanian general education schools. The aim of the research is to present and summarize the results of the analysis. The results suggest that Lithuania has managed to develop a vocational guidance system with infrastructure and monitoring. However, further development of the system of vocational guidance is hindered by changes of vocational guidance priorities, ongoing discussions about the concepts of vocational guidance and its definition as well as their interpretation within the system, lack of professional research, absence of systemic evaluation of the competence of the authorities that coordinate vocational guidance, difference in the experience of specialists and structural units in collaboration with scientists, when such cooperation is poor or even non-existent.*

Keywords: vocational guidance, general education school.

Introduction

Vocational guidance is one of the most important areas of the European Union (hereinafter - EU) education system. The European Commission Communication „Europe 2020: A strategy for smart, sustainable and inclusive growth strategy for the next decade" of March 3, 2010, imitative „New skills and jobs agenda", stressed the importance of modernization of labour market in order to increase employment rates and ensure sustainability of the EU social model. The initiative foresees the following actions: to improve labour market flexibility and security, i.e. flexicurity, to motivate people to invest in skills training and continuing education so as to meet the needs of the labour market, to ensure satisfactory working conditions, to encourage generation of jobs, etc. The following EU documents are also related to the upgrading of the vocational guidance system:European Union Council's Resolution „New skills for new jobs" of 2007; European Union Council's resolution „Better integrating lifelong guidance in education and lifelong learning strategies" of 2008, which stresses the promotion of acquisition of career competences as a priority activity; and European Commission's strategy „New Skills for New Jobs: Anticipating and

matching labour market and skills needs" of 2008, which raises the issue of prediction of demand of labour and relevant skills starting from school.

After the restoration of independence (1990), Lithuania implemented a number of projects in the field of vocational guidance, some of them having been related to the creation of the national strategic guidance system. However, even at present the Lithuaniansystem ofvocational guidance is being upgraded and its infrastructure is being reformed. The aim of vocational guidance in Lithuania is to assist persons in informed selection of possibilities of education and occupations relevant to them, create conditions for acquisition of career competencies, to actively shape the career (i.e. via a lifelong succession of the person`s educational, self-realization and work experiences important both to the person and the society). Vocational guidance is implemented by providing services of career education, vocational informing and vocational counseling. (Vocational guidance performance procedure, 2012). Legislation that regulates the performance in vocational guidance has been undergoing constant revisions. One of the possible underlying reasons and also a problematic issue is lack of systematic research into and consistent overview of the development of vocational guidance in Lithuania. The ongoing research studies and problems analyzed are local and focused on individual elements of the infrastructure of vocational guidance. The study conducted by V. Indrašienė et al (2006) on informing, guidance and counseling of students in schools revealed that the guidance system lacks legal regulation of the activities, consistency and coherence. It does not cover the entire spectrum of services to be provided. Also, V. Indrašienė, L. Grinytė (2007) studied the activities of a classroom teacher with regard to the provision of information, advice and guidance for students at school. A. Sokolova (2007) distinguished the theoretical and political prerequisites for the vocational guidance system in Lithuania, and this study is one of integrity and importance. The study conducted by S. Lažauninkienė (2008) includes all the essential functions of guidance, but it covers vocational information, guidance and counseling only for students in their 8th to 12th year of studies in one Lithuanian district general education school. K. Pukelis, L. Navickienė made the study (2008) „Designing career: new concept. Overcoming intercultural and linguistic barriers". L. Navickienė (2010) examined career counselor training simulations. E. Nazelskis (2010) performed research into educational and vocational guidance in the context of business development issues. A. Railienė (2010) studied the development of vocational adviser's competency within the framework of education of social pedagogues. In their studies of collaboration between business and education in the area of vocational guidance, E. Nazelskis, A., Laurinaitis (2014) reported an increasing tendency when university graduates choose to continue studies in vocation-oriented colleges, because university education does not grant employment. The fact that a number of professionals who have gained university education continue education in vocational schools indicates a strong depreciation of

public and personal resources invested in the earlier professional education at universities. This implies problems in the system of vocational guidance in Lithuania. R. Sargautytė, D. Juozapavičienė, E. Šatienė, (2013) investigated vocational guidance as a vocational rehabilitationservice among disabled people and demonstrated that the methods for vocational guidance for disabled people are efficient, which may be proved by good results in education and employment. However, D. Liukineviciene (2011) in her study on Youth Employment Policy and Career Guidance of Schoolchildren in North-western Lithuania disclosed a shortage of services of vocational guidance and problems in the area of vocational guidance. J. Surgėlienė, N. Bankauskienė (2014) researched the historical context of career education in Lithuania.

The object of the research is the analysis of achievements and aspects to be improved in vocational guidance in Lithuanian general education schools in 1992-2014. Achievements are expressed in terms of the results of activities in vocational guidance, whereas aspects relate to the aproach to vocational training. The aim of the research is to present the results of achievements and aspects to be improved in vocational guidance in Lithuanian general education schools. The following **methods of research** have been used: overview of scientific literature, analysis of documents, historical analysis, synthesis, generalization. Tidikis R. (2003) defines generalization as a separate important research method, because in the course of generalization common concepts to be applied to new situations are formulated as a result of search for a relationship between what is individual and common, or between what is common and individual (p. 389).

Vocational guidance in Lithuania from 1990, when the country's independence was restored, to 2008: achievements and issues to be improved

In 1992 Lithuania approved the concept of education that covered career education aspects and expressed an explicit goal for an educated person to be able to make responsible decisions, act independently and be ready for professional activities, be capable and willing to adapt to and improve the ever changing social, economic life (Concept of Education in Lithuania, 1992). Yet a truly significant and biggest input in the field of vocational guidance was made in the 2004-2008 EU funding period: large-scale projects were carried out, which actually contributed to shaping and developing vocational guidance. During the period the Lithuanian Ministry of Education implemented two strategically important projects: development and implementation of vocational guidance system (BPD2004-ESF-2.4.0-01- 04/0065) and creation and development of an open information, counselling and guidance system (AIKOS) (BPD2004-ERDF-1.5.1-04-04 / 0003). The EU's structural support phase helped to create the basis for career education services in Lithuania, i.e. education

programs and methodological tools were developed, legal documents important for career education were prepared. The Lithuanian Minister of Education approved the Vocational Guidance Strategy in 2003 and together with the Minister of Social Security and Labour in 2004 approved the Vocational Guidance Strategy Implementation Plan, and thus the actual conditions for the development of vocational guidance were created in Lithuania.The main priorities as stated in the Vocational Guidance Strategy Implementation Plan (2004) are as follows:

1. To create a legal framework for vocational guidance.
2. To improve the methodology for vocational guidance.
3. To develop a training system for vocational guidance staff.
4. To develop a planning and coordination system for vocational guidance.
5. To develop the infrastructure for vocational guidance.
6. To improve the financing system for vocational guidance.
7. To develop the system for auditing the performance in vocational guidance.

Much attention has been given to the development and improvement of human resources, namely, vocational guidance professionals (teachers, school psychologists, social educators, vocational counselors, career counselors), education of professionals, including in-service training. Training standards were established for the preparation of vocational advisers, vocational counselors; continuing education programs for vocational advisers and vocational counselors were elaborated. Since 2007, the continuing education and requalification of vocational guidance professionals and the staff of career information centers has been taking place, with great attention being paid to the professional ethics of vocational guidance specialists.

The National Vocational Guidance in Education Program was approved in 2007 and helped to achieve strategic objectives of vocational guidance. Its major purpose was to enable the development of the system of vocational guidance by ensuring integral and consistenttransition from the secondary school to vocational or higher education, diversity as well as high quality and availability of vocational guidance services to all participants in the education system, development of tools and training of specialists for vocational guidance, involvement of social partners and other stakeholders in the development of vocational guidance services.

In 2004-2008 the network of career education structures, the so called Career Information Points (hereinafter - CIP) was created in general education and vocational schools, and formed the basis for career education and infrastructure development. According to the Vocational Guidance Strategy Implementation Plan (2004), 41 CIP had to be set up in 2004, 280 CIP should have been established and endowed with the necessary equipment in 2006, and 360 CIP in 2007. However, the CIP development fared worse than other

activities in the field of vocational guidance. Another important priority was the creation and development of an open information, counseling and guidance system. There was access provided via Internet networks to AIKOS data in the general education and vocational schools, connection to the single European vocational guidance information system was enabled, arrangements for transfer of persons who left the general education system to vocational guidance centers and delivery of computerized data to the related vocational guidance organizations were undertaken. The established career information management AIKOS to this day ensures dissemination of the most important information in the field of vocational guidance.

It can be assumed that by 2008 many strategically important activities which enabled the development of vocational guidance had been implemented, four elements can be distinguished: guidance planning and management; guidance infrastructure; guidance content; guidance staff.

The development of vocational guidance in Lithuania was not easy as it was necessary to build up a new system and infrastructure. Researchers believe that the experience of the Soviet years had a negative impact; for example, according to L. Navickienė (2010), „negative attitude to the concept of vocational guidance is also associated with the fact that during the Soviet period forced guidance of pupils to vocational schools existed in order to meet the needs of the planned economy" (p. 18). There still remain many things to be done in the process of creation of the new vocational guidance system. According to the National Program of Vocational Guidance in Education (2007) and other documents and studies, as well as basing on the opinion of Lithuanian students and information on the website of the career department of the non-formal education centre, the weaknesses of vocational guidance are classified by four elements: guidance planning and management, guidance infrastructure, guidance content, guidance staff (see Table 1). Planning and management of vocational guidance, including managerial tools, need to be improved because the system does not encompass all levels of educational institutions; there is no full range of services; the system lacks consistency and coherence; the activities and functions of vocational guidance service providers are not well defined or properly differentiated. And no plans were being made to establish a system of vocational guidance quality assurance (with regular monitoring and assessment of the vocational guidance system in conformity with the set criteria, identification of the condition, strengths and weaknesses, development and implementation of activities to rectify weaknesses); monitoring activities by the authorities that administer vocational guidance are scarce, inefficient and random. There have been no systemic analysis, evaluation or forecasting of the situation or the development of career education. Scientific publications, social and education policy reviews and reports highlight the lack of a coherent legal framework, with clearly enshrined structure of career education services and its operation mechanism (Barkauskaitė, 2007; Lažauninkienė, 2008;

Liukineviciene, 2011; Nazelskis, Laurinaitis, 2014; Sokolova, Stanišauskienė, 2007; Vocational Guidance Strategy Implementation Plan, 2004).

Table 1. Vocational guidance aspects that can be improved in Lithuanian general education schools for 2003-2008

Vocational Guidance Planning and Management	Infrastructure for Vocational Guidance	Vocational Guidance Content	Vocational Guidance Staff
Systems of planning and management of vocational guidance should be improved; No system for the assurance of vocational guidance quality has been created, only some elements of such system have emerged.	CIP activities are not well coordinated; CIP differ in terms of efficiency, financial and methodological support; CIP conditions do not lead to improvement of social equality between pupils of rural areas and those of urban areas because of inadequate infrastructure.	Lack of specific measures targeted at vocational guidance components: vocational counseling, career education, career monitoring organization; social partners are not sufficiently involved in shaping the content of vocational guidance; lack of different forms of vocational training services, when often only information services are provided; ► students/pupils received an inadequate amount of information on how to choose a profession, on the relevance of the profession and further learning opportunities, situation in the labour market; ► the general competence of students has grown, whereas their competence in career planning, management skills or their professional career has not.	Shortage of professional providers of the services of professional guidance; the competence of the existing ones has to be improved.

The infrastructure of vocational guidance needed to be improved because CIP activities were not appropriately coordinated; there were differences in their efficiency, financial and methodological support. The network of providers of services of vocational guidance needed to be improved as it failed to cover all educational institutions and there was a shortage of regional structures able to ensure the availability of guidance services in rural areas. The vocational guidance system did not encompass all students, it did not contribute to the decrease in social equality between urban and rural students; the biggest emphasis was placed on work with older adolescents. The content of vocational guidance also needed to be improved as there was a clear shortage of legal regulatory acts, programs, methodologies or other special tools for vocational

guidance, even though some strategic documents on some important issues did exist. Social partners were not sufficiently involved in the shaping of the guidance content. As shown in the CIP staff survey of 2008, individual counseling was the most common service provided (affirmed by 96.5 per cent of respondents), other most common services were organization of events, tours and excursions (CIP staff survey, 2008). J. Sirgėlienė, N. Bankauskienė (2014) note that after Lithuania regained independence (1990), the concept of conscious choice of profession based on the student`s needs, abilities and possibilities was prioritized. However, even if the concept was established, major importance should have been attached to factual activities in the area of vocational guidance. Thus, efficient provision of services in vocational guidance was difficult to achieve. In general education schools CIP did not consider the diversity of career education services, they normally provided introductory information services only. Consultations, vocational practicing tools and activities were scarce, and therefore no opportunity to gain initial experience in accordance with the students` professional intentions was granted. Vocational guidance focused on the development of key competences of students, but not on career planning and management competencies that could help them to act responsibly in planning the professional careers. Practical activities were irrelevant in terms of consistency in rendering services in vocational guidance. Basing on the existing documents, vocational guidance is to be performed by providing services aimed at career education, vocation-based information and vocational counceling (Vocational guidance performance procedure, 2012). It was also irrelevant in terms of activities important for vocational guidance, as highlighted by M. Barkauskaitė (2007) in her systematic survey of central issues identified in strategic documents and researchers`reports, i.e „identification of matching criteria for each career, highlighting of personal properties important for the career, introductory knowledge of requirements for each career, availability of real-life experience, counseling of and concrete activities with the specific career-oriented students by motivating them, helping then to adapt, etc." (Barkauskaitė, 2017, 9. 110)

Vocational guidance in Lithuania since 2009

As the labour market undergoes changes, it is necessary to improve the vocational guidance system. According to the National Vocational Guidance in Education Program (2007), by 2014 it was important to carry out the most important activities: to create tools for vocational guidance, organize continuing education of professionals; develop the infrastructure of vocational guidance; create a model for secondary school students` career education and begin its implementation; install career education and career monitoring infrastructure in general education schools; develop AIKOS. While implementing the project on „the creation and development of career education and monitoring models in

general education and vocational training", a career education model was established for general education schools and vocational training schools; the model of the monitoring system in career education, and recommendations for its implementation were developed; the software (information system) was designed and installed for the realization of the model of the monitoring system in career education, new curricula and methodologies were devised (National Vocational Guidance in Education Program, 2007). The project involved nearly 2,000 education support professionals (teachers, school psychologists, social pedagogues) from 700 general education schools and 70 vocational training institutions. During the implementation of the project (completed in 2014) career education services were provided for 88,000 students in Lithuanian general education schools, vocational schools and municipal career education centers. In 2014, the Lithuanian Minister of Education and Science approved a career education program designed „to ensure the effective career competencies needed to consciously and successfully develop and manage the careers (i.e. a lifelong sequence of personal experience of learning, self-expression and working activities significant for the individual and the society) and education, while respecting the student's aptitudes, values and skills that help him/her learn, develop and realize himself/herself" (Career education program, 2014, paragraph 2). The career education program also defines the career education objectives, scope and tasks, as well as career competencies, i.e. holistic knowledge and understanding, abilities and attitudes towards them, learning, self-realization and job opportunities, career decision making, career planning, coordination with other areas of life and the realization, career competency development framework, career competency development guidance, career skills assessment of students in schools with general education and (or) vocational training programs (Career education program, 2014). However, the criteria and tools developed earlier for monitoring career education in the general education and vocational schools do not provide any assumptions that would allow to state that a quality assurance system is functioning in vocational guidance. One of basic drawbacks is failure to carry out a methodological, systemic assessment of the activities of the staff or to monitor changes in staff competency at the institution responsible for coordination of vocational guidance. The review of existing legislation, normative documents and implemented projects allowed to distinguish career education and career monitoring as an obvious priority in vocational guidance. In point 5.8 of the Vocational guidance performance procedure (2012), a particular reference is made to career education as a priority area in vocational guidance, whereas vocational information and counseling are complementary to career education and also help individuals to solve specific career issues. However, there is no study that would reflect changes in career education in general education schools. If reference is made to the national study of 2009, it could be seen that career education has been one of the weakest aspects of the vocational guidance

system (CIP staff survey, 2009). It is stated that 90 per cent of CIP staff distinguished provision of accumulated systematic information as the most frequent activity. Advice facilitating decision-making was named as the most frequent activity by 86 per cent of those who responded to the question.Also, most of career counselors were evaluated as good at the study of the personality characteristics (68 per cent), helped people to adjust their education (59 per cent) and create an individual education plan (57 per cent). Minority of institutions within CIP organized education of career planning and management skills (35 per cent) and vocational practicing (23 per cent). (CIP staff survey, 2009). So far, no profound research into vocational guidance in Lithuania has been undertaken, except for a few more systematic studies (CIP staff survey, 2008; CIP staff survey, 2009; Liukineviciene, 2011; Navickienė, 2010; Nazelskis 2010; Nazelskis, Laurinaitis, 2014; Pukelis, Navickienė, 2008; Sargautytė, Juozapavičienė, Šatienė, 2013). The „Students vocational guidance (career education) in 2012-2013 monitoring report" published in 2014 does not provide analysis but just factual referential information, though the published data might be helpful for getting a clearer understanding and providing possibilities for analysis. It may be assumed that the failure to prepare a high quality report by the specialists of the institution that coordinates vocational guidance may be attributed, among other factors, to lack of collaboration with scientists and researchers (systemic cooperation with scientists, researchers and business representativeshas not been confirmed after examination of information on the website, content of reports or other publicly available information of the company that administers vocational guidance.) Studies (Liukineviciene, 2011; Nazelskis, Laurinaitis, 2014) and reports (CIP staff survey, 2008; CIP staff survey, 2009) reveal the areas in which cooperation between vocational guidance specialists and social partners should be improved, but do not provide any conditions for qualitative changes in this aspect.

There are doubts whether the development of the guidance system is consistent, even when it seems that an important foundation has been laid: the strategic national projects were implemented, the creation of a legal framework and infrastructure was started. However, doubts are expressed even without giving a chance for the set targets to be fully achieved. As a result, destruction of the elements of the infrastructure started, with specially trained psychologists leaving the labour market of training services with no further assignments, loss of methodological tools and special licensed working instruments. Renaming of professionals who provide vocational guidance services is taking place together with renewal of discussions concerning the conception of vocational guidance because in the report of the only strategic coordinator of vocational guidance, i.e. the Career department of the Lithuanian students non-formal education centre, guidance was defined as career education (Students vocational guidance (career education) in 2012-2013 monitoring report, 2014).Hence, the problems observed and identified in the vocational guidance area by researchers

Navickienė L. (2010), A. Sokolova and V. Stanišauskienė (2007) five years ago remain relevant. These are the problems related to the concept of guidance because of the varying nature of the concept of vocational guidance, its different definitions depending on a broader cultural, social and political context. Lithuanian researchers developed important but not profound preconditions for the development of a holistic, consistent guidance system model, as the importance was attached to individual guidance elements. Such factors as difference in approach to the phenomenon of vocational guidance, insufficient communication between the institutions involved in the formation and implementation of vocational guidance policy, Lithuanian and EU documents that regulate the field of vocational guidance and their enforcement practices, have resulted in inadequacy of conditions for the design and development of a successful vocational guidance system.

Conclusions

In Lithuania national projects that have been implemented in the area of vocational guidance and the activities undertaken have created favourable conditions for the dvelopment of a system of vocational guidance with an infrastructure, because legal acts have been created and publicated, specialists of vocational guidance have been trained, new jobs have been generated,attention to methodological and financial support has been given. However, efficient development of the system of vocational guidance in Lithuania is hindered by change of priorities in vocational guidance, including the content and infrastructure of vocational guidance; failure to find a clear definition for concepts involved in the field of vocational guidance; lack of systemic studies at the national level and failure to assess, in a consistent and methodological manner, the activities or the competency of the staff of the institution that coordinates vocational guidance at the national level. To achieve an overall conception of quality assurance and an efficient system of vocational guidance quality assurance, it is important to abandon the concept of inspectorate, when specialists of the highest level assess, in a systemic and methodological way, their own activities and their activities are accredited according to the set criteria. Experience of specialists of vocational guidance and structural subdivisions in collaboration with scientists varies, the fact that such collaboration may be scarce or non-existent is a matter of concern.

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YOUTH EMPLOYMENT TRENDS AND PROSPECTS IN THE EUROPEAN UNION: A COMPARATIVE ANALYSIS

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Abstract. Youth employment is of great importance and relevance nowadays. The article analyses the issues of youth employment among the Member states of the European Union. According to the statistics and research data provided by the World Bank and Eurostat the situation of youth employment among the European Union member states and all across the Globe is deteriorating. The article focuses on analysing the programmes and initiatives of the European Union competent institutions and Member states of the European Union which aim to decrease the rates of youth unemployment.

Aim of the study: to evaluate the programs and initiatives aiming to decrease youth unemployment which are currently being implemented by the Institutions and Member states of the European Union.

Methods of the study: secondary analysis of the collected data (general overview).

Results: programs and measures aiming to decrease the youth unemployment rates in the EU Member states are being vastly initiated and implemented since early 2010. With the endorsement of the Plan to tackle and reduce youth unemployment rates, which foresees to accelerate the implementation of the Youth Employment and the Youth Guarantee initiatives, various youth employment promotional tools are being applied among the Member states. After analyzing and evaluating the aforementioned programs and initiatives carried out by the Institutions and Member states of the European Union, general tendencies of decreasing the youth unemployment rates may be determined.

Keywords: youth, employment, unemployment, European Union.

Introduction

Youth unemployment is a crucial and relevant issue to tackle not only among the Member states of the European Union but in a Global scope as well, so employment issues are considered to be a priority.

Employment is understood as legitimate (i.e. not prohibited by law) actions of labour carried out by persons, resulting in tangibles or services in order to satisfy the needs of individuals and the community and to provide income (Vainienė R., 2008). A person is also to be considered employed in the aforementioned sense in those cases when one is unemployed temporarily, e.g. is on vacation or ill, yet the person still maintains the working ties with a concrete working position in a company, establishment, institution or (one's own) business.

The issue of unemployment remains object to both political and economical debate. Economists analyse unemployment seeking to determine the

reasons of it, its levels, macro and micro economical loss of unemployment, where the politicians aim to prepare and improve the employment policy of the Governments.

Both Lithuanian and foreign academics and scholars consider the issue of employment to be one of the main and crucial socio-economical problems: B.Martinkus (2005), D.Beržinskienė (2005), P.Havlik, (2007), M.Boianovsky (2003). There is a significant number of researches, articles and studies carried out regarding employment yet there is a lack of research of youth employment and the aforementioned issue is mostly analysed by economists: R.B.Freeman (1982, 2000), J.Medoff (1982), D.G.Blanchflower (2000), N.O'Higgins (2001).

Lithuanian scholars who examine and analyse the issue of youth employment are L.Okunevičiūtė Neverauskienė (2007, 2008, 2012), B.Gruževskis, (2007) J.Moskvina (2008), A.Pocius (2007), V.Česnuitytė (2008, 2012) and others.

Youth commonly is described similarly in countries as being a group of persons aged 14-15 to 29-30. The Fundaments of Youth Act of the Republic of Lithuania defines youth as persons aged 14-29 (Lietuvos Respublikos Jaunimo politikos pagrindų įstatymas Nr. IX-1871, 2003 m. gruodžio 4 d).

According to the data provided by the Lithuanian department of statistics there were 631 000 persons aged 14-29 living in Lithuania in 2013, making 21 percent of the whole population of Lithuania in 2013 (Information provided by the Lithuanian department of statistics. www.stat.gov.lt). During the last decade the number of persons aged 14-29 living in Lithuania has reduced by 145 000 which makes up 18,7 percent (http://osp.stat.gov.lt/documents/10180/259432/ Lietuvos_jaunimo_statistinis_portretas.pdf).

The objective of the article is to determine the tendencies and perspectives of youth employment by providing a thorough analysis of the programmes and initiatives conducted by the institutions of the European union and the Governments of the Member states of the European union which aim to reduce the youth unemployment rates.

Tasks to fulfil in order to attain the objective:
1. To analyse the programs and initiatives conducted by the EU institutions and the governmental authorities of EU Member states which particularly aim to reduce youth unemployment rates.
2. To compare the levels general unemployment and youth unemployment in distinct EU Member states.

Methods of the research:
Analysis of data gathered by research and analysis of statistical material.

Programs conducted by the EU institutions and Member states to reduce the rates of youth unemployment

In 2010 the European Union initiated a significant number of programs aiming to reduce youth unemployment. *Youth on the Move* is an initiative to improve the conditions of youth education and possibilities of employment by encouraging the youth to participate in various scholarship programs and to participate or study in educational programs. This was expected to be achieved by encouraging EU Member states to ease the transition period and procedure going from schools and other education facilities directly to working places by adjusting and altering the youth education and training programs so that they would be more in compliance with the actual needs of youth (http://ec.europa.eu/social/main.jsp?catId=950&langId=en).

As a part of *Youth on the Move* in 2012 another program called *Your first EURES Job* was initiated – a mobility program aiming to assist young European citizen to get employed in EU. EU citizens aged 18-30 which were legally living in a Member state were able to participate. (http://ec.europa.eu/social/main.jsp? catId=993&langId=en).

Another important element was the *Youth opportunities initiative* implemented in the academic year of 2012-2013. This program was intended to help persons which do not have a secondary education by encouraging them to either go back to finish their studies or to engage in vocational schools to obtain a qualification of great request in the employment market. The objective of the initiative was to increase the possibilities to get employed in another EU Member state by promoting a close cooperation with political institutions, business and the unions on a regional and local level (http://ec.europa.eu/social/main.jsp? catId=1006&langId=en).

In 2012 by the initiative of the European Commission *Youth employment working groups* were established in Greece, Ireland, Italy, Latvia, Lithuania, Portugal, Slovakia and Spain. Groups of representatives from the Member state and the European Commission aimed to promote the establishment of new workplaces specifically for young people and to facilitate the access to funding for the small and medium businesses (http://europa.eu/rapid/press-release_ MEMO-13-464_en.htm).

Based on a request made by the European Parliament and the European Council in 2012 the European Commission presented a package of measures to reduce the rates of youth unemployment. The objective of the *Youth employment package* was to create conditions for people younger than 25 years to get a high quality work proposal in a period of 4 months after the person's dismissal or after the person has graduated from school. Moreover the project seeked to create better conditions for continuous learning, apprenticeships or traineeships. With this package there was also an intent to create the *European Apprenticeship Alliance* in order to increase the quality of the apprenticeships

and the scope of the education provided (http://ec.europa.eu/social/main.jsp?langId=en&catId=1036&newsId=1731&furtherNews=yes).

In addition the *Youth guarantee initiative* was intended to facilitate the implementation of the "Europa 2020" strategy which foresees three key goals: to make at least 75 percent of people aged 20–64 employed; to reduce the number of persons without a secondary education to less than 10 percent; to create possibilities for at least 20 million people to ford out of poverty and social exclusion. The European Council agreed upon the *Youth guarantee initiative* in April, 2013. The aforementioned initiative's objective was to ensure that any person younger than 25 years would receive a high quality job offer in four months or he would be offered an opportunity to pursue a continuing education, apprenticeship or traineeship. The *Youth guarantee initiative* presented six main measures: fostering cooperation between business representatives, educational facilities, employment agencies and state institutions; promoting early intervention and activity encouragement; integration of persons into the job market; the effective usage of financial aid provided by the EU structural funds; evaluation of the system; constant improvement and immediate implementation. In addition providing the youth with relevant information, fostering entrepreneurship among students, encouraging them to continue their studies or to enrol in apprenticeships was also emphasised. The initiative invited youth organizations to take part in the process as they may find an easier approach to young people than the representatives of the private or public sectors. EU Member states were urged to introduce taxation reductions for enterprises which employ young people, additionally providing the employers with targeted and well-planned salary subsidies in order to embolden the employers to create more opportunities for young people to get employed or enrol in apprenticeships or traineeships. The importance of promoting youth to initiate their own businesses is also noted in the program. The initiative also urged the governmental authorities to recognize non-formal education equally as formal and to exchange positive experiences and practise with the participants (http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=SWD:2012:0409:FIN:EN:PDF).

Various sources acknowledge the models used in Sweden and Finland as models to be followed while implementing the *Youth guarantee initiative* (http://www.eurofound.europa.eu/publications/htmlfiles/ef1242.htm). The northern European countries approached the youth employment issue much earlier than other EU Member states. The first actual *Youth guarantee initiative* was first carried out in Sweden in 1984, Norway took action in 1993, Finland and Denmark implemented the projects in 1996. Even though during the first attempts to implement the project several problems were experienced, especially in the 90s, the problems did not prevent the initiatives from taking force, on the contrary – the projects were constantly being renewed.For example in 2007 a renewed *Youth guarantee initiative (En jobbgaranti for ungdommar)* took place in Sweden, improved versions of the initiative (*Nuorten Yhteiskuntatakkuu*)

were presented in Finland in 2005, 2010 and 2013. Public employment facilities played the key role and the programs were based on the actual needs of the young unemployed persons and accordingly the persons were offered either a workplace or an opportunity for studies or professional training.

The European Council agreed upon the initiative by adopting a *Youth guarantee recommendation* in addition stating that the Member states must endeavour to provide balance between the demand and supply in the labour market. The countries were urged to embolden the persons to improve their skills in information and communication technologies and that the certificates granted during and after the studies and/or training would be recognized equally on an international level. The aforementioned recommendation requested the states to provide more opportunities and better conditions for the youth to start their own businesses and to provide the society with information regarding individual and independent employment. A significant emphasis has been put on the necessity to integrate unemployed young persons and persons with an educational gap or who are currently not engaged in educational programs. It was noted that there is a ponderable lack of specialist in the fields of information and communication technologies, "green" economics, health and social care.

Another relevant projects is the *European Alliance for Apprenticeships* initiated on 17 February, 2013. The key objectives were to tackle the issue of youth unemployment by improving the conditions, accessibility and quantities of apprenticeships and by altering the attitude of young people towards apprenticeships. It is fair to state that apprenticeships and education based on actual labour activities makes the transition from the educational environment to the labour market much simpler. This strategy involves private businesses in solving the youth unemployment issues because the business sector has a wide access to various databases of traineeship candidates and they are able to provide the sector with a highly qualified labour force (http://ec.europa.eu/ social/main.jsp?langId=lt&catId=89&newsId=1934&furtherNews=yes).

In the meeting of the leaders of the European Council which took place 27-28 June, 2013 another program of measures to cope with youth unemployment was agreed on. The plan was supposed to accelerate the implementation of the *Youth employment initiative* and the *Youth guarantee initiative.*

In 19 June, 2013 the European Commission adopted a communication named *Working together for Europe's young people: a call to action on youth unemployment* which analysed the measures which were used to solve the youth unemployment issue at the time and the actions necessary to be taken into force immediately in order to return the young persons back to being employed or back to education facilities.

These factors were excluded and emphasised in the communication:
- The implementation and actual realization of the *Youth guarantee initiative*;
- Investing into young people via the European structural funds;

- Active financing of the primary stage of the *Youth employment initiative*;
- Simplifying and making the transition from education facilities to employment easier and more possible by providing a high supply of high quality traineeships and apprenticeships and lowering the lack of skills of young people;
- To hasten the reformation process to a introduce the real EU labour market;
- Measures to assist the creation of new workplaces and promoting youth employment, especially the activities of small and medium enterprises.

The communication required the Member states which have a bigger that 25 percent youth unemployment rate to prepare an unequivocal plan on the implementation of the *Youth guarantees initiative* before October, 2013 showing how the institutions of the Member state plan to tackle the youth unemployment issue, what type of financing will be used, how will the progress be evaluated *etc.* Other countries with a lower youth unemployment rate were required to prepare their plans before March, 2014. The European Commission also encouraged to renew the *Youth employment working groups* project which would take place in those areas which have the biggest youth unemployment rates. Member states were asked to promote the movement of labour force in the European union, to strengthen the capacity of employment agencies and to support the small and medium enterprises which particularly employ persons younger than 25 years or offer them more apprenticeships comparing to bigger enterprises. The aforementioned communication recommended to appoint specific pay-outs or to reduce the social security pay-outs for employees with a lower qualification thus promoting the employers to hire more young people, to ensuring closer cooperation between the employment agencies and to modernize them, moreover a significant improvement would be to introduce entrepreneurship studies in high schools, vocational schools and universities. Additionally the communicate noted that it is important that the young persons would have well-developed multiple language, information technologies skills and would generally have more versatile skills. The European Commission prognoses that EU will have a shortage of personnel in the field of information and communication technologies by 900 000 specialists in 2015. It also stated that certain education must be applied where the persons would be specifically trained to work in areas of health and social security and green economics hence the educational institutions were invited to adapt and adjust accordingly to the vastly changing tendencies of the market thus waiving educational programmes with less potential or demand in the market.

Having in mind that there is a constantly growing demand of employees with a high qualification the persons with no skills or low qualifications will

encounter problems getting employed (http://ec.europa.eu/europe 2020/ pdf/youth_lt.pdf).

The levels of general unemployment and youth unemployment in the EU Member states

The International Labour Organization states that there are 75 million people (6 percent) aged 15-24 which are currently unemployed in the World. The latter number may be even bigger due to a certain amount of people which are not even participating in the labour market thus not included in the data and according to the World Bank there may be 260 million of these persons. According to a research carried out by *The Economist* there may be approximately 290 million young people in the World which do not participate in the labour market in any way (this number is an equivalent of the number of people living in all of the states of USA, or constitutes one fourth of the total amount of young people globally). However almost one fourth of the so-called passive youth is women in South Asia which do not engage in employment relations due to strict traditions. On the other hand one third of the young people from well-developed countries work under fixed-term contracts whereas one fifth of the youth living in the less-developed countries work either unofficially, without pay or in their families (The Economist. Youth unemployment: generation jobless. http://www.economist.com/news/international/21576657-around-world-almost-300m-15-24-year-olds-are-not-working-what-has-caused).

The youth unemployment level in March, 2013 was 23,5 percent, the rate of unemployed persons aged 15-24 was twice the rate of general unemployment (9,3 percent). Approximately 6 million of young persons were unemployed, an estimated 7,5 million of all young people were not enrolled in educational programs. This concluded 12,9 percent of all young European citizens. One out of five EU citizens did not manage to find a job, and even if a person was employed, mostly they were working under a fixed-term agreement or was engaged in a season occupation. At the same time there were 2 million vacant workplaces. Over the past four years the number of youth employment level dropped three times faster than levels of any other age groups.

One of the main reasons of this vast growth of youth unemployment was the financial crisis which caused a lot of cut-offs in enterprises mainly minimizing the number of working places thus dismissing young employees and even if young persons were to be employed, there was a strict experience requirement. Despite the effort to reduce youth unemployment the general situation regarding the issue got worse by the year and the poor youth employment situation still remains to this day. In some of the EU Member states the general level of unemployment rose three times. In 2013 3,4 million less young people were employed comparing to the number in 2007. More than 30,1 percent of the unemployed persons younger than 25 years were unemployed for

more than 12 months in a row. It was estimated that the general expenses of EU Member states due to youth unemployment made up 1,2 percent of the GDP.

Table 1. General unemployment rate and youth unemployment rate in EU Member states

Country	Unemployment rate 2009 m., %	Youth unemployment rate 2009 m., %	Unemployment rate 2012 m., %	Youth unemployment rate 2012 m., %	The gap between unemployment and youth unemployment rates 2009 m., percentage points	The gap between unemployment and youth unemployment rates 2012 m., percentage points	The gap change between youth unemployment and unemployment in 2012, 2009, percentage points
Austria	4,8 %	10,0 %	4,3 %	8,7 %	5,2 %	4,4 %	-0,8 %
Denmark	6,0 %	11,8 %	7,5 %	14,1 %	5,8 %	6,6 %	0,8 %
Estonia	13,8 %	27,5 %	10,2 %	20,9 %	13,7 %	10,7 %	-3,0 %
Greece	9,5 %	25,8 %	24,3 %	55,3 %	16,3 %	31,0 %	14,7 %
Spain	18,0 %	37,8 %	25,0 %	53,2 %	19,8 %	28,2 %	8,4 %
Italy	7,8 %	25,4 %	10,7 %	35,3 %	17,6 %	24,6 %	7,0 %
Latvia	18,2 %	36,2 %	14,9 %	28,4 %	18,0 %	13,5 %	-4,5 %
Lithuania	13,6 %	29,0 %	13,3 %	26,4 %	15,4 %	13,1 %	-2,3 %
The Netherlands	3,7 %	7,7 %	5,3 %	9,5 %	4,0 %	4,2 %	0,2 %
Portugal	10,6 %	24,8 %	15,9 %	37,7 %	14,2 %	21,8 %	7,6 %
Germany	7,8 %	11,2 %	5,5 %	8,1 %	3,4 %	2,6 %	-0,8 %

Remark: Table 1 is prepared according to the information provided by Eurostat.
http://epp.eurostat.ec.europa.eu/statistics_explained/index.php/Unemployment_ statistics

In 2012 the highest level of youth unemployment was recorded in Greece (55,3 percent), Spain (53,2 percent) and Portugal (37,7 percent). The gap between the general unemployment and youth unemployment rates was the biggest in Greece, Spain, Portugal and Italy (21,8 – 31 percentage points). The lowest rate of youth unemployment among the EU Member states was recorded in Germany (8,1 percent), Austria (8,7 percent), The Netherlands (9,5 percent) and Denmark (14,1 percent). The gap between the general unemployment and youth unemployment rates were also the lowest in the aforementioned countries (2,6–6,6 percentage points).

Regarding the Baltic states, the highest rate of youth unemployment was recorded in Latvia (28,4 percent), the level of youth unemployment was a little lower in Lithuania (26,4 percent) and the lowest level was recorded in Estonia (20,9 percent). The gap between the general unemployment and youth unemployment rates in the Baltics was 10,7–13,5 percentage points.

Comparing the youth unemployment rates in 2012 and 2009, the biggest reduction was seen in Latvia (by 7,8 percentage points), Estonia (by 6,6 percentage points), Germany (by 3,1 percentage points) and Lithuania (by 2,6 percentage points).

Analysing the changes of the gap between the general unemployment and youth unemployment rates of 2012 and 2009 it may be stated that the gap decreased the most in the Baltic states (in Latvia – by 4,5 percentage points, Estonia – by 3 percentage points, Lithuania – by 2,3 percentage points).

All in all it may be stated that despite the various measures, initiatives and programs implied during the years since 2010 in order to cope with the youth unemployment problem, they seize to show significant effectiveness since the youth unemployment issue still remains to be crucial and open for solving having in mind that the youth unemployment rates increased in most of the EU Member states and that the gap between the general unemployment and youth unemployment rates grew as well.

Conclusion

By approving the schemes of measures to cope with the youth unemployment which foresee speeding up the implementation of the *Youth employment initiative* and the *Youth guarantee initiative,* different measures are being implied in different EU Member states. It is evident that some countries are likely to apply structural and combined projects, which aim to aid particular groups of the youth – acquiring social and professional skills, promoting entrepreneurship *etc.* Yet in other countries another approach is taken by orientating the measures not to affect the young persons directly or to aid them financially but pursuing various advantages and exemptions for the employers themselves – reduction of social security pay-outs, compensation of salaries, granting subsidies for creating a workplace *etc*.

Despite the vast concern about the youth unemployment issue, the initiatives and measures being applied at the EU level since 2010, the general level of unemployment and especially the youth unemployment rates among all of the EU Member states (as globally as well) are increasing thus fundamental and substantive structural changes are essential.

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VESELĪBA UN SPORTS

HEALTH AND SPORT

RĪGAS STRADIŅA UNIVERSITĀTES VESELĪBAS APRŪPES VIRZIENA STUDENTU AEROBĀS DARBASPĒJAS

Aaerobic Capacity of Health Care Students at Riga Stradinš University

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Abstract. Aerobic capacity (AC) is one of health indicators that characterise the functional status of heart, blood vessels, respiratory and other bodily systems. Aerobic capacity depends on several factors: the health conditions, gender, age and the level of physical activities. Students spend many hours in a sitting position in lectures, libraries, when preparing homework, as well as when watching the TV and sitting by the computer. As a result students' work abilities decrease and the health conditions deteriorate. Health care specialists should be physically active, not only for the sake of their well-being and health conditions, but also they should to be able to motivate their clients to have an active lifestyle.

Objective of the research. The objective of the research is to explore aerobic capacity of healthcare students and analyse it within the context of the respective age group population. Aerobic capacity was determined for 730 students (517 women and 213 men in the age group from18 to 30 years) by applying the veloergometry test of the World Health Organisation (WHO) and using veloergometers Monark Ergomedik 839E. Pursuant to the WHO test results during the studies aerobic capacity indicators deteriorated for the majority of students.

Keywords: Aerobic capacity, students, health care students.

Ievads
Introduction

Aerobās darbaspējas (AD) ir viens no veselības rādītājiem, kas raksturo sirds un asinsvadu, elpošanas, kā arī citu organisma sistēmu funkcionālo stāvokli. Aerobās darbaspējas ir atkarīgas no daudziem faktoriem: veselības stāvokļa, dzimuma, vecuma, kā arī no fiziskās aktivitātes līmeņa. Jaunatnes un studentu fiziskās aktivitātes līmenis ir ļoti zems. Studenti daudzas stundas pavada sēžot lekcijās, bibliotēkās, gatavojot mājas darbus, kā arī pie televizora un datora. Tā rezultātā pazeminās studentu darbaspējas un pasliktinās veselības stāvoklis, rodas stājas, liekā svara problēmas, sirds asinsrites un elpošanas

sistēmas problēmas, pasliktinās rādītāji, pēc kuriem var izvērtēt fizisko sagatavotību (Arnis & Horna-Butkeviča, 2003; Феофилактов, 2005). Dažādos literatūras avotos ir dažādi dati par studentu fiziskās mazaktivitātes līmeni augstskolā, bet kopumā mazaktīvu studentu skaits svārstās no 22% līdz 88% (Bianchini de Quadros et al., 2009; Irwin, 2007; Madanat & Merrill, 2006). Fiziskā mazaktivitāte ir aktuāla problēma sabiedrības veselības jomā (Bianchini de Quadros et al., 2009; Chevan & Haskvitz, 2010; Rees et al., 2006; Rezaimakesh & Akuiri-Farscani, 2004), turklāt nepietiekama fiziskā sagatavotība jaunībā ir provocējošs faktors veselības problēmām turpmākajā dzīvē (Madanat & Merrill, 2006; Rees et al., 2006; Sauka et al., 2011; Warburton et al. 2006). Tādēļ būtu svarīgi, uzsākot mācības, turpināt vai uzsākt arī fiziskās aktivitātes. Tāpat fizisko aktivitāšu ietekmē uzlabojas vielmaiņa, samazinās asinsspiediens, palielinās cirkulējošo asiņu daudzums, samazinās sirdsdarbības frekvence gan miera stāvoklī, gan slodzes laikā, palielinās sirds un tās kontraktīlās spējas, palielinās cirkulējošo asiņu daudzums, kā arī uzlabojas gan ieelpas, gan izelpas rezerves tilpumi, gan vitālā un totālā plaušu kapacitāte (Love et al., 2011; Park et al., 2010; Rezaimakesh & Akuiri-Farscani, 2004; Scharhag- Rosenberg et al., 2010; Schjerve et al., 2008). Regulāra optimālas intensitātes fiziska slodze relatīvi īsā laikā ievērojami paaugstina aerobās darbaspējas (Arnis et al., 2004; McArdle, 2007). Veselības aprūpes speciālistiem ir jābūt fiziski aktīviem arī pašiem, ne tikai savas pašsajūtas un veselības stāvokļa dēļ, bet arī lai spētu motivēt savus klientus aktīvam dzīvesveidam (Chevan & Haskvitz, 2010; Mitchell et al., 2007; Rao et al., 2012).

Pētījuma mērķis bija izpētīt Rīgas Stradiņa universitātes (RSU) veselības aprūpes virziena studentu aerobās darbaspējas un analizēt tās kontekstā ar atbilstošās vecuma grupas populāciju.

Materiāls un metodes
Material and Methods

Pētījuma grupu veidoja 730 studentiem (517 sievietes, 213 vīrieši) vecumā no 18-30 gadiem. Dalībnieku atlase tika veikta pēc brīvprātības un nejaušības principa, iekļaujot 286 pirmā studiju gada studentus, 233 otrā, 110 trešā un 101 ceturtā un piektā studiju gada studentus no Rehabilitācijas fakultātes, Medicīnas fakultātes, Sabiedrības veselības fakultātes. Tika izslēgti studējošie ar hroniskām saslimšanām, kas radīja funkcionālu ierobežojumu, kā arī, ja tika konstatētas medicīniskas kontrindikācijas veloergometrijas testa veikšanai. Visiem pētījuma dalībniekiem tika veikts Pasaules Veselības organizācijas (PVO) veloergometrijas tests, izmantojot veloergometrus Monark Ergomedic 839E. Katra studenta AD tika analizētas, salīdzinot testu rezultātus ar populācijas rādītājiem pēc starptautiski atzītas aerobo darbaspēju vērtēšanas sistēmas (Shvartz E., Reibold R. C. (1999)), kas balstīta uz attīstītu valstu populācijas aerobo darbaspēju rādītājiem (sk.1.tab.).

Tabula 1. Aerobo darbaspēju vērtējums sievietēm un vīriešiem
Table 1. Aerobicworkcapacityassessment for women and men

Maksimālais skābekļa patēriņš sievietēm (VO$_{2max}$ml/kg/min.)

Vecums	1(ļoti vāji)	2(vāji)	3(zem vidējā)	4(vidēji)	5(labi)	6(ļoti labi)	7(izcili)
20 – 24	< 27	27 – 31	32 – 36	37 - 41	42 - 46	47 - 51	> 51
25 – 29	< 26	26 -30	31 – 35	36 – 40	41 - 44	45 - 49	> 49
30 – 34	< 25	25 -29	30 – 33	34 – 37	38 - 42	43 - 46	> 46

Maksimālaisskābekļapatēriņšvīriešiem (VO$_{2max}$ml/kg/min.)

Vecums	1(ļoti vāji)	2(vāji)	3(zem vidējā)	4(vidēji)	5(labi)	6(ļoti labi)	7(izcili)
20 – 24	< 32	32 - 37	38 – 43	44 – 50	51 - 56	57 - 62	> 62
25 – 29	< 31	31 - 35	36 – 42	43 – 48	49 - 53	54 - 59	> 59
30 – 34	< 29	29 - 34	35 – 40	41 – 45	46 - 51	52 - 56	> 56

Rezultāti
Results

Pēc PVO testa rezultātiem studentu skābekļa maksimālais patēriņš (SMP) bija vidēji sievietēm 35,99±4,1 ml/kg/min, vīriešiem 43,63±5,4 ml/kg/min.

Analizējot pētīto studentu aerobās darba spējas kontekstā ar atbilstošās vecuma grupas populācijas rādītājiem, tika konstatēts, ka 55,32% sieviešu un 53,05% vīriešu tās ir zemākas par vidējiem populācijas rādītājiem un tikai 17,02% sieviešu un 18,31% vīriešu tās ir virs vidējiem rādītājiem (detalizēti rezultāti par pētīto studentu AD attiecībā pret populāciju atspoguļoti 1.att.)

Studējošo sadalījums pēc AD vērtējuma attiecībā pret populācijas normālā sadalījuma, bija novirzīts pa kreisi, kas apstiprināja, ka pētījuma dalībnieku AD vērtējums vairāk kā pusei dalībnieku bija mazāks par vidējo populācijas rādītāju.

Pētījuma rezultāti liecina, ka salīdzinot pirmā un otrā studiju gada studentu vidējos aerobo darbaspēju rādītājus ar ceturtā un piektā studiju gada studentu aerobo darbaspēju rādītājiem, vecāko studiju gadu studentiem tās bija vidēji par 12,4% zemākas. Medicīnas fakultātes piektā studiju gada sievietēm AD bija par 14,3%, bet vīriešiem par 20,2% zemākas nekā vidēji pirmā un otrā studiju gada studentiem. Rehabilitācijas fakultātes fizioterapijas ceturtā studiju gada sievietēm AD bija par 6,4, bet vīriešiem par 8,6% zemākas nekā vidēji tās pašas studiju programmas pirmā un otrā studiju gada studentiem.

Netika konstatētas ticamas atšķirības AD vērtējumā pa dažādām fakultātēm.
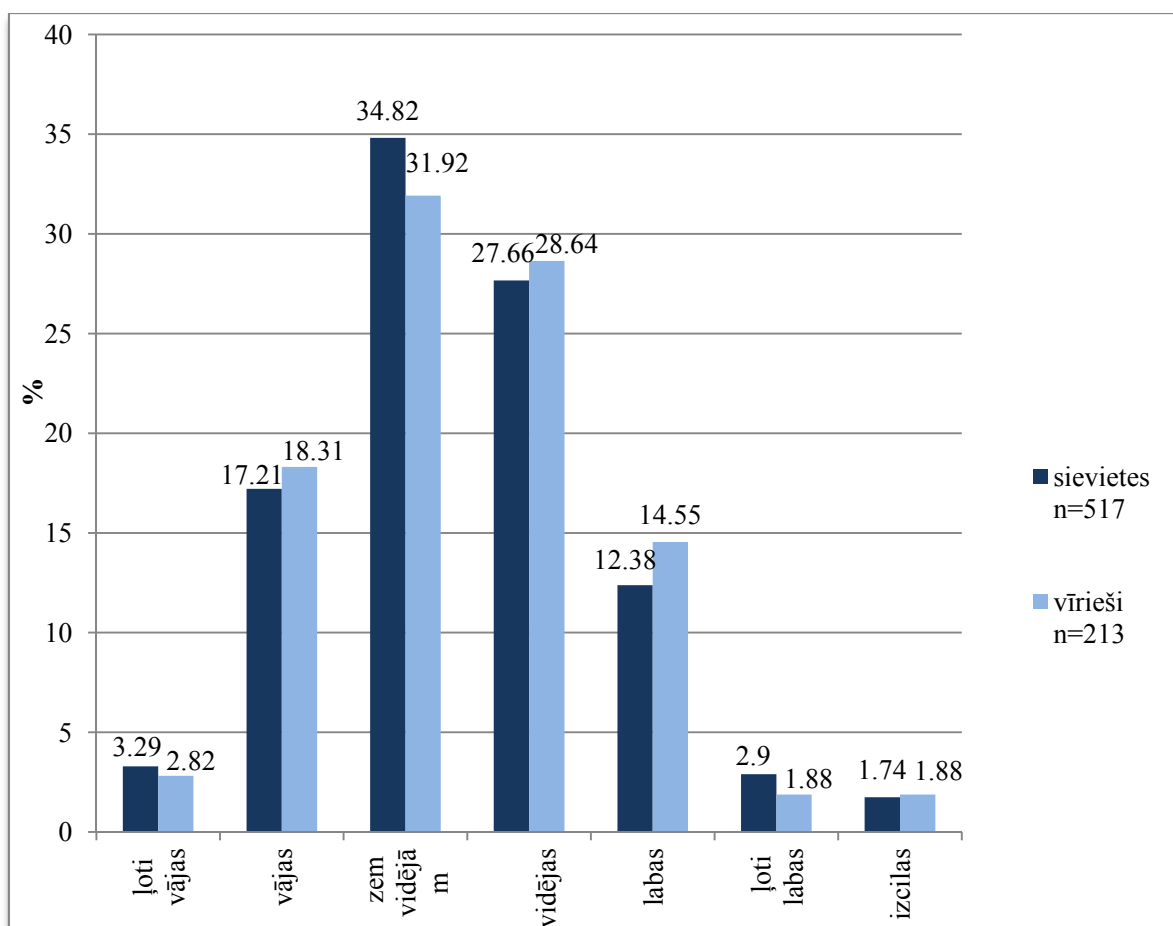
1.attēls. RSU studentu aerobo darbaspēju vērtējums kontekstā ar populācijas rādītājiem
Fig.1 RSU students' aerobic working capacities in context of population

Diskusija
Discussion

Pētījuma rezultāti apstiprināja, ka RSU veselības aprūpes virziena studējošajiem, salīdzinot ar atbilstošā vecuma vidējiem populācijas rādītājiem, ir relatīvi zemas AD. Ņemot vērā, ka galvenais iemesls veseliem indivīdiem pazeminātām darbaspējām ir mazaktīvs dzīvesveids jeb nepietiekama fiziskā aktivitāte, jādomā, ka studējošie salīdzinoši maz nodarbojas ar fiziskajām aktivitātēm. Tomēr šie dati jāanalizē arī kontekstā ar to, ka par vidējiem populācijas rādītājiem ir izmantoti attīstīto pasaules valstu dati, bet ir zināms, ka Latvijā iedzīvotāji kopumā salīdzinoši mazāk nodarbojas ar fiziskajām aktivitātēm (pēc FINBALT (2012) pētījuma datiem tikai 15% no aptaujātajiem iedzīvotājiem nodarbojas ar fiziskajām aktivitātēm Pasaules Veselības organizācijas rekomendētajā apjomā). Tādejādi jādomā, ka studējošo AD varētu būt līdzīgas vidējiem attiecīgās vecuma grupas Latvijas jauniešiem. Būtu interesanti turpināt pētījumu, iekļaujot atbilstošās vecuma grupas Latvijas jauniešus, kuri nestudē un salīdzināt viņu AD ar studentiem.

Tomēr, ņemot vērā, ka studijas saistās ar ilgām mazaktīvi pavadītām stundām (rakstot, lasot, meklējot informāciju), ir pamats domāt par to, ka daudzi studenti nepietiekoši nodarbojas ar fiziskajām aktivitātēm. Kā iemesli mazaktīvam dzīvesveidam studiju laikā dažādu valstu pētījumu datos tiek minēti: laika un motivācijas trūkums, liela slodze studijās, pārmērīgi liels attālums līdz sporta klubam vai sporta nodarbību norises vietai, sociālā atbalsta trūkums u.c. (Bianchini de Quadros et al., 2009; Madanat & Merrill, 2006; Rao et al., 2012). Turpretī jaunieši iesaistās sporta nodarbībās, lai „uzturētu sevi formā", pierādītu savas spējas, izrādītu patiku pret sportu, atbrīvotos no negatīvajām emocijām un stresa u.c. iemeslu dēļ (Mitchell et al., 2008; Rees et al., 2006).

Latvijas augstskolu studentu skatījumā traucējošo faktoru vidū dominē laika trūkums un finansiālā dārdzība. Atsevišķu augstskolu studenti uzsver arī tādu faktoru negatīvo ietekmi kā atbilstošu sporta laukumu lielais attālums no studentu dzīves vai studiju vietas, kā arī to, ka sporta bāzes nav pieejamas studentiem ērtos laikos. Savukārt, studentus Latvijas augstskolās visbiežāk motivē – fiziskās sagatavotības paaugstināšana, norūdīšanās un veselības nostiprināšana, aktīva, interesanta un emocionāli piesātināta laika pavadīšana, kā arī labsajūtas veidošana (Studentu un jauniešu sportošanas paradumi, (2012).).

Nav pilnvērtīgas un viennozīmīgas informācijas par to, kā mainās studentu fiziskā sagatavotība studiju procesa laikā (Mitchell et al., 2008). Literatūrā parādās pretrunīga informācija par šo jautājumu. Daļa avotu uzsver, ka studenti kļūst mazaktīvāki (Madanat & Merrill, 2006; Magutah, 2012; bet citi, ka fizisko aktivitāšu līmenis studiju laikā palielinās (Magutah, 2012).

Ņemot vērā, ka veselības aprūpes virziena studenti ir topošie profesionāļi, kuri tiešā veidā ietekmēs sabiedrības veselību un kuru rokās būs veselības veicināšanas un profilakses programmu izstrāde un realizācija, jo īpaši svarīga kļūst pašu jauniešu veselības veicināšana un veselīgs dzīvesveids. Ir labi zināms, ka personīgais piemērs ir būtisks faktors, kas ne vien nosaka veselības aprūpes profesionāļa pielietotās rekomendācijas saviem pacientiem, bet arī var kalpot kā tiešs motivācijas faktors pacientiem ievērot ieteiktās rekomendācijas par veselīgu dzīvesveidu (t.sk., fiziskajām aktivitātēm ikdienā).

Tomēr jāņem vērā, ka par fizisko aktivitāšu veikšanu studentu ikdienā no dotā pētījuma datiem var spriest tikai pastarpināti, jo tas netika izvērtēts, bet tika vērtētas AD, kas veseliem indivīdiem ir tiešā veidā saistītas ar ikdienas fiziskajām aktivitātēm.

Secinājumi
Conclusions

Vairāk kā pusei RSU veselības aprūpes virziena studējošo AD ir zem, atbilstošā vecuma, vidējiem pasaules attīstīto valstu populācijas rādītājiem, kas liecina par nepieciešamību studiju procesā aktīvam dzīvesveidam un fiziskajām

aktivitātēm atvēlēt ne tikai teorētisku lomu, bet arī ieviest praktiskas veselību veicinošas un fizisko sagatavotību uzlabojošas programmas studiju laikā.

Summary

Introduction. Aerobic capacity (AC) is one of health indicators that characterise the functional status of heart, blood vessels, respiratory and other bodily systems. Aerobic capacity depends on several factors: the health conditions, gender, age and the level of physical activities. Students spend many hours in a sitting position in lectures, libraries, when preparing homework, as well as when watching the TV and sitting by the computer. As a result students' work abilities decrease and the health conditions deteriorate. Health care specialists should be physically active, not only for the sake of their well-being and health conditions, but also they should to be able to motivate their clients to have an active lifestyle.

Objective of the research. The objective of the research is to explore aerobic capacity of healthcare students and analyse it within the context of the respective age group population.

Material and Methods. Aerobic capacity was determined for 730 students (517 women and 213 men in the age group from 18 to 30 years) by applying the veloergometry test of the World Health Organisation (WHO) and using veloergometersMonarkErgomedik 839E. Aerobic capacity was tested and assessed for 286 students of the 1[st]study year, 233 students of the 2[nd]study year, 110 students of the 3rd study year and 101 students of the 4th and 5th study years of the Faculty of Rehabilitation, the Faculty of Medicine and the Faculty of Public Health of Riga Stradiņš University. Students participated on a voluntary basis. Aerobic capacity was analysed by comparing the test results with indicators of population in developed countries in accordance with internationally recognised aerobic capacity assessment system (Shvartz & Reibold, 1999).

Results. Pursuant to the WHO test results the students' maximal oxygen consumption (MOC) on average was 35.99±4.1 ml/kg/min for women and 43.63±5.4 ml/kg/min for men. The majority of students had lower indicators of aerobic capacity than the average population indicators, and less than 20% students demonstrated good or higher aerobic capacity. During the studies aerobic capacity indicators deteriorated for the majority of students.

Conclusions. For more than a half of health care students (55% women and 53% men) aerobic capacity (AC) was determined as lower than the respective average indicators for the same age group in the developed countries. This substantiates the need for an active lifestyle and physical activities during the study process not only on a theoretical basis, but also students should implement practical activities and programmes that promote their health and improve physical fitness during the studies.

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PACIENTU IZGLĪTOŠANAS ASPEKTI MĀSZINĪBU KURSA ABITURIENTU VĒRTĒJUMĀ

Patients' Educational Aspects by Nursing Graduates' Point of View

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Abstract. *Strategies of patients' educational process are extensive. Student nurses get involved in the patients' educational process with the competences obtained during their study process and personal understanding about the approach to the patient as a unique personality when planned operational objectives are set or the educational process happens unexpectedly in situational context. Situational context is not as significant in qualitative patients' education as appropriately chosen educational means and methods, as well as confidence about the patients' educational outcome.*

Keywords: *student, pedagogical process, patient, education.*

Ievads
Introduction

Pedagoģijas kurss ir māszinību studentu studiju procesa sastāvdaļa, kas balstīts uz māsu prakses standarta nosacījumiem. Zināšanas pedagoģijā (Nillson et al. 2010) profesionālā komunikācijā (Riley, 2012) un psiholoģijā (Visser, 2009) ir nozīmīgas sadarbībā ar pacientu, viņa tuviniekiem un ir viens no veselības aprūpes kultūras rādītājiem. Savlaicīga un vispusīga informācija stimulē pacienta interesi, veicina izpratni par veselīgu dzīvesveidu, sniedz jaunas vai uzlabo esošās zināšanas par slimību (Beta, 2013), aizkavē vai novērš veselības stāvokļa pasliktināšanos, uzlabo ārstēšanas procesu (Kenzie, Hassed, Gear, 2012), mazina medicīniska rakstura kļūdas, maina dzīves paradumus, sniedz zināšanas par tehnoloģiju iespējām veselības aprūpē, veicina motivāciju personīgi iesaistīties lēmumu pieņemšanā un nodrošina pacientu, viņa tuvinieku apmierinātību. Svarīgi ir veikt pacientu izglītošanu, nodrošināt kognitīvo izpratni, ko būtiski spēj ietekmēt kā fizioloģiski, tā emocionāli un sociāli faktori. Tāpēc studentu izpratnei par pacienta izglītošanas laika piemērotību, atbilstību un ilgumu ir būtiska nozīme.

Pedagoģisko lietpratību, prasmi veikt noteikta veida pacienta izglītošanas procesu (Halse, Fonn, Christiansen, 2014), kas attīstās profesionālās socializācijas procesā (Ehnfors, Grobe, 2004), sākot jau ar formālās izglītības iegūšanu, raksturo spēja novērtēt situāciju, integrēt esošo zināšanu spektru, veidot pozitīvas starppersonu attiecības, pielietot atvērtu komunikāciju, izvēlēties atbilstošus izglītošanas līdzekļus, uzņemties atbildību.

Pētījuma subjekts – pacientu izglītošana māszinību pēdējā kursa skatījumā.

Pētījuma mērķis – analizēt māszinību kursa abiturientu vērtējumu par pacientu izglītošanas procesa aspektiem, kas balstās uz iegūto zināšanu un esošās prakses pieredzes.

Pētījuma metodoloģija – rezultātu iegūšanai izveidota anketa. Ievaddaļa – vispārēja tipa jautājumi, 1.– 4.blokam, kuros izteikti apgalvojumi kognitīvo, afektīvo un psihomoro jomu vērtējumiem, novērtējumam izmantojot Likerta skalu 5 punktu diapazonā. Datu apstrādē izmantoti predikori: vecums, papildus izglītība, darba pieredze veselības aprūpes iestādēs. Datu statistiskā apstrāde veikta, izmantojot datorprogrammu SPSS v.19.0. Studentu grupu atšķirību izvērtēšanai izmantots *Pīrsona hī-kvadrāta (χ^2) rādītājs* un *Precizētie atlikumi*. Saistības noteikšanai izmantots *Spīrmena rangu korelācijas tests*. Iespējamo faktoru ietekmes noskaidrošanai pielietota *Lineārā regresija*.

Teorētiskais apskats
Theoretical review

Studiju procesā studenti attīsta prasmes veidot iejūtīgu komunikāciju (Tavakol, et all 2011; Strode, 2010), apgūst un pilnveido prasmes sniegt informāciju jebkura vecuma, dzimuma un saslimšanas jomas pacientam (Pariel, et al. 2013), kas samazina pacienta iekšējos konfliktus un saistās ar lēmumu pieņemšanu (Stacey et al. 2014). Atsaucīga māsas verbālā un neverbālā komunikācija, sadarbības komunikācijas elementu iekļaušana izglītošanas procesā: laipna balss intonācija sarunas, izglītošanas procesa laikā, ieklausīšanās pacienta teiktajā, dalīšanās iespēju meklējumos un prasme novērtēt izglītošanas procesa rezultātu, saņemot atgriezenisko saiti, ir daļa no pedagoģijas, saskarsmes psiholoģijas un profesionālajām prasmēm. Pozitīvai sadarbībai ar pacientiem ir būtiska nozīme pedagoģiskā procesa nodrošināšanai (Ivarsson, Nilsson, 2009).

Studentam jāapzinās, ka pacientu izglītošana ir uz rezultātu virzīts pedagoģisks process, kas tiek pilnveidots praksē (Williams, 2014; Nilsson et al. 2009), kurā nav mazsvarīgu detaļu. Pacientu izglītošana nav tikai vārdos sacīta vai/un rakstiskas informācijas sniegšana. Tas ir process, kas ietver komunikācijas prasmes, veidojot dialogu ar atvērtiem jautājumiem (Lamiani, Furey, 2008), nodrošinot sadarbību. Pacientu izglītošanā būtiska nozīme empātijai (Williams, et al, 2014; Hong, et al, 2012; Hojat, Gonnella, Mangione et al, 2002; Mercer, Watt et al, 2001), kad topošā māsa mēģina projicēt pacienta sajūtas, izprast pacienta situāciju, perspektīvu redzējumu, emocionālo un fizisko stāvokli, kas izglītošanas procesā attīsta kopējo sadarbību. Empātijas esamība var būt kā veicinošs, vai arī tās trūkums var būt kā sadarbību kavējošs faktors. G. Svence (Svence, 1999) secina, ka „cilvēka kognitīvā sfēra maksimāli aktivizējas, ja cilvēku nenomāc distress vai frustrācija". Prasmes pacientu

izglītošanā ir noderīgas jebkurā no veselības pakalpojumu nodrošinājuma etapiem (Johnson, Sandford, Tyndall 2008; Kenzie, Hassed, Gear, 2012).

Pētījuma rezultāti
Results

Respondentu sadalījums pēc vecumposmiem apliecina, ka dominējošais respondentu vecums ir līdz 25 gadiem (60,8%), bet palielinoties mūžizglītības iespējām, paaugstinās studentu vecums: 26-35 gadiem (18,8%), no 36-45 gadiem (14,7%), vēlākos vecumposmos (5,7%) strauji samazinoties.

Topošie abiturienti atzīmē, ka papildus izglītību ieguvuši (n- 77;31, 4%) gadījumos dažādās izglītības jomās: sociālās zinībās (n- 19; 23, 2 %), juridiskā izglītība (n- 8;9,8%), psiholoģijā (n- 5;6,1%) vadībā (n- 12;14,6%) ekonomika (n- 5;6,1%), medicīna (n- 19; 23, 2%), pedagoģija (n- 3;3,7%), cita izglītība (n- 11;13,4%). Papildus studijām veselības aprūpes iestādēs praktizē (n- 92; 37, 6%) respondenti. Turpmāk tiek analizēti jautājumu bloku 2.–5 atbildes.

1. bloks - *studentu pašvērtējums pašreizējai pieredzei, kas nodrošina pacientu izglītošanas procesu.*

Visaugstākā līmenī sevis pašvērtējumā studenti atzīmē īpašības, kas saistās ar *empātiju*, izprast pacientu emocijas – augstā līmenī 41,9%, būt iecietīgai - augstā līmenī 46,3%.

Visjaunākās grupas respondenti, līdz 25 gadiem (AR=+2,4;16,8%), biežāk novērtē *zināšanās psiholoģijā* "daļēji zemā līmenī", bet zināšanās psiholoģijā "augstā līmenī" statistiski nozīmīgi biežāk novērtē respondenti ar papildus izglītību (AR=+2,4;14,5%). Saistība starp novērtējumu un papildus izglītību (p=0,002), (r_s=-0,217; p=0,001) norāda, ka respondentiem ar papildus izglītību ir tendence vērtēt savas zināšanas augstāk. Regresijas modelī statistiski nozīmīga ietekme ir tikai vienam faktoram – papildus izglītībai Coefficients (p=0,006), kas ļauj secināt, ka papildus izglītība tiešām ietekmē respondentu vērtējumu par zināšanām psiholoģijā, savukārt korelācijas analīze, kurā kā prediktors ir respondentu vecums norāda, ka starp mainīgajiem vecuma grupās pastāv statistiski nozīmīga, taču neliela saistība (r_s=-0,141; p=0,027). Jāsecina, ka zināšanu pašvērtējums psiholoģijā palielinās, pieaugot vecumam un pieredzei.

Analizējot respondentu pašvērtējumu par studentu zināšanām *vispārējā pedagoģijā*, lielākā daļa tās atzīmē kā vidējas 50,4%, bet 31,8% respondentu novērtē zināšanas kā daļēji augstas un tikai 7% augstas, 9,5% daļēji zemas, bet 2,3% zemā līmenī. Precizētie atlikumi norāda, ka teorētiskās zināšanās "daļēji zemā līmenī" biežāk ir novērtējuši respondenti līdz 25 gadiem (AR=2,2;12,8%). Spīrmensa korelācija (r_s= 0,088; p=0,171) liecina, ka statistiski nozīmīgas saistības starp mainīgajiem nepastāv. Studentu zināšanas vispārējā pedagoģijā neietekmē prediktors papildus izglītība (r_s=-0,084; p=0,195). Tāpat studentu zināšanas pedagoģijā neietekmē - vai respondents strādā veselības aprūpes

iestādē (p=0,911), ne pēc precizētiem atlikumi, ne korelācijas analīze (r_s=0,032; p=0,627) neliecina par saistības esamību.

Zināšanas *saskarsmes komunikācijā* augstā līmenī novērtējuši 20,7%, bet daļēji augstā 50,4%, vidējā 20,4%, bet daļēji zemā līmenī 4,9% studentu. Prediktors vecums neuzrāda statistiski nozīmīgu rezultātu: (p=0,697), (r_s=-0,033; p=0,613). Līdzīgs rezultāts ir papildus izglītības faktoram (p=0,336). Ne korelācijas analīze (r_s=-0,117; p=0,070) neliecina par saistības esamību. Savukārt pieredze komunikācijā ir studentiem, kuri jau darbojas veselības aprūpes jomā. Pīrsona (χ^2) tests (p=0,049) uzrāda statistiski nozīmīgas atšķirības, kas apliecina, ka zināšanu novērtējums ir atšķirīgs. Precizētie atlikumi norāda uz to, ka savas zināšanas "vidējā līmenī" statistiski nozīmīgi biežāk novērtē nodarbinātie respondenti (AR=+2,1; 31,9%), bet "daļēji zemā līmenī" (AR=-2,1; 19,6%) – nestrādājošie respondenti, taču korelācijas analīzes statistiski nenozīmīgs rezultāts (r_s=-0,040; p=0,541) un Coefficients (p=0,034) liecina, ka vērtējuma atšķirībās būtiskas tendences nepastāv.

Zināšanas *informācijas tehnoloģijā* "vidējā līmenī" novērtē biežāk strādājošie respondenti nekā nestrādājošie (AR=+2,1;49,4%).

Prasmi *piemēroties neordinārai situācijai* statistiski nozīmīgi biežāk ir vērtējuši respondenti vecumā 36–45 gadi, novērtējot savas prasmes "augstā līmenī" (AR=+2,2; 25%), bet jaunākie respondenti – "daļēji zemā līmenī" (AR=+2,3; 7,6%). Korelācijas analīzes rezultāti (r_s= -0,157; p=0,015) liecina par ļoti vāju statistiski nozīmīgu saistību starp vecumu un prasmju novērtējumu, kas nozīmē, ka, pieaugot vecumam, pastāv izglītošanas prasmju uzlabošanās un pozitīva novērtēšanas tendence.

Prasmi *novērtēt izglītošanas procesa rezultātu*, saņemot atgriezenisko saiti, kas ir ļoti svarīga pacientu izglītošanas sastāvdaļa, studenti novērtē samērā pozitīvi: „augstā līmenī" – 13,7%, „daļēji augstā līmenī" – 46,1%, „vidējā līmenī" – 36,1%, „daļēji zemā līmenī" – 4,1%. Ne vecumam, ne papildus izglītībai, ne arī studentu nodarbinātībai nav statistiski nozīmīgas ietekmes uz prasmju novērtējumu.

Spēju *uzņemties atbildību par izglītošanas darbu*, analizējot pēc vecuma faktora ietekmes Pīrsona (χ^2) tests uzrāda (p=0,596), bet savukārt precizētie atlikumi norāda, ka savas spējas "vidējā līmenī" statistiski nozīmīgi biežāk novērtē jaunākie respondenti līdz 25 gadiem (AR=+2.1; 35,1%), nekā pārējās vecuma respondentu grupas, tomēr korelācijas analīze (r_s= -0,100; p=0,121) neliecina par saistības esamību.

Spēju *būt iecietīgai*, kas liecina par toleranci, uzklausot dažādus viedokļus vai izglītojot pacientus pēc vecuma prediktora, "vidējā līmenī" statistiski nozīmīgi biežāk ir novērtējuši respondenti vecumā 36–45gadi (AR=+2,6; 23,5%). Korelācijas analīze (r_s=-0,075; p=0,250) neliecina par saistības esamību.

Vidējā *laikā, ko velta pacientu izglītošanai*, dominē laika intervāls līdz 10 minūtēm 51, 8% un 20 minūtēm 30,6%. Analizējot pacientu izglītošanas laika

atšķirības pēc vecuma grupas, tās nav statistiski nozīmīgas, ne pēc Pīrsona (χ^2) (p=0,971), korelācijas analīzes (r_s =0,028; p=0,658) un Cofficienta rezultātiem: (β=0,031) un (p=0,632), ka ne pēc precizētiem atlikumiem, izglītošanas laiks neatšķiras nevienā no 5 vecuma grupām un izglītošanas ilgums nemainās, pieaugot vai samazinoties vecumam. Atšķirības, izglītojot pacientus, pēc iegūtās papildus izglītības pēc Pīrsona (χ^2) (p=0,640) un pēc precizētiem atlikumiem neatšķiras studentiem ar un bez papildus izglītības. Korelācijas analīze (r_s=0,068; p=0,293) un lineārās regresijas Coefficients (p=0,198) to arī apstiprina. Precizētie atlikumi norādas, ka biežāk atturas veikt pacientu izglītošanu vispār studenti, kuri nestrādā papildus studijām (AR=-2,2;25,5%), bet līdz 20 minūtēm biežāk izglīto studenti, kuri papildus studijām strādā (AR=-2,2;39,1%), bet kopumā darba pieredzes ietekme (p=0,080), (β=-0,063; p=0,331) neliecina par papildus darba statistiski nozīmīgas ietekmes esamību.

2. bloka jautājumi - *starppersonu attiecības, veicot pacientu izglītošanu.*

Pacientu izglītošanas procesa veidošanā ir nozīmīgas starppersonu attiecību prasmes, kas var veicināt vai arī kavēt izglītošanas procesa attīstību un, kuru kontekstā ietilpst efektīva komunikācija. Precizētie atlikumi norāda, ka respondenti vecumā līdz 25 gadiem statistiski nozīmīgi retāk "vienmēr" stādās priekšā pacientam, *nosaucot savu vārdu*, (AR=-2,0; 22,8%), respondenti vecumā 26–36 gadi statistiski nozīmīgi biežāk nosauc vārdu (AR=+2,1; 24,4%), bet 46–55 gadi – statistiski nozīmīgi "bieži" iepazīstina pacientu ar sevi (AR=+2,3; 63,6%). Korelācijas analīze neliecina par ciešas saistības esamību iegūtai p-vērtībai (r_s=0,111; p=0,084). Iepazīstināšana ar sevi, uzsākot komunikāciju, ir nozīmīgs solis uzticēšanās veidošanai, kuram jāvelta uzmanība izglītības procesā. Studenti pacientus *uzrunā pirmie, iedrošinot sarunai*, to norāda precizētie atlikumi, ka "bieži" to veic respondenti 26–35 gados (AR=+2,0; 61,4%), bet statistiski nozīmīgi retāk respondenti vecumā līdz 25 gadiem (AR= -2,1; 42,1%). Efektīvas komunikācijas nodrošināšanu ar jautājumu, *kādas šodien problēmas*, respondenti vērtē augstu, atzīmējot, ka 41,7% gadījumu to dara „vienmēr", 40,9% „bieži", tikai 14% gadījumu „dažreiz". Pīrsona (χ^2) tests kopumā (p=0,900), ne pēc precizētiem atlikumiem un korelācijas analīzes (p=0.065) nesniedz statistiski nozīmīgu rezultātu.

Vai atkārtoti satiekot pacientu *jautā, kādi ir panākumi* - šeit atšķirības ir statistiski nozīmīgas pēc Pīrsona (χ^2) testa (p=0,026), un dažādās vecumā grupās. Precizētie atlikumi norāda, ka respondenti biežāk vecumā 36–45 gadi jautā par panākumiem "vienmēr" (AR=+3,1; 55,9%), nekā respondenti pārējā vecumā, kā arī visjaunākie respondenti līdz 25 gadiem atzīmē "dažreiz" (AR=+2,8; 14,8%), jautā par panākumiem. Korelācijas analīze norāda (r_s= 0,214; p=0,001), ka starp vecumu un jautāšanas biežumu pastāv neliela saistība, noskaidrot pacienta panākumus ir tendence pieaugot respondentu vecumam.

Rutīnas attieksme, *uzdodot jautājumus, kaut gan nav laika, vai arī vēlēšanās iedziļināties problēmās* ir statistiski nozīmīga (p=0,025), gan arī precizētie atlikumi norāda, ka atbildēs dominē „bieži" – līdz 25 gadiem

(AR=+2,8; 22,8%), bet „dažreiz"- no 26–35 gadiem (AR= +2,0; 46,7%), savukārt „vienmēr" (AR=+2,3; 14,3%) sniedz respondenti no 26–35 gadiem, kas norāda uz atšķirīgajiem vērtējumiem, taču korelācijas analīze norāda uz tendences neesamību starp vecumu un laika trūkumu respondentiem (r_s= -0,029; p=0,659), tāpēc jāsecina, ka laika trūkuma izjūta dažādās vecuma grupās ir atšķirīga, ko var ietekmēt gan redzami, gan latenti faktori. Kaut gan pašvērtējumā studenti norāda, ka „vienmēr" 51,3% un 42,1% „bieži" uzmanīgi uzklausa pacientu viedokli, precizētos atlikumos redzams, ka respondenti vecumā 36-45 gadi biežāk nekā pārējo vecuma grupu respondenti uzklausa pacientu viedokli (AR= +2,1; 58,3%).

Efektīvas komunikācijas nodrošināšanai *jāveido dialogs*, ko studenti sniedz atbildes, ka 31,8% to veido „vienmēr" un 50,2% gadījumu „bieži". Precizēto atlikumu rezultāti apliecina, ka variantu "bieži" statistiski nozīmīgi biežāk izvēlējušies respondenti bez papildus izglītības (AR=+2,4;55%). Statistiski nozīmīgs rezultāts uzrādās pēc Pīrsona (χ^2) testa (p=0,007), taču šo rezultātu ir nodrošinājuši divu precizēto atlikumu statistikas nozīmīguma gadījumi, kas nenodrošina adekvātu novērtējumu. Studentu viedokļi ir dažādi, novērtējot *monologa*, kā metodes pielietojumu komunikācijā ar pacientu, kas pieskaitāms pie tradicionālā pacientu izglītošanas stila. „Vienmēr" 8.3%, „bieži" 21, 3%, „dažreiz" 37,1%, „reti" 27,1%, „nepielietoju" 6,3%. Atšķirības kopumā ir statistiski nozīmīgas (p=0,013), kā arī precizēto atlikumu rezultāti visās vecuma grupās.

3. bloks - *studentu uzskats, kādi ir svarīgākie pielietotie līdzekļi pacientu izglītošanas procesā papildus verbālai izglītošanai.*

Analizējot studentu viedokli, kādi ir svarīgākie pielietotie līdzekļi pacientu izglītošanas procesā, papildus verbālai/mutiskai izglītošanai (skatīt 1. attēlu) novērtējums „ļoti svarīgi" ir kārtots dilstošā progresijā, norādot studentu atbildes, pozitīvā vērtējumā dominējot tradicionālām izglītošanas metodēm: *demonstrējumi, informācijas lapa, bukleti, kontaktu norāde.*

Studenti uzskata par mazsvarīgiem izglītošanas līdzekļus: *shēmas, piktogrammas* (40,7%), *plakātus* (24,9%). *Youtube materiālus* (23, 7%) respondenti, līdz 25 gadiem statistiski nozīmīgi retāk novērtē kā "mazsvarīgus" (AR=-2,1;19%). *Resursu ar medicīnisku ievirzi*, kas sastopami internetā (25,5%), *audiovizuālo materiālu* (21,3%) pielietojums tiek vērtēti kā mazsvarīgi mūsdienīgas pacientu izglītošanas komponenti, kas var sekmēt pacientu izpratni.

Arī šajā jautājumu grupā nozīmīgākie ir precizēto atlikumu rezultāti, kas norāda, kā atšķiras noteiktu vecumgrupu atbildes. Visjaunākie respondenti līdz 25 gadiem, statistiski nozīmīgi biežāk ir vērtējuši kā "mazsvarīgus" *plakātus* (AR=+2,6;30,8%). Respondenti vecumā 36–45 gadi (AR=+2,1;75%), novērtē attēlus kā "svarīgus" statistiski nozīmīgi biežāk un kā "svarīgus" tos novērtē biežāk respondenti ar papildus izglītību (AR=+2,3;70,1%).

Rakstisko apkopojumu 26–35 gadu grupas respondenti statistiski nozīmīgi biežāk novērtē kā "ļoti svarīgu" (AR=+2,9;43,2%). Attiecībā par *bukletiem*

neliels skaits visjaunāko respondentu statistiski nozīmīgi biežāk izvēlējās variantu "nesvarīgi" (AR=+2,0;4,1%).
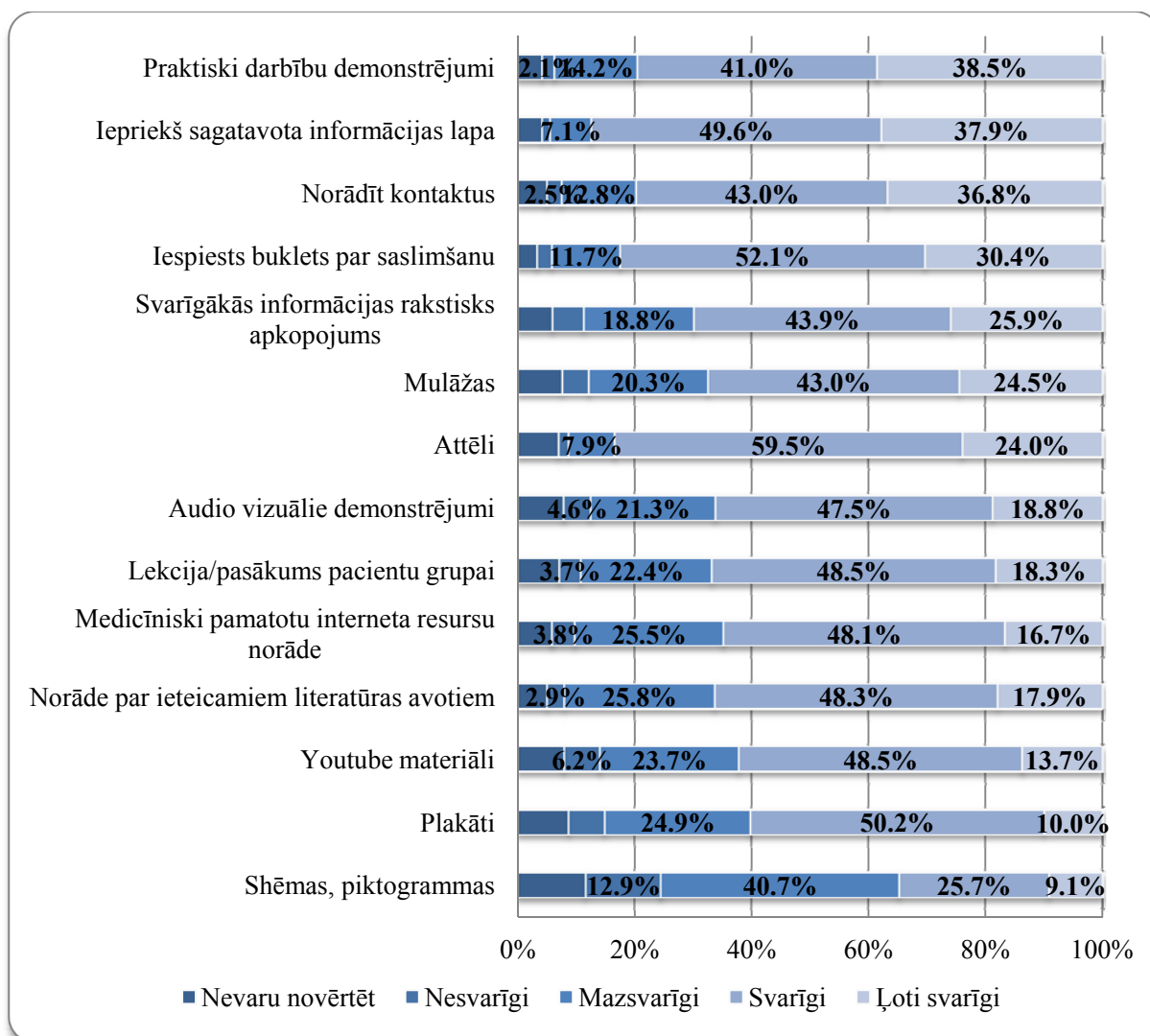
1. attēls. Studentu viedoklis par praksē pielietotiem pacientu izglītošanas līdzekļiem
Figure 1. Students' opinion about patients' educational means used during their practice

Vērtējumā par *literatūras svarīgumu* pēc papildus iegūtās izglītības atšķirības ir statistiski nozīmīgas pēc Pīrsona (χ^2) testa (p=0,046). Respondenti ar papildus izglītību statistiski nozīmīgi biežāk novērtējuši literatūru kā "svarīgu" (n=57,8%), bet respondenti bez papildus izglītības statistiski nozīmīgi biežāk "nevarēja novērtēt" (n=43,6%) literatūras nozīmīgumu un statistiski nozīmīgi retāk ir novērtējuši to kā "svarīgu" (AR=-2,2;43,6%). Regresijas analīze norāda (p=0,032), ka papildus izglītībai ir statistiski nozīmīga ietekme uz literatūras svarīguma novērtējumu

Viedoklī par *lekciju organizāciju* korelācijas analīze konstatēja vāju statistiski nozīmīgu saistību (r_s= 0,178; p=0,006), kas apliecina, ka strādājošie

respondenti vērtē lekcijas un pasākumus kopumā sliktāk, nekā nestrādājošie respondenti.

Praktiskos demonstrējumus kā "ļoti svarīgus" vērtē nestrādājošie studenti (AR=+2,0;43,7%). *Norādīt pacientiem uz kontaktiem*, kur gūt nepieciešamības gadījumā informāciju, pēc precizētiem atlikumiem respondenti bez papildus izglītības statistiski nozīmīgi biežāk izvēlas variantu "mazsvarīgi" (AR=2,0;15,8%). Korelācijas analīze konstatēja statistiski nozīmīgu, bet vāju saistību starp abiem faktoriem (r_s= -0,142; p=0,027), kas nozīmē, ka pastāv neliela tendence, ka kontaktu svarīgumu kopumā svarīgāk vērtē respondenti ar papildus izglītību.

4. bloks - *faktoru, kas ietekmē pacientu izglītošanas procesus novērtējums*.

Kā dominējošie tiek definēti pašreizējai profesionālai attīstības pakāpei atbilstoši faktori „*praktisko zināšanu apjoms*" 38,7% „vienmēr", 44,7% „bieži", „*teorētisko zināšanu nepietiekamība*" 35,9% „vienmēr", 46,2% „bieži", „*pieredzes apjoms*" 34,6% „vienmēr", 51,3 „bieži", kā arī darba organizācijas faktors „*laika trūkums, jo intensīvs darbs*" 36,8% „vienmēr", 45,7% „bieži".

Respondenti vecumā līdz 25 gadiem statistiski nozīmīgi biežāk atzīmē, ka personīgo zināšanu apjoms "vienmēr ietekmē" (AR=+2,4;42,0%) rezultātu. Korelācijas analīze liecina, ka ir tendence, pieaugot vecumam, samazināties teorētisko zināšanu ietekmes svarīguma vērtējumam.
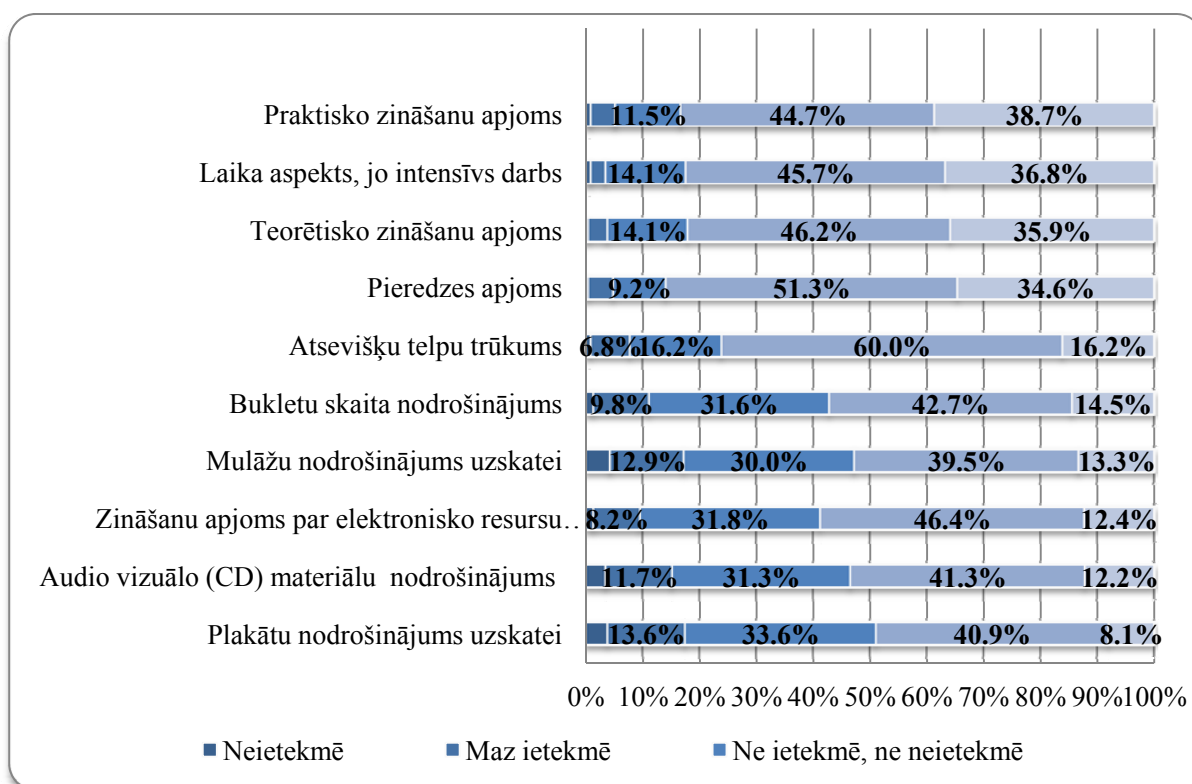
2. attēls. Pacientu izglītošanu ietekmējošie faktori
Figure 2. Influencing factors of patients' education

Pēc studentu viedokļiem pārējie pacientu izglītošanu ietekmējošie faktori (skatīt 2. attēlu): *atsevišķu telpu trūkums*, kur izglītot vai vest sarunas ar pacientiem „vienmēr" 16,2%, „bieži" 60%, kas būtiski ietekmē darba organizāciju un kvalitāti, sekojoši pacientu labsajūtu, jo ne vienmēr pacients ir apmierināts, ja viņam nepieciešamo informāciju klausās arī citi. Studenti uzskata, ka nepietiekošs *bukletu* skaita nodrošinājums (14,5% „vienmēr", 42,7% „bieži") spēj ietekmēt izglītojošā darba procesu. Pārējo izglītošanas līdzekļu (*audio, plakātu*) nepietiekamība veselības aprūpes iestādēs pēc studentu vērtējuma dalās statistiski vienlīdzīgos, bet atšķirīgos viedokļos, uzskatot tos par nozīmīgiem, vai arī izglītošanas procesu neietekmējošiem faktoriem.

Novērtējot mulāžu nodrošinājuma ietekmi, pēc prediktora papildus izglītība, precizētie atlikumi norāda, ka vērtējumu "bieži ietekmē" statistiski nozīmīgi biežāk ir izvēlējušies respondenti ar papildus izglītību (AR=+2,1;49,3%), bet precizētie atlikumi norāda, ka vērtējumu "neietekmē" statistiski nozīmīgi biežāk izvēlas jau nodarbinātie respondenti (AR=+2,0;7,8%). Kopumā novērtējot *prasmes pacientu izglītošanā*, precizētie atlikumi norāda, ka respondenti vecumā 26–35 gadi statistiski nozīmīgi biežāk novērtē savas prasmes "augstā līmenī" (AR=+2,7;22,2%), nekā respondenti pārējā vecumā. Kā prediktoru ņemot respondentu papildus izglītību, korelācijas analīzes rezultāts ir tuvu statistiskajam nozīmīgumam (r_s=-0,122; p=0,059).

Secinājumi
Conclusions

Respondenti demonstrē uzskatu, novērtējumu dažādību jautājumos, kas saistās ar personīgās pieredzes pašvērtējumu, novērtējot pacientu izglītošanas procesa kognitīvos, afektīvos un psihomotoros aspektus. Lielākā daļa respondentu atzīmē zināšanas vispārējā pedagoģijā kā vidējas, bet, pieaugot vecumam, pastāv izglītošanas prasmju uzlabošanās un pozitīva to novērtēšanas tendence. Palielinoties vecumam, pozitīvāk tiek novērtētas arī zināšanas psiholoģijā un komunikācijas prasmes.

Viedokļos par praksē biežāk pielietotiem pacientu izglītošanas līdzekļiem kā ļoti svarīgas dominē praktiskas un informatīvas metodes, mazāk akcentējot teorētisko avotu un interneta resursu pielietojumu. Abiturienti novērtē, ka prasmi pacientu izglītošanā ietekmē faktori, kas ir atbilstoši pašreizējai profesionālās attīstības pakāpei. Kā nepietiekoši tiek atzīti: „praktisko zināšanu apjoms", „teorētisko zināšanu nepietiekamība", „pieredzes apjoms", kā arī personīgās prakses pieredze - darba organizācijas faktors „laika trūkums, jo intensīvs darbs". Nav viennozīmīgas saistības starp pētījuma ietvaros izvirzītiem prediktoriem: respondenta vecums, vai respondents jau strādā veselības aprūpes iestādē, vai students papildus izglītības procesam praktizē veselības aprūpes iestādē.

Summary

Most of respondents mark the knowledge in general pedagogy as average, but with the age increase the educational skills improvement and their positive assessment are possible. With the age increase the knowledge in psychology and communication skills are assessed more positively.

Respondents demonstrate the opinion, variety of assessments in the issues which are connected with the self-assessment of the personal experience. Graduates assess that the skill in the patients' education is influenced by the factors which comply with the current professional development level. "The amount of practical knowledge," "insufficiency of theoretical knowledge," "amount of experience" are mentioned as insufficient, as well as the experience of the personal practice – the work organization factor "lack of time because of intensive work." There is not an unequivocal relationship between the set predicators in the research: the respondent's age, whether the respondent already works for a health care institution, whether the student in addition to the study process practices in a health care institution.

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VINGRINĀJUMI SKOLĒNU DROŠUMSPĒJU SEKMĒŠANAI

Exercise to Promote Pupil Securitability

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Abstract. Health and safety is based on the choices that people make during lifetime. Each of us chooses to act safely or unsafely, healthy or unhealthy. Specific risk group is children and youngsters. Children and young people often have a desire to test their independence, build a personal identity and expand the social life, so young people often experiment also with different types of behavior. In the situations not favorable to health and safety children and young people behavior often do not comply with their knowledge of how to act. Human (human securitability is an internationally-known concept that characterizes human adaptability skills in a rapidly changing environment. Are distinguished 7 human securitability aspects: health, economic, personal (physical), ecological securitability, nutritional, community and political securitability. In the National development plan (NDP) 2020 strategy one of the priorities is human securitability provision. In our study, we analyzed the personal (physical) securitability of educational institutions. A person with a low sense of securitability feels threatened, does not want to use the opportunities of personal growth, trust others and cooperate with them at workplace and in collectives, does not want to participate in the state national development process, and therefore does not contribute to national growth. The pupils are able to learn successfully at school, develop their ability to form a personality only in an environment with a sustainable securitability. The pupil parents can successfully work and act only in the case they are absolutely certain about their children securitability at school, where they spend most of the working day: at schools, in after-school hobby groups, in sports trainings. Creating a safe environment at schools and being educated, growing and developing in this environment, the pupils form understanding of the necessity for a safe and healthy environment and its importance, and develop motivation to keep it for the needs of family, society and the public.
In strengthening securitability equally important is knowledge and skills to act in different situations. Researching education policy documents, the authors draw the conclusion that it is necessary on a state level to strengthen the securitability of each Latvian resident and the issues related to state securitability in educational institutions and society as a whole. Sports teacher can contribute to the promotion of pupil securitability, using the subject content as the means. Human securitability can be promoted by knowledge acquisition and skills development in securitability-oriented sports lesson.

Keywords: securitability, a set of exercises, a complex securitability test, sport lesson.

Ievads
Introduction

Bērnam ir tiesības skolā būt drošībā to nosaka ANO Konvencija par bērna tiesībām. Kā nodrošināt bērna drošību izglītības iestādē un kā rīkoties, apdraudējuma vai ārkārtas gadījumā. Šādām zināšanām un prasmēm gan pedagogiem, vecākiem un skolēniem, kas noteikts arī Latvijas Republikas likumdošanā.

Ir nepieciešami atbalsta materiāli pedagogiem un skolēniem par cilvēkdrošības jautājumiem, lai nodrošinātu zināšanu apguvi un nostiprinātu prasmes, veidotu attieksmi, motivāciju atpazīt bīstamās situācijas ikdienā un būt fiziski sagatavotam, lai pieņemt atbildīgus un drošus lēmumus.

Pētījumā analizējām skolēnu fizisko spēju sekmēšanu ar sporta līdzekļiem sporta stundā skolēnu kopējās drošumspējas nodrošināšanai.

Pētījuma objekts: skolēnu drošumspējas sekmēšana.

Pētījuma mērķis: vingrinājumu kopuma izveide un aprobācija skolēnu personiskās drošības sekmēšanai un skolēnu drošumspēju dinamikas novērtēšana sporta stundā.

Pētījuma metodes: Kontrolvingrinājumu metode. *Krepelīnas tests. Šultes tabulu* metodika. Rezultātu matemātiski statistiskā apstrāde (IBM SPSS v.20.0)

Problēmas teorētiskais pamatojums
Teoretical bases

Cilvēka drošumspēja (human securitability – a form of resilience) ir starptautiski zināms jēdziens, kas raksturo cilvēka adaptācijas spēju strauji mainīgā vidē. Cilvēks ar augstu drošumspēju ir par sevi drošs, radošs cilvēks, spējīgs parūpēties par sevi un citiem, spējīgs pielāgoties apstākļiem. (Ījabs, 2011; McFarlane & Khong, 2006: Buzan, 1991).

Izšķir septiņus cilvēkdrošības aspektus: veselības drošība, ekonomiskā drošība, personiskā (fiziskā) drošība, ekoloģiskā drošība, uzturdrošība, kopiendrošība un politiskā drošība.

Veselība un drošība ir viena no cilvēka pamatvērtībām, tā ir dzīves kvalitātes, personīgās un ģimenes labklājības pamats. Izpētot politikas plānošanas dokumentus, radās jautājums – kā sporta stundās veicināt skolēnos tādu fizisko spēju attīstīšanos, kas ļautu ātri novērtēt situāciju, izprast riskus, pieņemt lēmumu kā rīkoties ekstrēmās situācijās ierobežota laika posmā, ņemot vērā ne tikai fiziskās spējas, bet arī spēja racionāli izmantot sava organisma bioloģisko potenciālu, fizioloģiskās rezerves, psihisko stāvokli un iedzimto dotumu realizācijas iespējas sociālajā vidē.

Mācību priekšmeta *Sports* galvenais mērķis ir skolēnu fiziskās kompetences sekmēšana un skolēnu veselības veicināšana. Savukārt, galvenie uzdevumi ir radīt izglītojamajam iespēju: nodarboties ar sistemātiskām fiziskām aktivitātēm atbilstoši veselības stāvoklim, nostiprinot un uzlabojot veselību,

attīstot fiziskās spējas, sekmējot harmonisku fizisko un garīgo attīstību; sekmējot izpratni par veselības, fizisko spēju, vides un konkrēto sporta veidu vingrinājumu savstarpējo mijiedarbību.

Sporta skolotājam sporta stundās jānodrošina inovatīva draudzīga vide fizisko spēju attīstīšanai. Stundai izvēlēto vingrinājumu saturam, papildus noteiktajamvispārējās izglītības standartā priekšmetā *Sports* mērķiem un uzdevumiem,jāsekmē skolēnu drošumspēja un galvenais rīcības spēja ekstremālās situācijās.

Prasmes un fiziskās īpašības, kas nepieciešamas skolēnu drošumspējas sekmēšanai veidojamas ne tikai skolas sporta zālē vai skolas stadionā, bet arī sekmīgi izmantojot skolas apkārtējo vidi (reljefs, skaņas, krāsa, flora un fauna), lai padarītu drošumspējas veidošanas procesu daudzveidīgāku.

Būtiskākais ir koordinācijas sekmēšana sporta stundās. Koordinācijas attīstīšanas galvenais uzdevums – attīstīt spēju, apgūt jaunu kustību koordināciju un pakārtot to saskaņā ar mainīgo apstākļu prasībām. Koordinācijas pilnveidošana ir saistīta ar telpas, laika un muskuļu piepūles sajūtu, precizitātes attīstīšanu. Lai attīstītos koordinācijas iela nozīme ir sporta spēlēm un kustību rotaļām. (Krauksts, 2003).

Pastāv cieša sakarība starp skolēnu intelektuālo līmeni un vispusīgas fiziskās sagatavotības paaugstināšanas iespējām. Skolēniem ir nepieciešama tādu zināšanu, prasmju un iemaņu apgūšana, kas, ņemot vērā specifiskos nosacījumus, nodrošina sekmīgu rīcības ekstremālos apstākļos. Galvenā nozīme ir skolēna fiziskajai un informatīvajai sagatavotībai, kas ļauj sekmīgi realizēt sevi ekstremālos apstākļos (Santrock, 2005).

Nepietiekama vispusīga fiziskā sagatavotība ir iemesls kustību prasmju nestabilitātei un traumām ekstremālās fizisko un psihisko slodžu laikā. Veidojot vingrinājumu saturu un pielietojot tos sporta stundā izmantojam zinātniski pamatotas un praktiskas zināšanas par nepieciešamo fizisko un psiholoģisko komponentu vingrinājumu realizēšanai sporta stundā. Izveidoto vingrinājumu kopumu ātras domāšanas un operatīvo lēmumu pieņemšanai, īstenojām pēc formulas: *Redzi, dzirdi, saproti, domā – rīkojies!*

Empīriskais pētījums un rezultāti
The empirical study and results

Pētījums tika veikts 2014. gadā Rīgas vispārizglītojošā skolā vienā semestrī.

Pētījumā piedalījās septiņpadsmit 12. klases skolnieki. Izveidoto vingrinājumu kopumu pielietojām sporta stundas galvenajā daļā, atbilstoši stundas skolēnu fiziskās sagatavotības sekmēšanai izvirzītajiem mērķiem un uzdevumiem.Vingrinājumu kopumā iekļāvām šādus vingrinājumus:

1. Vingrinājums „Es tev – tu man'' vienlaicīgi piespēlējot tenisa bumbiņu izpilda dašādas papildus kustības – *mērķis:* veicināt izglītojamo

rīcībspēju (ekstremālās dzīves situācijās) ierobežotā laika posmā. *Uzdevums:* attīstīt reakcijas ātrumu uz signāliem.

2. Vingrinājums „Es pūlī" visi skolēni vienlaicīgi ar maksimālo ātrumu skrien katrs pie sava konusa, paceļ to un iegaumē trīsciparu skaitli, kas ir uzrakstīts zem konusa un skrien atpakaļ uz starta pozīciju – *mērķis:* spēt ātri orientēties cilvēku pūlī (ekstremālās dzīves situācijās) un izvairīties no sadursmēm ar citiem. *Uzdevums:* attīstīt reakcijas ātrumu un kustību biežumu.

3. Vingrinājums „Labirinsts" – *mērķis:* spēt ātri orientēties šaurās, nepazīstamās telpās. *Uzdevums:* sekmēt koordinācijas izpausmes formu – spēja orientēties šaurās telpās.

4. Vingrinājums „Aklais" – „Vienam no pāra aizsien acis un pārinieks to vada. Dalībniekiem ir jāaizkļūst līdz telpas izejas durvīm." – *mērķis:* spēt orientēties telpā ierobežotas redzamības apstākļos (ekstremālās dzīves situācijās). *Uzdevums:* sekmēt koordinācijas izpausmes formu – spēju orientēties telpā.

5. Vingrinājums „Droša vide „ Skolēni izstaigā skolas ēku. Tajās vietās, kur pēc viņu uzskatiem ir nedroši, piestiprina sarkano lapiņu vai kur ir droši – zaļo lapiņu – *mērķis:* apzinātdrošības riskus izglītības iestādē. *Uzdevums:* noteikt drošu un veselīgu mācību vidi skolēniem, skolotājiem, vecākiem un jebkuram cilvēkam, kurš atrodas skolas ēkā.

Kā rezultatīvais rādītājs piedāvāto vingrinājumu kopuma efektivitātes novērtēšanai tika pielitots *Kompleksais drošumspējas tests (*turpmāk tekstā - *tests).*

Tests veidots kā 11 posmu uzdevumu kopums – 8 vingrinājumi fiziskās kondīcijas noteikšanai un 3 psiholoģiskās noturības vērtēšanai – *Krepelīnas tests*.

Šultes tabulu metodika. Pielietojot *Šultes tabulas* metodiku noteicām skolēnu uzmanības īpatnības – noturīgumu, dinamiku, pārslēgšanos, koncentrēšanos. Pārbaudes veikšanai nepieciešamas 5 tabulas, kurās jauktā secībā ir sakārtoti skaitļi no 1 līdz 25. Tabulas jāpielieto noteiktajā secībā.

Pielietojot *Krepelīna* testu, noteicām skolēnu uzmanības īpašības – pārslēgšanos, noturību, iestrādāšanos, nogurdināmību, (kopējais testa izpildes laiks ir 2min.).

Testu veicām semestra sākumā – fona datu ieguvei un semestra beigās sasniegto rezultātu izvērtēšanai.

1. Atspoles skrējiens 10x10 – ekstremālas situācijas imitācija ar fizisko slodzi).

2. Jāatceras skaitļu rinda (pieci skaitļi) 3sek. no *Šultes* tabulas Nr.1 un Nr.2.

3. Lēcieni no vietas ar kājām kopā attālumā 20m.

4. Nolēktā 20m distance jāskrien atpakaļ ar maksimālo ātrumu (sprints).

5. Pieci kūleņi pēc kārtas uz priekšu/pieci kūleņi pēc kārtas atpakaļ.

6. Lēns skrējiens 30sek. atpūtai, pēc 30sek., atpūtas kontrolvingrinājumu veicošais izglītojamais to veic apgrieztā secībā.
7. Pieci kūleņi pēc kārtas atpakaļ /pieci kūleņi pēc kārtas uz priekšu.
8. Noteiktā 20m distance jāskrien ar maksimālo ātrumu (sprints).
9. Lēcieni no vietas ar kājām kopā 20m.
10. Jānosauc no *Šultes* tabulas Nr.1 vai Nr.2 iegaumētie skaitļi.
11. Bez atpūtas uz kontrolvingrinājuma veikšanas laikā iegūtā noguruma fona izglītojamais izpilda *Krepelīna* testu ar laika ierobežojumu 2min.

Izvērtējot un salīdzinot katra skolēna *testa* fona datus un pētījumu beigās iegūtos datus, secinam ka skolēnu vidējais *testa* veikšanas laiks uzlabojās par 33,22s (p<0,001) (1.att.). Secinām, ka izveidotā vingrinājuma kopuma aprobācija sporta stundās sekmēja skolēnu kompleksu fizisko īpašību un psihisko procesu uzlabošanos.
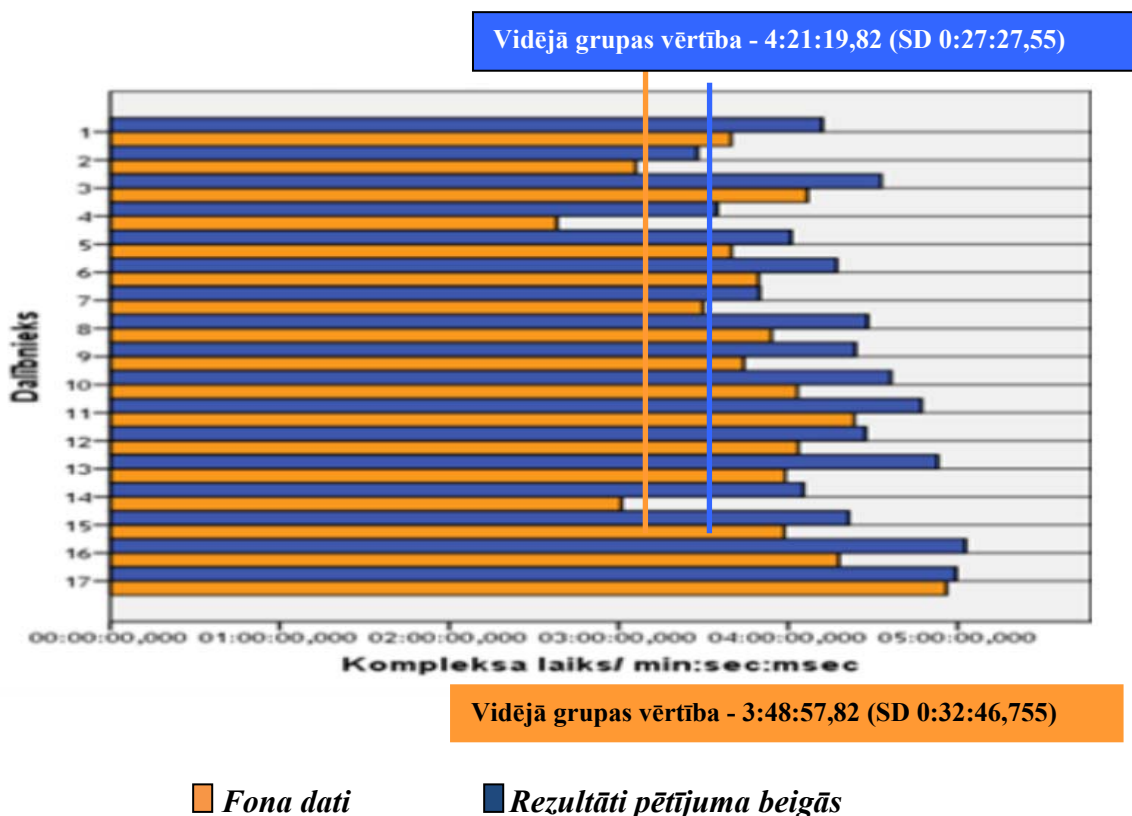
1.attēls. Kompleksā drošumspējas testa laika vērtības katram dalībniekam
*Figure 1. The complex securitability test time values for each participant*

Secinām, ka izveidotā vingrinājuma kopuma aprobācija sporta stundās sekmēja skolēnu kompleksu fizisko īpašību un psihisko procesu uzlabošanos.

Fona dati   Rezultāti pētījumu beigās
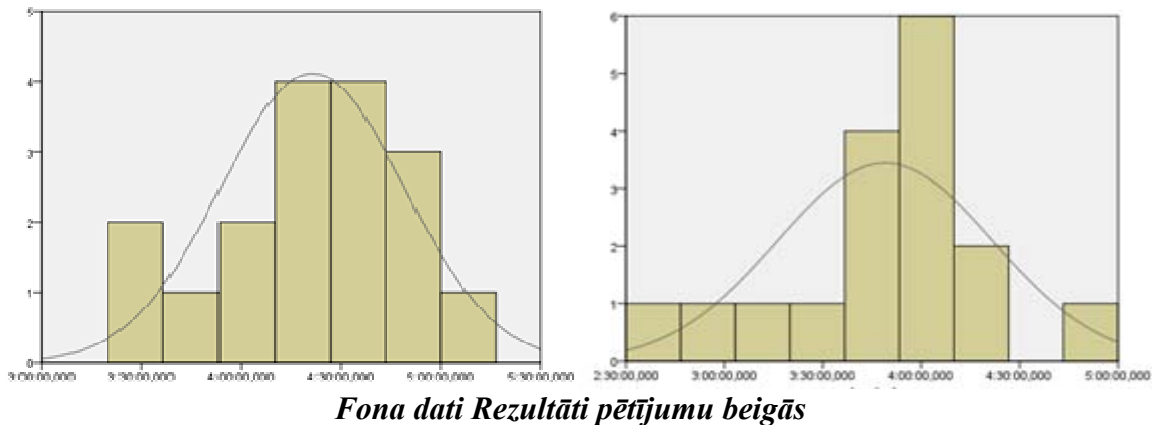
2.attēls. Kompleksā drošumspējas testa laika vērtību sadalījums
Figure 2. The distribution of complex securitability test time values

Sistemātisku vingrinājumu pielietošanu sporta stundā sekmēja skolēnu fiziskā component pilnveidi kompleksi ar psihisko procesu pilnveidi, kuri rezultējās skolēnu drošumspēju paaugstināšanā par to liecina iegūtie rezultāti, tos izvērtējot pēc *Šultes tabulu* un *Krepelīna* testa metodikas.

Izvērtējot to, cik skolēni pētījuma sākumā, veicot *testu*, varēja atbildēt precīzi, lietojot *Šultes tabulas*, ieguvām šādus rezultātus. 1 skolēns pareizi nosauca skaitli no Šultes tabulas un nekļūdījās, 1 skolēns pareizi nosauca 2 skaitļus no Šultes tabulas un nekļūdījās, 5 skolēni pareizi nosauca 3 skaitļus, no kuriem 4 skolēni nekļūdījās arī skaitļu pareizā secībā, bet viens skolēns kļūdījās viena skaitļa pareizas secības nosaukšanā. 7 skolēni pareizi nosauca 4 skaitļus un trīs skolēni nekļūdījās arī šo skaitļu secībā pēc Šultes tabulas, bet četri skolēni kļūdījās viena skaitļa secībā. 3 skolēni pareizi nosauca 5 skaitļus un divi no šiem skolēniem kļūdījās viena skaitļa pareizās secības minēšanā, bet viens skolēns kļūdījās divu skaitļu pareizās secības minēšanā. Datu apstrādi veicām, izmantojot šķērsgriezuma datu analīzi ar χ^2 testu un φ un *Cramer's V* nominālus (3.att.).
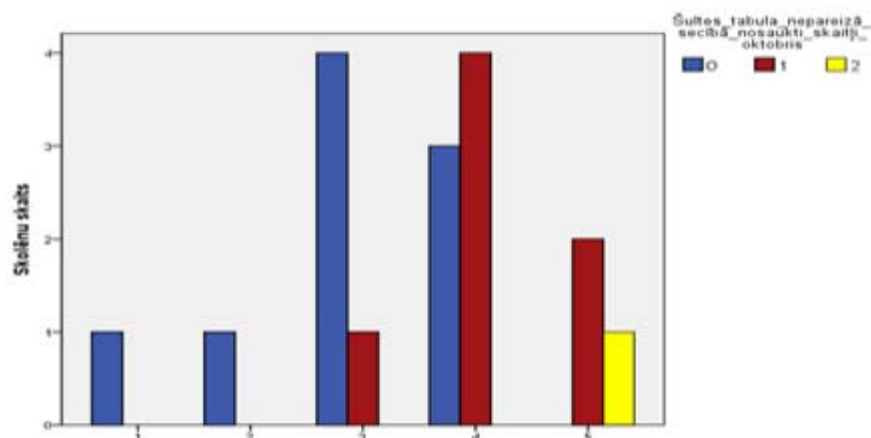
3.attēls. Šultes testa rezultātu kopsavilkums (Fona dati)
Figure 3. Schulte's test result summary (Background data)

Salīdzinot Šultes tabulas pareizās atbildes pirmo reizi un pēc 5 mēnešiem, rezultāti uzlabojās p <0,001 (pāru t tests), bet neprecīzi nosauktā/kļūdainā skaitļu secība būtiski nemainījās pirmajā testa reizē un pēc 5 mēnešiem p = 0,78 *Wilcoxon* tests (2.tab.).

2.tabula. Šultes tabulas vidējās vērtības pareizajām atbildēm un nepareizajā secībā nosauktajiem skaitļiem
Table 2. Schulte's table mean values for the correct answers and numbers said in the wrong order

	Fona dati	Rezultāti pētījuma beigās	P vērtība
Dalībnieku skaits	17	17	
Pareizi nosaukto ciparu skaits Vidējā vērtība (Standartnovirze (SD))	2,18 (0,88)	3,59 (1,06)	
Pāru t tests			,000
Nepareizā secībā nosaukto ciparu skaits Vidējā vērtība (Standartnovirze (SD))	0,59 (0,87)	0,53 (0,62)	
Wilcoxon tests			0,78

Secinām, ka izveidotā vingrinājuma kopuma aprobācija sporta stundās sekmēja psihisko procesu (uzmanības īpatnības – noturīgumu, dinamiku, pārslēgšanos, koncentrēšanos) uzlabošanos, ko atspoguļo *Šultes tabulas* metodika vidējo vērtību analīze par pareizi nosaukto ciparu skaitu. Nepareizajā secībā nosaukto ciparu skaits skolēnu eksperimentālajā grupā konstatējošā eksperimenta laikā būtiski nemainījās.

Tālāk veicam *Krepelīna testa* kļūdu analīzi skolēniem, kas aizpildīja pirmo reizi, un konstatējām 0,94 (SD 1,02) kļūdas un atkārtotajā *Krepelīna testā* pēc 5 mēnešiem konstatējām 0,11 (SD 0,33) kļūdas (2.tab.). Kļūdu rezultātu atbilstība normālam sadalījumam pēc Kolmogrova – Smirnova testa atspoguļota (4.att.), kas norāda, ka dati atbilst normālam sadalījumam.

Fona dati *Rezultāti pētījuma beigās*
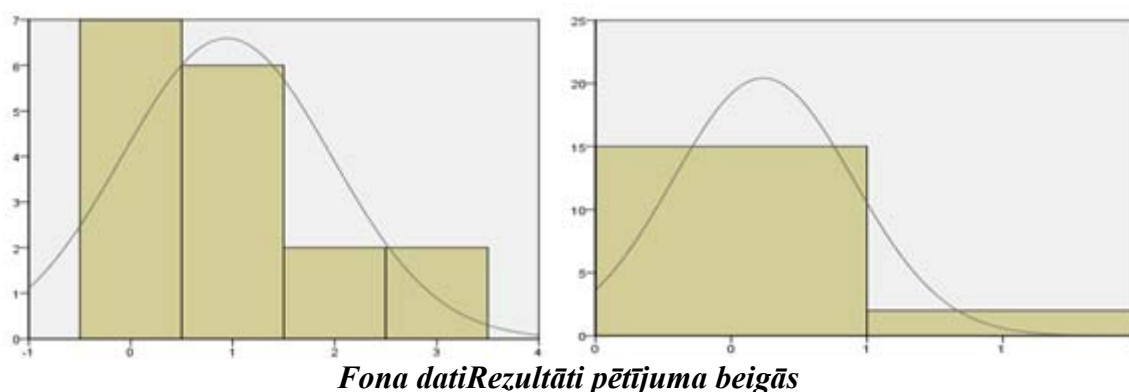
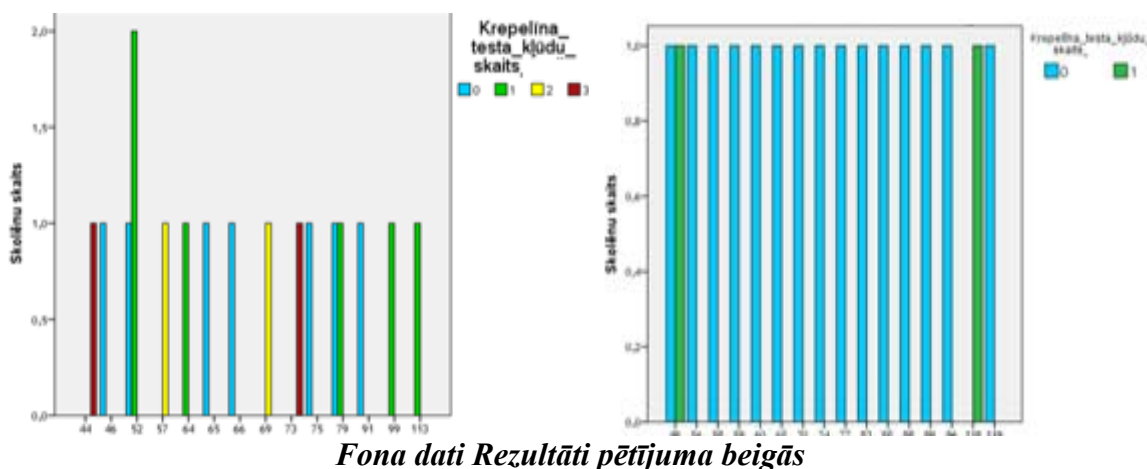**4.attēls. Krepelīna testa kļūdu skaits**
Figure 4. Kraepelin test. error rate

Tālāk veicām *Krepelīna testa* kļūdu skaita salīdzinājumu ar fona datiemun pētijuma rezultātiem beigās ieguvām rezultātu p = 0,003 pāru t tests (3.tab.).

3.tabula. Krepelīna testa kļūdu skaita salīdzinājums
Table 3. Kraepelin test error rate comparison

	Fona dati	Rezultāti pētījuma beigās	P vērtība
Dalībnieku skaits	17	17	
Kļūduskaits Vidējā vērtība (Standartnovirze (SD))	0,94 (SD 1,02)	0,11 (SD 0,33)	
Pāru t tests			0,003

Secinām, ka mūsu izstrādātā vingrinājuma kopuma regulāra aprobācija skolas sporta stundā uzlaboja skolēnu uzmanības īpašības pārslēgšanos, noturību, iestrādāšanos, nogurdināmību, jo samazinājās *Krepelīna testā* pieļauto kļūdu skaits.

Veicām *Krepelīna testa* datu kopsavilkumu par skolēnu eksperimentālās grupas datiem maijā, izmantojot šķērsgriezuma datu analīzi, lietojot χ^2 testu un φ un *Cramer's V* nominālus (5.att.).

Fona dati Rezultāti pētījuma beigās

5.attēls. Krepelīna testa datu kopsavilkums
Figure 5. Kraepelin test data summary

Secinām, ka fona dati ir šādi: vidējais matemātisko darbību skaits *Krepelīna testā* bija 69,17 (SD 19,01) matemātiskās darbības ar 0,94 (SD 1,02) matemātisko darbību kļūdām un 7 skolēni veicot matemātiskās darbības nekļūdījās, 6 skolēni veicot matemātiskās darbības kļūdījās vienu reizi, 2 skolēni, veicot matemātiskās darbības kļūdījās 2 reizes un 2 skolēni, veicot matemātiskās darbības kļūdījās 3 reizes, veicot Krepelīna testu.

Secinājumi
Conclusion

Analizējot un izvērtējot iegūtos rezultātus pētījumā izstrādātā un pielietotā *testa* vidējo fona datu laiku un pētījuma beigu rezultātiem, konstatējāmuzlabošanās par 33: 22s (p < 0,00, pāru t – tests). *Krepelīna* testā veiktās skolēnu veiktās matemātiskās darbības palielinājās par septiņām matemātiskajām darbībām (p <0,001, pāru t – tests) pēc vingrinājumu aprobācijas. Tādejādi veicot fiziskos un uzmanības vingrinājumus, iespējams uzlabot fizisko komponenti un uzmanību samērā īsā laika posmā. Pētījumā izveidotais un pielietotais vingrinājumu kopums sekmēja skolēnu drošumspējas paaugstināšanos.

Summary

In everyday life human securitability is not usually analyzed, neither learning process in education institutions is organized from the aspect of securitability. In our research we emphasized the role of securitability in education institutions. In the learning process it is important to give both substantiated knowledge about behavior beneficial to security and health and to provide skill development for a young person in everyday life according to the situation should make a responsible decision and act safely.

Research object: Education realization process in education institutions. *Research subject:* Secure environment development conditions in education institutions and exercises in sports class to provide schoolchildren individual security. *Research aim:*develop an exercise routine to facilitate schoolchildren individual security. *Research methods:* method of control exercises. Mathematically statistical procession of results (IBM SPSS v20.0).

Taking into account the average time of in the framework of our research developed and applied *Complex Securitability Test* the first time and after five months after the approbation of the exercise routine, a significant increase per 33:22.00 s was obtained in the schoolchildren group (p<0.00, pair t – test), as well as the mathematical actions done in the *Kraepelin test* increased per seven mathematical actions (p<0,001, pair t – test), It allows conclude that doing physical exercises and attention training tests it is possible to improve the physical component and attention in quite short time. Speaking about the time of physical exercise and the attention test or the *Complex Securitability Test*, the never published in Latvia data were obtained, as according to our information, such exercise routine to increase schoolchildren individual securitability has never been done. The exercise routine developed by us facilitates the increase of schoolchildren individual securitability, as testified by the results of the worked-out and applied *Complex Securitability Test*.

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WOMEN'S IN FITNESS SOCIAL BELONGING AND PHYSICAL ACTIVITY IN THE CONTEXT OF QUALITY OF LIFE

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Abstract. *Forming as many interpersonal relationships as possible is one of the most important goals in peoples' lives. Mutual physical activities create a basis for social belonging. Therefore, the goal of the study is to determine the correlation between the components of social belonging and physical activity among women in fitness. The social belonging analysis was conducted with the use of questionnaires (adopted in Latvian), and a shortened version of IPAQ to determine the levels of physical activity. The components of social belonging were defined, and several weak, but significant, correlations between these components and the level of physical activity were found. According to the data obtained in the current study we can conclude, that social belonging has positive impact on PA. Those, who more often feel the relatedness, satisfactory from interpersonal relationship and inclusion in the social groups are more physically active. In order to evaluate, how the quality of life aspect of social belonging for women in fitness correlates with physical activity, they must be taken into account.*

Keywords: *IPAQ, physical activity, quality of life, social belonging.*

Introduction

Nowadays the importance of a healthy lifestyle has become not only a biological necessity, but more of a social one – by acquiring a status in the society or belonging to a particular group, by improving one's quality of life. The fitness industry as an innovative social practice development instrument facilitates extensive social changes in people. The body becomes not only a basic value, but also a term of achievements in the society. Fitness gives tremendous opportunities to communicate, interact with other participants in the fitness industry – club visitors, coaches, nutrition specialists etc. It helps people to feel included in an active lifestyle community and to satisfy the need for social contacts (Allen, 2003). Fitness provides a number of advantages for women. Several scientific studies on fitness proved that women are able to improve their social belonging due to the development of their body – by developing strength, reducing stereotypes of gender advantages in certain fields (Heywood & Dworkin, 2003; Dworkin & Wachs, 2009; Deveaux, 1994; Lenskyj, 1986). In their turn other studies prove that the existing body standards in fitness can lead people to despair, depression and barriers in the society,

because it is not physiologically possible for all to achieve the slimness parameters (Bartky, 1998).

One of the essential conditions of the theme's topicality is that fitness gives each person the opportunity to express oneself through the body's improvement process, to build their social identity and emotional connection with other people (Walseth, 2006; Walseth & Fasting, 2004). When a person feels as socially belonging to a particular group, by being together the person has a feeling as if one were in their home, the person feels that one is a part of a united mechanism (Antonsich, 2010).

The goal of the study is to determine the correlation between the components of social belonging (relatedness, perception of interpersonal relationship in the particular social environment, perception whether others in that setting include, value and respect one) and physical activity among women in fitness.

Theoretical framework

The necessity of social belonging as a quality of life influencing factor for peoples' physical and mental health has been proven in scientific studies (Barden et al., 1985; Hagerty et al., 1992; Hale et al., 2005; Leary et al., 1995). The level of quality of life is associated with an individual's ability to use multiple public resources. Quality of life is an individual's satisfaction of values, goals and needs through a person's ability or lifestyle actualization (Emerson, 1985). Person's satisfaction and well-being results from the degree to which an individual's objective situations agree with the person's wishes or needs (Felce & Perry, 1995).

People need communication and social relationships. One of the most important goals of peoples' lives is to build as much interpersonal relationships as possible (Cosmides & Tooby, 2005). Several authors explain the need for social relationships differently, for instance, as search for love (Murray, 1938), the need for recognition and support (Rogers, 1951), the need for belonging (Baumeister & Leary, 1995; Goodenow, 1993; Maslow, 1954) and motivation to belong (McClelland, 1987), as well as the need for a sense of relatedness (Deci & Ryan, 1991; Ryan, 1993; Vallerand, 1997), resulting from positive and for a person important interpersonal relationships (Baumeister & Leary, 1995). Social belonging is the perception of a person's interpersonal relationship in the particular social group or environment– a perception whether others in that setting include, value and respect one (Baumeister & Leary, 1995). It is important for a person to have one's personal characteristics, abilities recognized by others.

Fitness as an active lifestyle is an important social phenomenon that runs through all levels of the modern society, which has a large impact on the main fields of public life, the national relationships, business life, social status,

fashion, ethical values and peoples' lifestyle. The way how physical activity (PA) affects indicators of quality of life has repeatedly been studied, considering that the PA is any movement of the body, carried out with the help of skeletal muscle, which requires energy consumption (Caspersen et.al, 1995). PA helps to improve the social, mental and physical components (Cacioppo & Patrick, 2008). Carrying out PA provides an opportunity to interact with team members, opponents, referees, coaches etc., which provides an opportunity to satisfy the person's need to belong and to build social relationships with others (Allen, 2003, Baumeister & Leary, 1995). The person's selection of a PA type is determined by what groups one wants to belong to.

In recent years, more and more popular are becoming small group fitness trainings, where every visitor has an opportunity to communicate with other participants (IHRSA, 2013). However, when comparing fitness club group classes to training in a team sport, it can be concluded that the fitness club visitors have a lower sense of belonging, because there is no united goal. Nevertheless, the sense of belonging forms between the coach and fitness club clients and between the clients when for each of them the physical activity result is equally important. Mutual PA is as a foundation of social belonging (Johansson, 1996; Steen-Johnsen, 2001), mutual physical activity morality or behavioural standard in the collective body (Skarderud, 1991).

Methods

In the study voluntarily participated 51 women from 4 fitness clubs in Riga. Respondents' average age was $30 \pm 9,5$ years. Based on the literature sources on social belonging, in order to determine women's, who were engaged in fitness, quality of life component - social belonging, questionnaires were used, adopted in Latvian and which include questions about one of the social belonging components – *relatedness* (Deci & Ryan, 1991), *perception of interpersonal relationship in the particular social environment* and *perception whether others in that setting include, value and respect one* (Baumeister & Leary, 1995).

In order to determine the social belonging, from all selected questionnaire questions selected and grouped were those that meet the social belonging components:

1) *relatedness* - whether the person has a belonging to the particular social group or environment, which was determined by using two tools, they are 'Group Environment Questionnaire and 'Personal Outcomes Index. The original variant of the 'Group Environment Questionnaire' (Widmeyer et.al, 1985; Carron et.al, 1997) is adopted in Latvian (Vazne, 2008). In the study the questionnaire was modified pursuant to fitness classes and group division specifics, taking into account the fact that several participants do not perceive themselves as a team, but as a group in which each participant has its own goals,

needs, interests and values. The Group Environment Questionnaire consists of 18 statements about the group and the sense of belonging to it. My Life: Personal Outcomes Index was used in Latvian (Vahļina, 2012). The tool is more focused on the person's well-being assessment and less on the life standard evaluation (Schalock et al., 2007).

2) *perception of interpersonal relationship* – satisfies, does not satisfy, likes, dislikes, allows to feel important, necessary, belonging was determined with four tools: 'Quality of Life Questionnaire, 'Personal Wellbeing Index', 'Comprehensive Quality of Life A Scale' and 'Group Environment Questionnaire'. In the Quality of Life Questionnaire (Schalock & Keith 1993) in Latvian (Vahļina, 2012) are included 40 questions/indicators. For each indicator there are three possible answers from which the respondent must select the one which suits their situation best. Each subsection applies to another aspect of quality of life (Schalock & Keith, 1993). The 'Personal Wellbeing Index' (Personal Wellbeing Index. International Wellbeing Group, 2006) for adult people was used in Latvian (Šķestere, 2012) to measure the subjective dimensions of quality of life. The scale contains eight satisfaction aspects, where each of the aspects is related to one domain of life. 'Comprehensive Quality of Life A Scale' in Latvian (Vahļina, 2012) can be used for the general adult people population. The questionnaire has been developed based on the definition of quality of life: Quality of life is a summary of objective and subjective indicators, where each indicator axis includes seven life domains (Cummins, 1997).

3) *perception whether others in that setting include, value and respect one* was determined by three tools: 'Personal Outcomes Index', 'General Health Questionnaire' and 'Quality of Life Questionnaire'. The 'General Health Questionnaire 12' (Winifield et.al, 1989) was used in Latvian (Cekule et al, 2006), respondents had to assess their feeling and life over the last 2- 3 weeks. The General Health Questionnaire 12 mostly is widely used around the world for psychological load, overload, general mental state determination. Characterization of the rest of the questionnaires was stated above.

For physical activity amount assessment the short version of the 'International Physical Activity Questionnaire' (IPAQ) (Craig et.al., 2003) in Latvian (Kaupuzs & Larins, 2010) was used. Respondents marked how much of very difficult or moderately intense physical activity they have carried out over the last 7 days, how much time they spent sitting or walking.

In addition, determined were the objective indicators of quality of life, such as home, employment, level of education, financial situation, family status,

leisure-time activity types, belonging to a group or a club. Surveying and data collection was done anonymously.

SPSS ver.17.0 data processing programme was used for data analysis. Where descriptive statistics was carried out (frequencies, mode, mean), Kolmogorov-Smirnov criterion was used to determine whether the data is parametric or non-parametric and non-parametric statistics correlation analysis method was used to determine Spearman's rank correlation coefficient.

Results

By summarizing the data, it can be concluded that all respondents' questionnaires were valid for data processing. From 51 respondents the majority (45%) is aged from 26 to 35 years and the minority (12%) is aged from 36 to 58 years.

A large number of respondents do not participate in leisure-time activities mentioned in the questionnaires. For example, 31,3% over the last month have not visited a bar or a café, 82,5% did not visit sports events, 77,5% did not attend a public worship, 28,8% have not talked to acquaintances or neighbours, 25% have not eaten outside their home, 45% have not been to a cinema, 20% have not visited friends, 15% have not engaged in physical activity, 91,3% of the respondents do not belong to any club or association.

By evaluating the obtained Spearman's rank correlation coefficients (one-tailed), it can be concluded that for each social belonging component questions' group there are several weak significant correlations ($0,2 < r_s < 0,49$) (Dravnieks, 2012) with PA.

Women's in fitness relatedness and PA
There are weak significant correlations between social belonging component's *'relatedness'* questions' group and PA (see Figure 1):
„Group Environment Questionnaire" statement:
'To me, this group is one of the most important social groups to which I belong' and moving on foot. The more important is this group, in which the respondent was engaged in fitness, the more frequently they moved on foot for at least 10 minutes without stopping ($r_s = ,272$, $p < 0,05$).
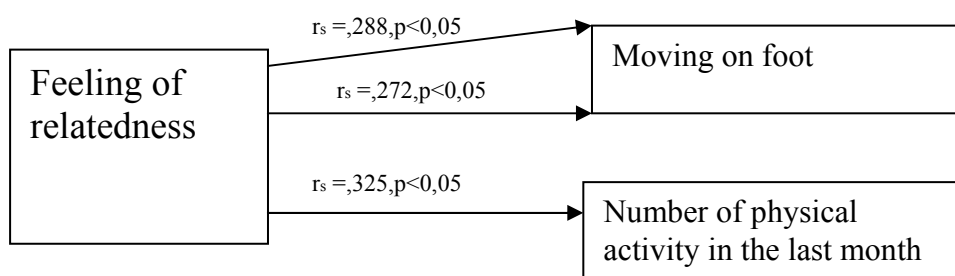

Figure 1. Connection between social belonging component's 'relatedness' questions' group and PA

„Personal Outcomes Index" question:

'Do you feel as a part of society? Do you have a sense of belonging to a group, for instance, a team, church etc.', moving on foot and the number of PA in the last month. The smaller the sense of belonging to a group is, the less the respondent moved on foot ($rs = ,288$, $p<0,05$). The greater the sense of belonging to a group is, the more number of times the respondent has engaged in PA in the last month ($rs = ,325$, $p<0,05$).

Women's in fitness perception of interpersonal relationship and PA

There are weak significant correlations between the second social belonging component's – '*perception of interpersonal relationship*' questions' group and PA (see Figure 2):

'Quality of Life Questionnaire' questions:

'Are you satisfied with the public organization, in which you are engaged in', very difficult PA and moderate PA. The more satisfied the respondent is with the public organization, the less one is carrying out very difficult PA ($rs = -,269$, $p<0,05$) and the more frequently carries out moderate PA ($rs = ,322$, $p<0,05$).

'What about your family members? Do they help you to feel as a wholesome family member, sometimes as a family member or make one feel as foreign to the family', very difficult PA and number of hours of sitting. The more the family members help to feel as a wholesome family member, the more the respondent carries out very difficult PA ($rs = ,383$, $p<0,01$) and the smaller number of hours one spends sitting ($rs = -,234$, $p<0,05$).

'Personal Wellbeing Index' question:

'How satisfied are you with belonging to a local community', the number of sports competitions over the last month, very difficult PA, moderate PA and moving on foot. The more satisfied the respondent is with the local community, the more frequently one participates in sports competitions ($rs = ,409$, $p<0,01$), more often engages in very difficult PA ($rs = ,301$, $p<0,05$), carries out moderate PA ($rs = ,341$, $p<0,01$) and is moving more on foot ($rs = ,289$, $p<0,05$).

'Comprehensive Quality of Life A Scale' questions:

'How satisfied are you with the relationship with family and friends', the number of sports competitions and moving on foot. The less satisfied the respondent is with the relationship, the less one participates in sports competitions ($rs = ,255$, $p<0,05$) and less moves on foot ($rs = ,285$, $p<0,05$).

'How important for you is a close relationship with family and friends' and very difficult PA. The more important a close relationship is for the respondent, the more frequently the respondent carries out very difficult PA ($rs = -,253$, $p<0,05$).

'How important it is for you to do something outside the house together with other people' and very difficult PA. The more important it is for the

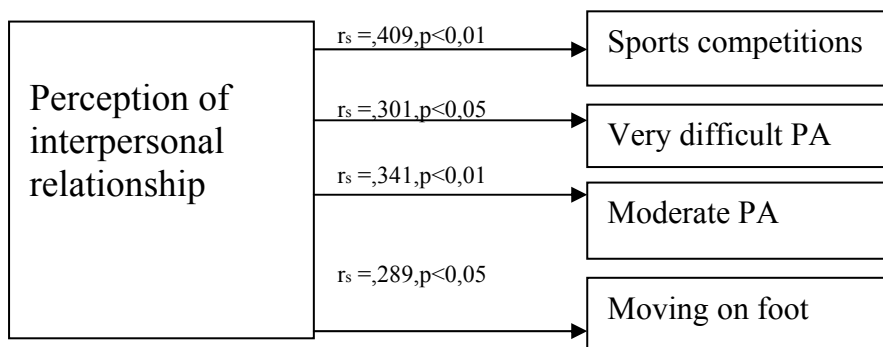respondent to do something outside the house, the more it carries out very difficult PA (rs = -,241, p<0,05).

Figure 2. Connection between social belonging component's perception of interpersonal relationship question group and PA

' Group Environment Questionnaire' statement**:**

'The participants of our group would willingly participate in joint events outside the classes' and moderate PA. The more the respondent would like to participate in joint events with their group, the longer it carries out moderate PA (rs = ,331, p<0,01),

Women's in fitness perception whether others in that setting include, value, respect and one and PA

There are weak significant correlations between social belonging component's *'perception whether others in that setting include, value and respect one'* questions' group and PA (see Figure 3):

'Personal Outcomes Index' questions:

'Do you have a feeling that people in the local community know you' and very difficult PA. The more frequently one has a feeling that one is recognizable in the society, the more the person carries out very difficult PA (rs = ,345, p<0,01). The more frequently a person has a feeling that in the local society he is recognized, the more frequently one carries out very difficult PA (rs = ,-392, p<0,01).

'How often do you go out of the house together with friends or visit some events, parties, dances' and moving on foot. The more often the respondent goes out with friends, the more one moves on foot (rs = ,382, p<0,01).

'General Health Questionnaire' statement:

'You feel that you are an important part of the surrounding society' and very difficult PA. The more the respondent feels that one is an important part of the society, the longer one carries out very difficult PA (rs = ,268, p<0,05).

'Quality of Life Questionnaire' questions:

'Do you sometimes feel redundant in social situations', very difficult PA and moderate PA. If a person feels less redundant, then the person carries out moderate PA (rs = ,496, p<0,01) with a greater number of hours per day (rs = -,430, p<0,01).
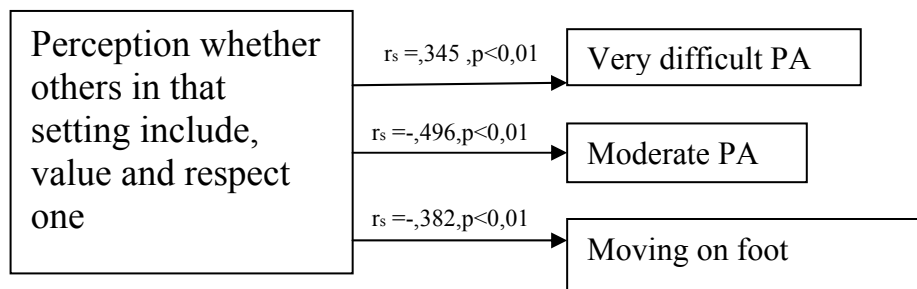
Figure 3. Connection between social belonging component's 'perception whether others in that setting include, value and respect one' questions' group and FA

'Do you often attend entertainment events (celebrations, dances and concerts) in your community', very difficult PA and moderate PA. The more often a person attends events, the more frequently one carries out very difficult PA (rs =,273, p<0,05) and moderate PA (rs = ,337, p<0,01).

'Do you actively participate in these entertainment events', very difficult PA, moderate PA and moving on foot. The more actively the person participates in the events, the more frequently one carries out very difficult PA (rs = ,318, p<0,05), carries out moderate PA (rs = ,319, p<0,05) and also more often moves on foot (rs = ,239, p<0,05).

Based on the obtained results it can be concluded that social belonging has a correlation with PA. Each of the social belonging components: 'relatedness', 'perception of interpersonal relationship' and 'perception whether others in that setting include, value and respect one' has weak, but significant correlations with PA. All three social belonging components have a relation with the frequency with which the respondent was moving on foot. Two social belonging components: 'perception of interpersonal relationship' and 'perception whether others in that setting include, value and respect one' have weak significant connection to very difficult PA and moderate PA. Component 'perception of interpersonal relationship' has a connection with the frequency with which the respondent participates in sports competitions and the component 'relatedness' has a connection with the number of physical activity in the last month. Due to the obtained results we form an understanding of the way in which social belonging is linked with PA and how PA influences the social belonging.

Discussion

By comparing the obtained results of the study with other studies on social belonging's in the aspect of quality of life connection with PA it can be concluded that several scholars have pointed out that a correlation exists (Walseth, 2006; Walseth & Fasting, 2004; Antonsich, 2010; Yuval-Davis, 2006; Anthias, 2006; Pinquart & Sorensen, 2001; Everard et.al., 2000). Our study aims to determine the correlation between the components of social belonging and PA in the aspect of quality of life for women in fitness.

Based on the scientific studies, it can be concluded that by communicating and creating positive social contacts in a fitness club a person feels as belonging to a particular group and spends more time doing PA (Yuval-Davis, 2006; Anthias, 2006) which promotes the psychological processes' improvements, reduces stress, improves the mood (McAuley & Rudolph, 1995). These data also confirm the results obtained in our study that, if a person feels a greater connection with a group, the person is carrying out more PA. Some scholars also point out that by creating friendly relationships with other women from fitness classes there are possibilities to receive emotional support which positively affects a woman's health (Everard et.al., 2000) and that the fitness group and small group classes positively affect socializing for women of all ages (Pinquart & Sorensen, 2001). The results of our study also indicate that if a person has a greater satisfaction with social contacts and one feels included, supported and valued, then the person is more physically active on a daily basis than those who feel the belonging and support less.

Hereinafter in our study, taking into account the obtained results, the social belonging in the fitness training process will be promoted in order to improve the level of quality of life, in its turn positively affecting women's health, which will be determined by introducing other complementary methods.

Conclusions

By analyzing literature the components of social belonging were determined – *relatedness*, *perception of interpersonal relationship* and *perception whether others in that setting include, value and respect one*. According to the components, the selected tools' questions were grouped and their connection with PA was determined.

Based on the obtained results it can be concluded that social belonging has a connection to PA. Each of the social belonging components has weak, but significant correlation with PA.

The correlation between all three social belonging components and the respondent's moving on foot during a week was determined, for example, between the social belonging component's '*relatedness*' questions and moving on foot: 'To me, this group is one of the most important social groups to which I belong' (rs = ,272, p<0,05), 'Do you feel as a part of society? Do you have a sense of belonging to a group, for instance, a team, church etc.'(rs = ,288, p<0,05); between the social belonging component's '*perception of interpersonal relationship*' questions and moving on foot: 'How satisfied are you with belonging to a local community' (rs = ,289, p<0,05); between the social belonging component's '*perception whether others in that setting include, value and respect one*' questions and moving on foot: 'How often do you go out of the house together with friends or go to any events, parties, dances' and moving on foot (rs = ,382, p<0,01).

Two social belonging components': '*perception of interpersonal relationship*' and '*perception whether others in that setting include, value and respect one*' questions and very difficult PA have weak significant correlation, for example, 'How satisfied are you with belonging to a local community' (rs = ,301, p<0,05), 'Do you have a feeling that people in the local community know you' (rs = ,345, p<0,01).

The same social belonging components '*perception of interpersonal relationship*' and '*perception whether others in that setting include, value and respect one*' and moderate PA also have correlation, for instance, 'Do you sometimes feel redundant in social situations' (rs = ,496, p<0,01), 'How satisfied are you with belonging to a local community' (rs = ,341, p<0,01).

The component's '*perception of interpersonal relationship*' question 'How satisfied are you with belonging to a local community' has a connection to the frequency with which the respondent participates in sports competitions (rs = ,409, p<0,01) and component's '*relatedness*' question 'Do you feel as a part of society? Do you have a sense of belonging to a group, for example, a team, church etc.' has a connection to the number of physical activity in the last month (rs = ,325, p<0,05).

Based on the obtained results we form an understanding of the way in which social belonging is connected with PA and that it positively affects PA quantity and type. Those who feel more connected with certain groups, more positively perceive interpersonal relationship and are more satisfied with interpersonal contacts are more engaged in PA. In order to assess social belonging's in the aspect of quality of life for women in fitness correlation with PA one should take into account all the social belonging components.

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KRANIĀLĀS ELEKTROSTIMULĀCIJAS IETEKME UZ KUSTĪBU DINAMISKIEM PARAMETRIEM

The Affect of the Cranial Elektrotherapy on the Dynamic Parameters of Movements

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Abstract. *It is considered that in sport athletes use the cranial electrotherapy stimulation (CES) to improve the performance and to increase the ability to concentrate before the competition. Based on the previous researches we can conclude that CES is absolutely safe. Therefore, the aim of the current study is to determine the CES affect on the dynamic parameters of movements (power, strength, velocity). Subjects of our study were twenty healthy athletes of luge, bobsled and skeleton. The evaluation of the dynamic parameters of movements was performed before and after CES during the barbell „lift" in concentric phase of lifting with FiTRODyne Premium device (Slovakia). To analyze data was used Excel program Statistics 3.1.*
After the CES the parameters of power capacity and the results of strength were improved (α < 0,05). The differences between the time parameters of the controlled exercise before and after CES were not statistically significant (α > 0,05), also the improvement of the velocity of controlled exercise is not statistically significant (α > 0,05).
The results obtained in the research prove that the affect of 10 minutes of CES partly influence the dynamic parameters of movement.

***Keywords:*** *CES, power, strength, velocity.*

Ievads
Introduction

Kraniālās elektrostimulācijas terapija ir uzskatāma par absolūti drošu. Daudzi sportisti pielieto KES lai uzlabotu sporta rezultātus un kā arī, lai palielinātu koncentrēšanās spējas pirms sacensībām. (Mateo, 2011; Molotanovs, 2013; Song, 2007).

Kraniālās elektrostimulācijas terapijas pamatā ir mikrostrāvas elektrosignāls. Elektrosignāls sūta organismam dažādas formas elektriskos viļņus 600 mikroampēru robežās (skat. 1.att.). Fizioloģiskais kraniālās elektrostimulācijas darbības mehānisms tiek pētīts un tiek veikti zinātniskie eksperimenti (Braverman, 1990; Brotman, 1989; Gilula, 2005).
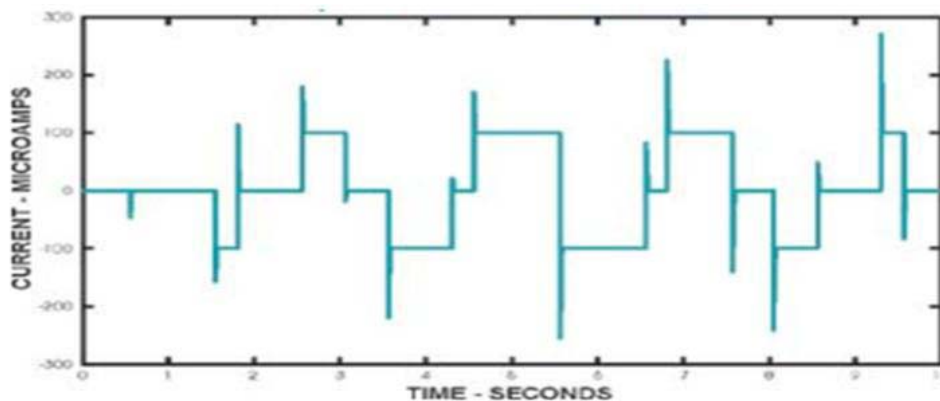
1.att. Elektriskie viļņi (Kirch, 2002, 2004)
Fig.1. Electrical waves (Kirch, 2002, 2004)

Sporta treniņu pamata ir divas būtiskas komponentes: sagatavošanās process un atlēta trenētība kā treniņu procesa rezultāts. Trenera svarīgākais uzdevums ir atrast efektīvāko veidu, kā sagatavot atlētu tā, lai viņš sasniegtu visaugstākās darba spējas un spētu tās realizēt. Kraniālās elektrostimulācijas pielietojums sporta nav pilnība izpētīts. Nav detalizēti izanalizēta kraniālas elektrostimulācijas iedarbība uz sportistu funkcionālo stāvokli, uz kustību dinamiskiem parametriem. Kovaļovs nonāca pie secinājuma, ka kraniālās elektrostimulācijas seanss paaugstina subjektu funkcionālo stāvokli (p < 0,05), arteriālo spiedienu samazina par 11%, satraukuma līmeni samazina par 15% un īslaicīgas atmiņas testa rezultāti uzlabojas par 25%. Cilvēka funkcionāla stāvokļa uzlabošanai un darbaspēju saglabāšanai pietiek ar vienu kraniālās elektrostimulācias seansi (Ковалев, 2004).

Pētījumos tiek atzīmēta situācija, ka kraniālās elektrostimulācijas lielākais efekts bija tad, kad subjektiem bija lielais noguruma līmenis (Kirsch, 2004; Overcash, 1989). Milostnojs sava pētījuma izstrādāja optimālo kraniālās elektrostimulācijas frekvences pielietošanas metodiku cīkstoņiem. Maksimālas slodzes laikā tika pielietota stimulācija ar strāvas stiprumu no 0 līdz 3,5 mA četras minūtes, pēc tam bija nomainīts impulsa biežums, ilgums un strāvas stiprums. Seansa ilgums bija 24 min. Pēc seansa cīkstoņiem bija novērots beta-endorfīna rādītāju pozitīva dinamika asinis. Kraniālā elektrostimulācija pozitīvi ietekmē hemodinamikas un psihofizioloģisko procesu atjaunošanos cīkstoņiem pēc maksimālam slodzēm (Милостной, 2007).

Trojanovs (2005) nonāca pie secinājuma, ka pielietojot kraniālo elektrostimulāciju var veikt veģetatīvā stāvokļa korekcijas, kuras raksturo sirds ritma variabilitātes rādītāju izmaiņas. Efektīvāk kraniālā elektrostimulācija ietekmē sportistus, kuriem ir augsta trenētība.

Kraniālā elektrostimulācija ir piemērota sportistiem, lai risinātu problēmu ar stresu (Song, 2007; Hefferman, 1996).

Sporta zinātnei mūsdienās ir ļoti liela nozīme, bieži vien sekundes desmitdaļas, milimetri ir noteicošie starp uzvarētāju un zaudētāju. Kā noskaidrot, kur bija tā kļūda un kāpēc pretiniekam izdevās mūsu sportistus

apsteigt. Izmantojot pēdējās zinātnes sasniegumus, treneri spēj labāk un saprotamāk izskaidrot kļūdas, sīkāk izdalīt kustību dinamiskos parametrus un izanalizēt katras kustību fāzes stiprās un vājās puses. Sportistu treniņu sistēmas attīstību pētījumu paplašināšana bioloģija, it īpaši tajā joma, kas saistīta ar muskuļu struktūru, regulācijas īpatnībām un energoapgādes mehānismiem, ka arī funkcionālo sistēmu adaptāciju dažādiem apstākļiem. Daudzi pētījumi veicinājuši svarīgas korekcijas, kad tika pārskatītas sportistu sagatavošanas principi (Komi, 1990; Krauksts, 2003; Fernāte, 2002).

Viena no galvenajām īpašībām, kas palīdz sasniegt augstākos rezultātus bobsleja, kamaniņu sporta un skeletona ir ātrspēks. Šī īpašība sastāv gan no spēka, gan no ātruma, un ļauj īsākā laika posmā attīstīt maksimālu spēku, kas ir tik ļoti nepieciešams attiecīgajos sporta veidos. Jauda ir spēja ātri producēt maksimālo spēka izpausmi. Sporta tas izpaužas spējā ātri paātrināt kustības, strauji mainīt kustības, spēja tālu lēkt un ātri izpildīt sitienu. Teorētiski jauda ir spēja pēc iespējas mazāka laika posmā producēt lielāku darbu. Sakarība starp spēku, kustības ātrumu, padarīto darbu norāda uz to, ka ir daudz jaudas izpausmju formas. Sportā jaudu nosaka ar spēka izpausmi laika perioda. (Krauksts, 2003). Lielākā daļa sporta veidu ir nepieciešamas jaudas izpausmes – vienā sporta veidā atlētam, pārvarot lielas, bet citā nelielas pretestības. Vienā spora veidā atlētam ar lielu ātrumu īsā laika posmā jāpārvieto sava personīgā ķermeņa masa, savukārt citā sporta veidā lielā ātrumā jāpārvieto tikai sporta rīks (Viltasolo, 1987). Bet bobsleja, kamaniņu sporta un skeletona atlētam ar lielu ātrumu īsa laika posmā jāpārvieto sava personīga ķermeņa masa un lielā ātruma jāpārvieto sporta rīks. Tradicionāli ar spēka treniņiem palielina arī kustību ātrumu un līdz ar to arī maksimālo dinamisko spēku, bet tikai nelielos kustību ātrumos (Konrads, 2000). Treniņu nodarbības, kuras pielieto mērenās un zemās pretestības ar lieliem kustību izpildījuma ātrumiem, vislabāk attīsta sporta veidam nepieciešamo jaudu (Komi, 1990). Mūsu darba mērķis bija noteikt kraniālās elektrostimulācijas ietekmi uz bobslejistu, skeletonistu un kamaniņu sporta veida pārstāvjiem kontroles vingrinājuma kustību dinamiskiem parametriem.

Metodika
Methods

Pētījuma piedalījās Latvijas Valsts vienības pārstāvji, 20 vīrieši (bobslejs, skeletons, kamaniņu sporta), no 21 līdz 33 gadu vecumam. Ķermeņa masa tika noteikta ar elektroniskajiem svariem SENCOR SBS60115 BK. Vidēja masa bija 89 ±6,1 kg. Auguma garumu noteicam ar antropometra palīdzību. Vidējais augums bija 184±4,1cm. Pētījuma laikā tika pielietots firmas „ELEIKO" svarcelšanas stienis un stienim tika pievienots FitroDyne Premium kabelis, kas savukārt ir pieslēgts pie datora sistēmas. FitroDyne Premium ir uz datortehnoloģijas bāzēta ierīce, kura rādīta atlētu kustību dinamisku parametru

(jaudas, spēka, ātruma, paātrinājuma un laika) digitālajam atspoguļojumam (skat. 2.att.).
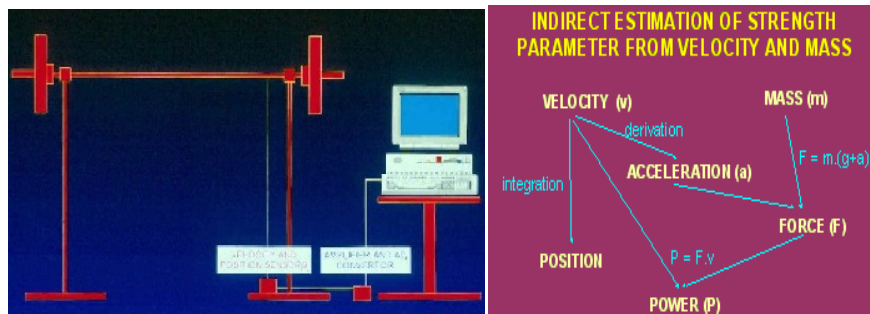

2.att. FitroDyne darbības princips
Fig.2 The principles of FitroDyne operation

Testēšanas laika subjekti veica kontroles vingrinājumu – svarcelšanas stieņa celšanu uz krūtīm vienu atkārtojumu ar maksimālu rezultātu (skat. 3att.).

3.att. Kontrolvingrinājuma izpildes fāzes
Fig.3 The phases of control exercise

Mūsu pētījuma tika pievērsta uzmanība maksimālas un vidējās kontroles vingrinājuma kustību jaudas parametriem, ka arī maksimālam un vidējam ātrumam, maksimālam un vidējam spēkam (skat. 4.att.).
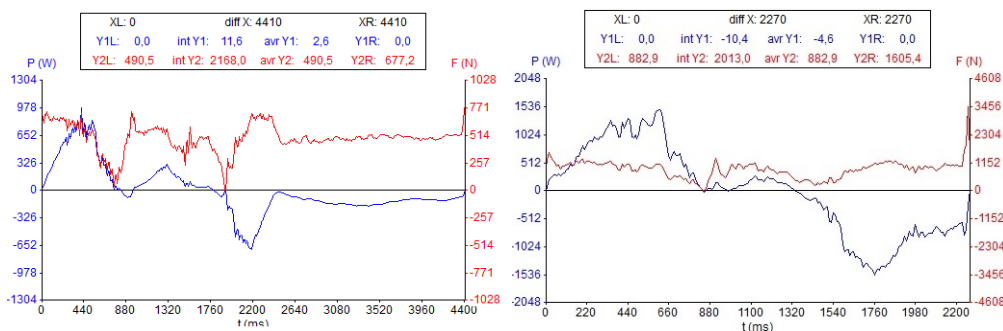
4.att. Jaudas un spēka parametri pirms un pēc KES
*Fig. 4. Power and strength parameters before and after CES*

Pēc maksimāla rezultāta reģistrācija FitroDyne Premium sistēma piedāvā individuālo testēšanas apjomu kontroles vingrinājuma(svarcelšanas stieņa svaru) fizisko īpašību attīstīšanai. Uzreiz pēc testēšanas pirms uzsākot Alpha- Stim SCS seansu, atlēts tika instruēts par to, kas viņu sagaida stimulācijas laikā. Tiek izstāstīts par seansa ilgumu (10 minūtes), par iedarbības laikā sagaidāmajām izmaiņām organismā. Kad atlēts ar visu ir iepazinies, tika uzsākts stimulācijas seanss. Atlēts bija apsēdies. Elektrodi tika samitrināti ar sālsūdens šķidrumu, uzlikti uz ausu ļipiņām un tika uzsākts stimulācijas seanss. Sākotnēji strāvas līmenis atradās ″0″ līmenī, tad pakāpeniski to paaugstināja līdz brīdim, kad sāk izjust pirmās nepatīkamās sajūtas. Šajā punktā atkal nedaudz samazināja strāvas stiprumu, līdz nepatīkamās sajūtas pārgāja, un turpināja terapiju ar šādu stiprumu. Ja nepatīkamās sajūtas atkal atgriežas, tad tika samazināts strāvas stiprums vēlreiz, taču nekad tas nedrīkstēja būt mazāks par atzīmi ″1″, jo tad Alpha-Stim SCS nav ieslēgts un netiek veikta stimulācija. Pēc Alpha-Stim SCS stimulācijas tika atkārtoti izpildīts kontroles vingrinājuma tests- maksimāli spēcīga un ātra svarcelšanas stieņa celšana uz krūtīm.

Rezultāti, kas tika iegūti eksperimenta laikā tika apstrādāti datorprogrammā Excel Statistika 3.1. Tika aprēķināta Stjūdenta kritērija teorētiskā vērtība un noteikts pieaugums (″ir statistiski ticams″ vai ″nav statistiski ticams″) (Dravnieks, 2004).
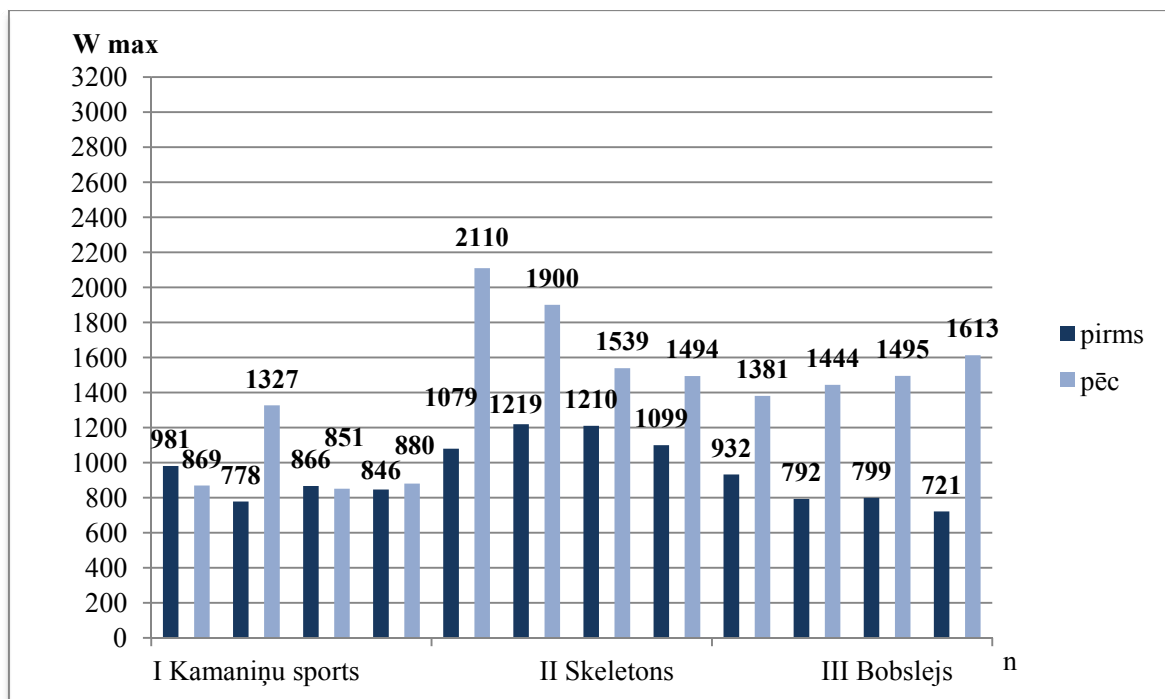
Rezultāti
Results

Bobslejistu, skeletonistu un kamaniņu sportistu kustību dinamisko parametru optimizēšanai izmantojām kraniālo elektrostimulāciju. Eksperimenta dalībniekiem kontroles vingrinājuma kustību vidējas jaudas rezultāti pirms un pēc stimulācijas ir parādīti 5.attēla.
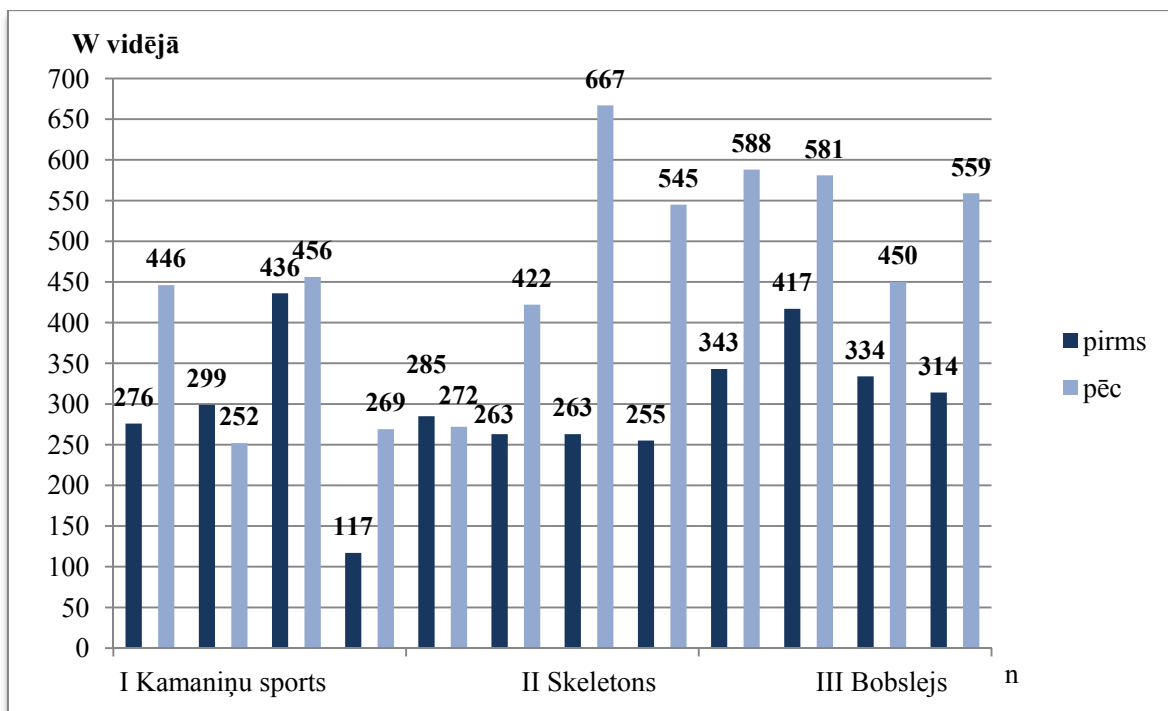
5.att. Vidējas jaudas dinamika pirms un pēc KES
Fig.5 Dynamics of medium power before and after CES

Eksperimentālā grupā uzradīta kontroles vingrinājuma vidēja jauda pirms stimulācijas ir 346,075±23,2 W, pēc kraniālās elektrostimulācijas vidēja jauda ir 520,85±9.2 W, kas ir par 157±0,9 W vairāk nekā pirms elektrostimulācijas. Vidējas jaudas parametru uzlabojums ir statistiski ticams, jo α<0,05. Tātad varam teikt, ka kraniālajai elektrostimulācijai ir redzams iedarbības efekts, jo gan bobslejistiem, gan skeletonistiem, gan kamaniņu sporta pārstāvjiem uzlabojas kontroles vingrinājuma vidējas jaudas izpildījuma parametri. Eksperimentālās grupas uzrādīta maksimāla jauda pirms stimulācijas ir 1115±18,7W, pēc kraniālās elektrostimulācijas kontroles vingrinājuma uzrādīta kustību maksimālā jauda bija 1654,61±19,0 W, kas ir par 539,56±0,7 W lielāka nekā pirms elektrostimulācijas. Maksimālās jaudas uzlabojums ir statistiski ticams, jo α<0,05 (skat.6.att).

6.att. Maksimālās jaudas dinamika pirms un pēc KES
*Fig.6 Dynamics of maximal power before and after CES*

Izvērtējot katra kontroles vingrinājuma piegājiena dinamiku var redzēt, ka maksimālās jaudas augstākie rezultāti ir eksperimenta dalībniekiem Nr. 5, 6, 7, 8, 9. To var pamatot ar muskuļu fizioloģiskām īpatnībām un muskuļu šķiedru attiecību tajos (Komi, 1990). Bet vidējas jaudas radītāja augstākie rezultāti ir subjektiem Nr. 3, 5, 9, 12. Bieži viens subjekts ar augstākiem vidējas jaudas radītājiem ir arī augstākas maksimālas jaudas īpašnieks. To var izskaidrot ar vispārējo fizisko sagatavotību, kas ir iegūta pirms eksperimenta, muskuļu šķiedru tipu, labsajūtu attiecīgajā dienā, ka arī ar to, ka tika ievērota spēka un jaudas attīstīšanas specifika un kontroles vingrinājuma izpildījuma tehnika. Savukārt sportistu uzrādītais kontroles vingrinājuma kustību izpildījuma laiks pirms stimulācijas bija 0,1609±0,01s., pēc kraniālās elektrostimulācijas tas bija 0,2343±0,02s, kas ir par 0,0734s sliktāks nekā pirms elektrostimulācijas. Kustību izpildījuma laikā pagarinājums nav statistiski ticams ($\alpha > 0,05$) (skat. 7.att.).
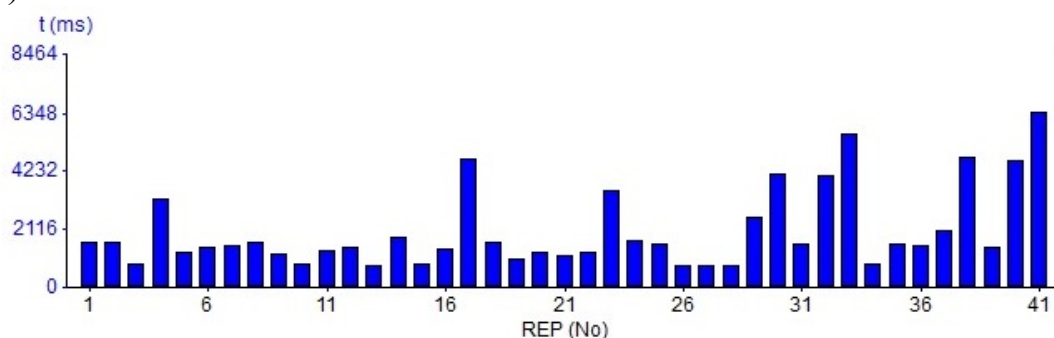
7.att. Kontroles vingrinājuma izpildījuma laiks pirms un pēc KES
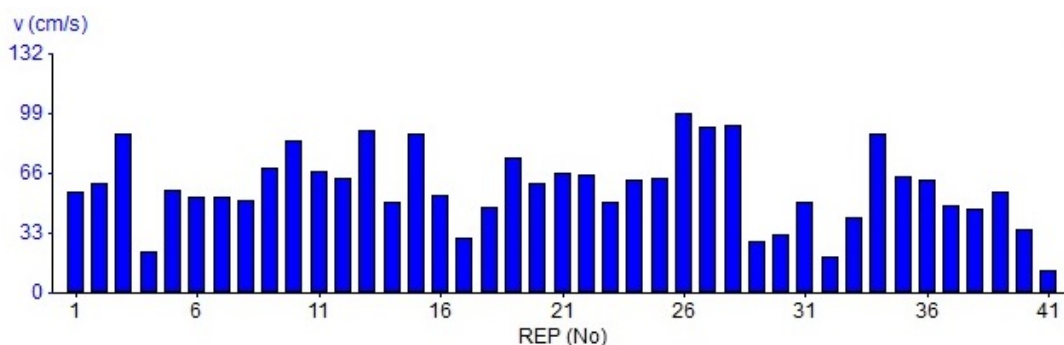*Fig.7 The time of controlled exercise performance before and after CES*

Tātad varam teikt, ka kraniālajai elektrostimulācijai nav redzams būtisks efekts uz kustību izpildījuma laiku. Stimulācija nav devusi vērā ņemamu iedarbību, līdz ar to ir jāpievērš uzmanība treniņu procesa līdzekļiem ātrspēka attīstīšanai, pielietojot vingrinājumu pēc iespējas īsākā laika posmā ar progresējošo slodzes apjomu.

Eksperimetālas grupas kopējais maksimālais kontroles vingrinājuma kustību izpildījuma ātrums pirms kraniālās elektrostimulācijas bija 141,9±1,2 cm ∕s (skat. 8.att.), savukārt pēc stimulācijas kopējais maksimālais ātrums ir 145,37±1,5 cm ∕s, kas ir par 3,47 cm ∕s augstāk nekā pirms stimulācijas. Maksimālā kontroles vingrinājuma kustību izpildījuma ātruma uzlabojums nav statistiski ticams, jo α >0,05.
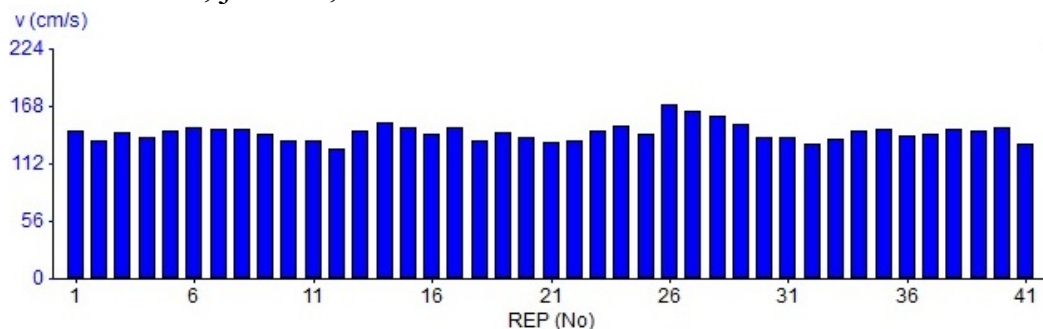
8.att. Kontroles vingrinājuma izpildījuma maksimālais ātrums pirms un pēc KES
Fig. 8 The maximal velocity of controlled exercise performance before and after CES

Eksperimenta laikā kopējais vidējais kontroles vingrinājuma kustību izpildījuma ātrums pirms kraniālās elektrostimulācijas bija 61,28±0,4 cm ∕s, pēc kraniālās elektrostimulācijas 58,43±0,7 cm ∕s, kas ir par 2 ± 0,86 cm ∕s zemāks nekā pirms stimulācijas. Starpība nav statistiski ticama, jo α > 0,05 (skat. 9.att.).

9.att. Kontroles vingrinājuma izpildījuma vidējais ātrums pirms un pēc KES
Fig. 9 The average velocity of controlled exercise performance before and after CES

Kraniālā elektrostimulācija nav devusi iedarbību uz kontroles vingrinājuma vidējo kustību izpildījuma ātrumu, līdz ar to ir jāpievērš uzmanībutreniņu līdzekļu pielietošanai kontroles vingrinājuma vidēja kustību ātruma attīstīšanai visas kustību fāzēs. Stimulācija ir devusi nebūtisku iedarbību uz kontroles vingrinājuma kustību maksimālo ātrumu. Līdz ar to ir jāplāno treniņu procesā plašāk pielietot līdzekļus kustību maksimālā ātruma attīstīšanai no dažādiem

sākuma stāvokļiem. Fiksētie eksperimenta laikā maksimāla spēka parametri pildot kontroles vingrinājumu pirms kraniālās elektrostimulācijas bija vidēja diapazonā 1163,93±17,7 N (skat. 10.att.). Pēc kraniālās elektrostimulācijas maksimālā spēka parametri uzlabojas par 533,23 ± 11,09 N un sastādīja 1697,16 ±28,8 N. Starpība ir statistiski ticama α < 0,05.
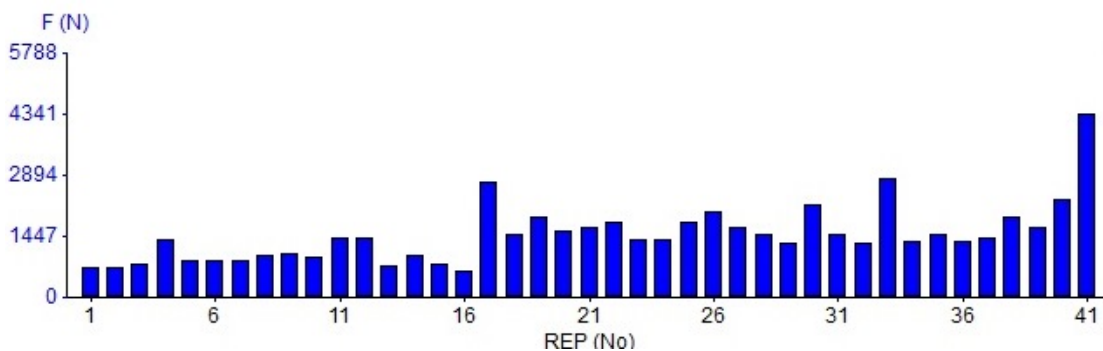
10.att. Kontroles vingrinājuma izpildījuma maksimālā spēka parametri pirms un pēc KES
Fig.10. The maximal strenght parameters of controlled exercise performance before and after CES

Kontroles vingrinājuma izpildes laika vidēja spēka parametri arī uzlabojas pēc kraniālās elektrostimulācijas no 493,02±19,06 N līdz 890,69±21,3 N, kas ir par 397,67 lielāki. Vidēja spēka parametru uzlabojums ir statistiski ticams (α < 0,05).

Tik dažāds kontroles vingrinājuma kustību izpildes laiks (pirms KES - 0,1609s., pēc 0,2343s.), acīmredzot ir saistīts ar nevienādo spēju ātri pāriet no koncentriskās kustību fāzes uz ekscentrisko kustību fāzi (Дворкин, 2005), no muskuļu sasprindzināšanas procesa uz muskuļu atslābināšanas procesu. Kraniālā elektrostimulācija izraisa dažādus iedarbības efektus – no vienas puses, mikrostrāvas viļņu ietekmē dažu bioloģisko sistēmu aktivitāte pastiprinās, un tai pat laikā pavājinās aktivitāte citās (Kirsch, 2008; Троянов, 2003; Brotman, 1989). Jaudas parametru palielināšanās uzreiz pēc kraniālās elektrostimulācijas mēs saistām ar slēdzienu par acetilholīna līmeņa regulāciju, kas nodrošina kustību funkcijas (Latash, 2008).

Secinājumi
Conclusion

Iegūtie rezultāti apstiprina, ka kraniālai elektrostimulācijai ir tūlītēja iedarbība. Kraniālās elektrostimulācijas pielietošana ir pasliktinājusi kontroles kustība izpildījuma laiku par 0,07±0,003 milisekundēm (no 0,1609ms uz 0,2343ms), α >0,05. Kraniālās elektrostimulācijas pielietošana paaugstināja jaudas parametrus izpildot kontroles vingrinājumu uzreiz pēc manipulācijas KES 10min. attiecīgi maksimālā jauda uzlabojās par 539,6 W (α <0,05), savukārt vidēja jauda par 157 W (α < 0,05).

Pētījumā iegūtie rezultāti liecina, ka kraniālās elektrostimulācijas 10 minūšu iedarbība daļēji ietekmē kontroles vingrinājuma ātruma parametrus (pirms KES 61,28cm/s, pēc 58,43cm/s.), kas varētu būt noderīgs atlētu pirms sacensību stāvokļa optimizēšanai. Pēc kraniālās elektrostimulācijas maksimāla spēka parametri uzlabojas par 533,23±11,09N (α <0,05).

Summary

Sport is characterized by high competition among athletes, where the results are distinguished by each athlete's individual mastery. Athletes' functional condition changes every day. Cranial electrostimulation (CES) in the sport science is not fully understood and explored. CES affect on the athletes' dynamic parameters of movements is not well known. Therefore, the aim of the current study is to determine the CES affect on the dynamic parameters of movements (power, strength, velocity). Subjects of our study were twenty healthy athletes of luge, bobsled and skeleton. The evaluation of the dynamic parameters of movements was performed before and after CES during the barbell „lift" in concentric phase of lifting with FiTRODyne Premium device (Slovakia). To analyze data was used Excel program Statistics 3.1.

After the CES the parameters of power were higher than beforethe CES (α < 0,05). The differences between the time parameters of the controlled exercise before and after CES were not statistically significant (α > 0,05) and also the improvement of the velocity of controlled exercise is not statistically significant (α > 0,05).

Apparently, so different time of controlled exercise performance is connected with the ability to switch from concentric phase of movement to eccentric phase as fast as possible (Дворкин, 2005) and from the muscle contraction to muscle relaxation. On the one hand the microcurrent of CES intensifies the activity of some biological systems; on the other hand weakens the activity of others (Kirsch, 2008; Троянов, 2003; Brotman, 1989). The results obtained in the research prove that the affect of 10 minutes of CES partly influence the dynamic parameters of movement.

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DARBA SNIEGUMA NOVĒRTĒJUMS KOMPETENCES KONTEKSTĀ NEATLIEKAMĀS MEDICĪNISKĀS PALĪDZĪBAS PERSONĀLAM – PROBLĒMAS UN IZAICINĀJUMI

The Assessment of Competiencies for Ambulance Personnel – Problems and Challenges

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Abstract. The purpose of this paper is to clarify whether performances assessment at a work place promotes Ambulance professionals for personnel development, and if it providesthe possibility to assess personnel's competence and professionalism. The results of State Emergency Medical Service ambulance personnel's performance assessment in years 2013 and 2014 are analysed in the research. The results obtained that using existing methods for performance assessment, there are not possibility to assess personnel's competence and professionalism for building personnel development programs in the future.

Keywords: ambulance personnel, assessment, competence, performance, professionalism.

Ievads
Introduction

Personālvadības pēdējo gadu aktualitātes ir vērstas uz personāla darba snieguma novērtēšanu ar mērķi veicināt tā profesionālo attīstību un darba efektivitāti. Kompetence un darba sniegums ir kļuvuši par galvenajām doktrīnām, un aktuāls ir jautājums par darba snieguma izpildes vadību. Darbinieka novērtējums ļauj darba devējam pieņemt lēmumu par darbinieka zināšanu līmeni, prasmēm vai profesionālo uzvedību un attieksmi, noteikt mācību n attīstības vajadzības, lai pilnveidotu darba izpildes sniegumu nākotnē. Taču ārstniecības personu darba snieguma novērtēšanas pieredze pasaulē vēl joprojām attīstās, arī Latvijā pēdējos gados uzsākti pirmie darba snieguma novērtēšanas pasākumi. Kā norāda ASV ārsts Vestvūds (Westwood, Griffin, Hay, 2013), personāla novērtēšana veselības aprūpē turpina attīstīties un progresēt dažādos līmeņos. Novērtēšanu var uzskatīt par instrumentu ārstniecības personu salīdzinājumam un pārliecības gūšanai par viņu gatavību darbam. Vestvūds (Westwood, 2013) novērtēšanu uzskata par nepārtrauktu procesu, kas notiek visu ārstniecības personas profesionālās karjeras laiku, parādot izmaiņas no tikko kvalificēta speciālista snieguma līdz izaugsmei profesionālās dzīves laikā. Novērtēšana ļauj identificēt darbinieka snieguma

rezultātus, kļūdas, pozitīvo praksi un sniegt atgriezenisko saiti par novēroto. Būtiski, ka novērtējumam jābūt objektīvi pamatotam un pierādāmam. Vestvūds iesaka veikt uz kompetenci balstītu novērtēšanu darba vietā, paļaujoties uz reālas klīniskās situācijas novērošanu, tādejādi vērojot indivīda sniegumu darbībā, uzskatot, ka jauno darbinieku novērtēšana darba devējam nodrošina garantiju pārliecībai, ka darbinieks ir gatavs darbam (Westwood, Griffin, Hay, 2013). Tajā pašā laikā Vestvūds un līdzautori (Westwood, Griffin, Hay, 2013) norāda, ka, novērtēšana veselības aprūpes profesionāļiem ir joma, kas attīstās pēdējos gados, un, kam vēl vajadzīgi pētījumi un tiem sekojoši pilnveides procesi. Latvijā publiskajā pārvaldē ieviestā uz kompetenču novērtēšanu balstītā personāla darba izpildes rezultātu novērtēšanas sistēma, tiek piemērota arī Neatliekamās medicīniskās palīdzības dienesta (NMPD) ārstniecības personālam. Pētījumā, analizējot 2013. un 2014.gada ārstniecības personāla darba snieguma novērtēšanas rezultātu datus un kompetences teorētiskos aspektus, meklēti iespējamie risinājumi darba izpildes novērtēšanas procesa pilnveidošanai ārstniecības personālam neatliekamā medicīnā.

Pētījuma objekts ir Neatliekamās medicīniskās palīdzības dienesta (NMPD) ārstniecības personāla darba snieguma novērtēšanas sistēma.

Raksta mērķis ir izpētīt, pamatojoties uz kompetences teorētiskajām atziņām, vai esošā personāla darba izpildes novērtēšanas sistēma nodrošina iespēju novērtēt personāla kompetenci, vai tā veicina personāla attīstību, un vai tā ļauj novērtēt personāla profesionālismu.

Materiāls un metodika
Materials and Methods

Pētījumā analizēti 2013. un 2014.gada NMPD struktūrvienību ārstniecības personu darba izpildes snieguma novērtējumu rezultāti sadalījumā pa amatiem, reģioniem un gadiem. 2013. gadā novērtēšanā piedalījās 2432 ārstniecības persona, starp kurām 582 (23,9%) ir ārsti, 219 medicīnas māsas un māsu palīgi (9,0%) un 1631 ārsta palīgu (67,1%). 2014. gadā analizēti dati 1590 ārstniecības personām, tai skaitā 273 (17,2%) ārsti, 146 māsas un māsu palīgi (9,2%) un 1171 ārsta palīgu (73,6%). Dati analizēti arī pēc NMPD personāla reģionālā sadalījuma (struktūrvienības), Rīga, Latgale, Kurzeme, Vidzeme un Zemgale.

Darba izpildes snieguma novērtējums veidojas no darbinieka pašvērtējuma un tiešā vadītāja novērtējuma, vērtējot amata pienākumu izpildi, kompetences un kvalifikāciju, attīstības pārrunu laikā vienojoties par turpmāko attīstību, mācību vajadzībām un karjeras plāniem. Darbinieks sniedz komentāru par to, kā viņš ir spējis izpildīt amata pienākumu izpildes apjoma un kvalitātes prasības, norādot savas stiprās un vājās puses. Vadītājs, vērtējot darbinieka amata pienākumu izpildi, ņem vērā darbinieka komentārus, bet papildina tos ar saviem novērojumiem un faktiem, kurus darbinieks nav pieminējis. Ārstniecības personālam novērtējamās kompetences ir atšķirīgas atbilstoši amata saturam,

vērtējot komandas darbu, ētiskumu un rūpes par kārtību, precizitāti un kvalitāti ārstniecības atbalsta personālam, brigādes vadītājam papildinot ar patstāvību un atsaucību. Katrai kompetencei ir dota definīcija un skaidrojums snieguma vērtējumam, kā arī izstrādāta kompetenču vārdnīca (Kompetenču vārdnīca, 2011). Profesionālās kvalifikācijas vērtējumu veido ieguldījuma kritēriji: izglītība, profesionālā pieredze, profesionālās zināšanas un vispārējās prasmes. Katrai novērtējuma sadaļai doti kritēriju skaidrojumi, lai nodrošinātu novērtējuma objektivitāti, kā arī kritērija īpatsvars pret kopējo vērtējumu. Darba izpildes novērtējuma skala sastāv no piecām ballēm, kur augstākais vērtējums ir *teicami* -darba izpilde pārsniedz prasības visā novērtēšanas periodā, *ļoti labi*– darba izpilde pārsniedz prasības atsevišķās jomās, *labi* – darba izpilde atbilst amatam izvirzītajām prasībām, *jāpilnveido* – darba izpilde atsevišķās jomās neatbilst amatam izvirzītajām prasībām, un negatīvs novērtējums ir *neapmierinoši* –darba izpilde neatbilst lielākajai daļai prasību.

Lai konstatētu izmaiņas personāla darba izpildes snieguma novērtējumā, kā arī amata pienākumu izpildes, profesionālās kvalifikācijas un kompetenču novērtējumu rezultātu savstarpējo korelāciju, 2013. un 2014. gada novērtējuma rezultāti apstrādāti ar IBM SPSS Statistics 20, Mann–Whitney U testu, KruskalWallistestu, izmantojot neparametriskās statistikas metodes.

Rezultāti
Results

Salīdzinot personāla vidējos vērtējumus 2013. un 2014. gadā tika konstatēta statistiski ticama atšķirība amatu pienākumu izpildē (Z=-2.173; p<0,05) un kompetences vērtējumā (Z=-5.404; p<0,001), vidējie vērtējumi 2013. gadā bijuši mazliet zemāki nekā 2014. gadā. Tas ir skaidrojams ar to, ka 2014.gadā konstatēti mazāk kļūmīgi gadījumi, kas pasliktina personāla darba izpildes novērtējumu amata pienākumu sadaļā. Savukārt profesionālā kvalifikācijā un kopējā vērtējumā nav novērota statistiski ticama atšķirība vērtējumos 2013. un 2014. gadā (Z=-0.208; p=0.479 un Z=-1.741; p=0.082). Profesionālās kvalifikācijas vērtējums ir sadalīts šādos kritērijos:

- **Izglītība**: vērtē darbinieka esošās izglītības atbilstību amata prasībām saskaņā ar amata aprakstu un amata katalogu, nosakot, ka, ja ārstniecības personai nav sertifikāta specialitātē, vērtējums ir– *jāpilnveido* (daļēji atbilst prasībām), ir sertifikāts specialitātē – labi (atbilst prasībām), ir divi vai vairāki sertifikāti - ļoti labi (daļēji pārsniedz prasības), ir apmācīt tiesīga persona, un/vai doktora grāds medicīnā –teicami (pārsniedz prasības).
- **Profesionālās zināšanas un prasmes**: vērtē darbinieka profesionālo zināšanu un prasmju atbilstību amata prasībām. Ar profesionālajām prasmēm saprot attiecīgajai profesijai specifiski nepieciešamās zināšanas un prasmes, kas to atšķir no citām profesijām. Ārstniecības

personāla profesionālās zināšanas un prasmes tiek novērtētas, vērtējumā iekļaujot ikgadējo zināšanu pārbaužu (IKP) rezultātus (Dambe, Atstāja, 2013[a,b], Dambe, Atstāja 2014), nosakot, ka, jaIKP nav veikta neattaisnotu iemeslu dēļ vai IKP ir veikta nesekmīgi - *neapmierinoši* (neatbilst prasībām), ja IKP ir sekmīgi veikta, kādu no posmiem kārtojot atkārtoti, tad novērtējums ir jāpilnveido (daļēji atbilst prasībām), IKP visi posmi ir sekmīgi veikti, bet vērtējums katrā posmā ir samazināts vairāk par 2 ballēm, tad novērtējums ir *labi* (atbilst prasībām), IKP visi posmi ir sekmīgi veikti, bet vērtējums katrā posmā ir samazināts ne vairāk par divām ballēm, tad novērtējums ir *ļoti labi* (daļēji pārsniedz prasības), ja IKP visos posmos ir iegūts maksimālais baļļu skaits, tad novērtējums ir *teicami* (pārsniedz prasības).

- **Vispārējās prasmes un zināšanas** ārstniecības personālam tiek novērtētas, pamatojoties uz valsts valodas, svešvalodu un datorprasmju novērtējumu.

Salīdzinot vērtējumus 2013. un 2014. gados katrā no amatu grupām atsevišķi konstatēts, ka tikai ārsta palīgi uzrāda statistiski ticamus atšķirīgus vērtējumus, kuri 2014. gadā ir augstāki nekā 2013. gadā: Amata pienākumu izpilde (Z=-3.472; p<0.05); Kompetences (Z=-6.502, p<0.001) un kopējais vērtējums (Z=-3.088; p<0.05. Profesionālās kvalifikācijas vērtējumā ārstu palīgu grupā būtiski neatšķiras (Z=-3.088; p<0.05).Ne ārstu grupā, ne medmāsu grupā neviens no vērtējumiem statistiski ticami neatšķiras, salīdzinot rezultātus 2013. un 2014. gadā.

Lai izvērtētu vērtējumu atšķirības Latvijas reģionos, 2013. un 2014.gadu vērtējumi tika salīdzināti katrā no reģionālajiem centriem atsevišķi. Rīgas reģionālajā centrā nav izmaiņu vērtējumiem par „Amata pienākumu izpildi” un „Kopējais vērtējums” (Z=-0.852; P=0.394 un Z=-0.778; p=0.437), savukārt „kompetences” un „profesionālās kvalifikācijas” rādītāji uzlabojušies (Z=-2.368; p<0.05; Z=-2.890; p<0.05). Vidzemē bez izmaiņām vērtējumu par „Amata pienākumu izpildi” un „Kopējais vērtējums” (Z=-0.852; P=0.394 un Z=-0.778; p=0.437), „kompetences” vērtējumi mazliet uzlabojušies (Z=-2.368; p<0.05), bet „profesionālās kvalifikācijas” rādītāji statistiski ticami pazeminājušies (Z=-2.890; p<0.05). Kurzemē, Zemgalē un Latgalē ir līdzīgi rezultāti- visi rādītāji bez izmaiņām, izņemot „Kompetences”, kuru vērtējumā redzams uzlabojums (p<0,05).Salīdzinot vērtējumus pēc amatiem, konstatēts, ka tie nav līdzīgi. Vidēji visaugstāk vērtēti ārsti pēc visām vērtējumu skalām, tad seko ārsta palīgi un zemākie vērtējumi ir medicīnas māsām visos gadījumos p<0.001. Tāda pati tendence saglabājas, ja analizē vērtējumus pēc amatiem katrā gadā atsevišķi, 2013. un 2014. gadā. Visos gadījumos p<0.001. Tas ir skaidrojams ar iepriekš minētajiem kvalifikācijas un izglītības rādītājiem, jo ārstiem ir augstāki kvalifikācijas rādītāji, savukārt māsām un māsu palīgiem nav sertifikāta specialitātē, tādejādi neiespējami iegūt ļoti labu novērtējumu. Sadalot datus pēc

reģiona, redzams, ka Rīgā un Vidzemē saglabājas līdzīga tendence: ārstu novērtējums ir visaugstākais, tālāk seko ārstu palīgi un zemākie vērtējumi medmāsām un māsu palīgiem, visi vērtējumi statistiski ticami atšķiras (visos gadījumos p<0.001 un p<0.05 Vidzemē amatu pienākumu izpilde un kopējai vērtējums). Kurzemē līdzīga tendence tikai vērtējumā „profesionālā kvalifikācija" (p<0,001) un „kopējais vērtējums" (p<0,05), turklāt kopējais vērtējums ārstiem un ārsta palīgiem neatšķiras, tikai medmāsām tie ir zemāki. „Amatu pienākumu izpilde" un „kompetenču vērtējums" pēc amatiem Kurzemē neatšķiras (p>0,05). Zemgalē nav būtiskas atšķirības starp dažādu amatu pārstāvjiem „amatu pienākumu izpildes" vērtējumos (p>0,05), bet atšķiras visi pārējie vērtējumi (p<0,05). Latgalē nav būtiskas atšķirības starp dažādiem amatiem „amatu pienākumu izpildes" un „profesionālā kvalifikācija" vērtējumos (p>0,05), bet atšķiras kompetenču un kopējā vērtējumā (p<0,05).

Diskusija
Discussion

Cilvēkresursu vadības teorijās lieto jēdzienus uz *kompetenci balstīta pieeja*, *kompetenču modelis*, ar to saprotot amata izpildei nepieciešamās īpašības, kas ļauj atšķirt labu darbinieku no izcila vai ne tik laba darbinieka, uzskatot minētās īpašības par kompetencēm, kuras katru atsevišķi var novērtēt (Ešenvalde, 2009, Spensers, Spensere, 2011). Kompetences jēdzienu skaidro kā *iestādes un pilnvaru apjomu, lietpratību, plašas zināšanas, izpratni kādā jomā, jautājumā vai jautājumu kopā* (Svešvārdu vārdnīca, 2007, 373), *nepieciešamās zināšanas, profesionāla pieredze, izpratne kādā noteiktā jomā, jautājumā un prasme zināšanas un pieredzi izmantot konkrētā darbībā* (Pedagoģijas terminu skaidrojošā vārdnīca, 2008, 83). Bursikots (Boursicotetal., 2011) kompetenci raksturo ar to, ko indivīds spēj izdarīt savā praktiskajā darbā, kamēr darba sniegumam vajadzētu atspoguļot, ko viņš patiesībā dara klīniskajā praksē, ar to vairāk tiecoties balstīt kompetenci uz zināšanām. Cilvēkresursu vadības pieejās tiek minēts, ka darbinieka darba sniegums ir atkarīgs no viņa zināšanām, prasmēm, motivācijas, attieksmes, u.c., kas veido darbinieka kompetenci. L.Leins (Lane, Wolf, Woodar,1 2003) norāda, ka kompetence ir spēja pielietot specifiskas zināšanas, iemaņas, pieredzi, atziņas un sociālās saites, lai sekmīgi risinātu noteiktos uzdevumus, kā arī apgūt nākotnē nepieciešamās zināšanas un prasmes. Izmantojot kompetenču pieeju personāla vadībā, iespējams katram amatam noteikt spējas, prasmes, rīcību un profesionālās zināšanas, kas nepieciešamas vai tiek izmantotas sekmīgai vai izcilai darba izpildei. (Lane, Wolf, Woodar 2003). Kā vienas no svarīgākajām prasmēm tiek minētas sevis apzināšanās, sevis vadīšana, neatkarīga kritiskā domāšanā, pilsoniskā atbildība, kas veido pārliecinātu personību ar spējām veidot tolerantas attiecības.
Kompetences jēdziens attīstās 19.gadsimta otrajā pusē, saistot to ar indivīda īpašībām vai uzvedības pazīmēm, kas attiecas uz profesionālo darbību

(McClelland, 1973, Klemp, 1980, Boyatzis, 1982, Fletcher, 1991). Rotvels (Rothwell, 2009) uzskata, ka cilvēka profesionālā kompetence veidojas no viņa zināšanām prasmēm, pieredzes un attieksmes, utt. Kompetence kā viens no personāla vadības instrumentiem tiek izmantots, lai ar vienkāršiem rīcības aprakstiem izskaidrotu darbiniekam sagaidāmo rīcību. Kompetenču vārdnīcā (2011) sniegts valsts pārvaldē aktuālo kompetenču saraksts un definīcijas, kā arī norādītas amatu grupas, kurām visbiežāk atbilst minētās kompetences. Tāpat Kompetenču vārdnīcā (2011) norādīts, ka jēdzienus „kompetences, kompetence'' ikdienas saziņā lieto gan pilnvaru, gan lietpratības nozīmē *(competence)*, bet personāla vadībā tie visbiežāk tiek lietoti, lai raksturotu darbinieka uzvedības *(behaviour)*, jeb rīcības modeļus tipiskās darba situācijās *(competency)*. Kompetences palīdz skaidrot ar kādām prasmēm un, kādā veidā rīkojoties, darbs ir jādara (Kompetenču vārdnīca, 2011). Vestvūds (Westwoodetal., 2013) uzsver, ka kompetence un sniegums ir viens otru papildinoši. Kompetence paļaujas uz piemērotām zināšanām, prasmēm un attieksmi. Uz kompetenci balstīta novērtēšana novērtē skaidri norādītu rezultātu kopumu, un tās mērķis ir, lai varētu aprakstīt, objektīvi un kvantitatīvi, kas personai ir jādara, lai parādītu atbilstību kritērijiem. Kompetences atbilstoši minētajam apgalvojumam ir zināšanas un prasmes, kas patiešām nepieciešamas darbam, un to pārbaude ir priekšnoteikums kompetencei praktizēt. Kompetence tiek novērtēta līmenī „zina'' skat. 1. attēlu. Novērtējot kompetenci darba vietā, klīniskajā vidē nozīmē novērtēt, ko darbinieks izdara korekti, vērtējot, kā viņš patiesībā dara, līdz ar to sākas snieguma novērtēšana, kas ir pēc Millera piramīdas augstākā līmeņa vērtējums klīniskajai kompetencei (Miller, 1990). Snieguma novērtējumam ārstniecības personām iesaka izmantot plaša diapazona darba vietā bāzētas novērtēšanas: gadījumu veidotas diskusijas, mazus, klīnisku novērtējumu uzdevumus, tiešus procedūru novērojumus un vairāku avotu atgriezenisko saiti, kas tiek plaši lietotas novērtējot profesionāļus medicīnā. Šāda novērtēšana nodrošina iespējas izdarīt spriedumu par to cik labi indivīdi strādā sarežģītā vidē un kā pielieto savas zināšanas un prasmes savā ikdienas darbā.
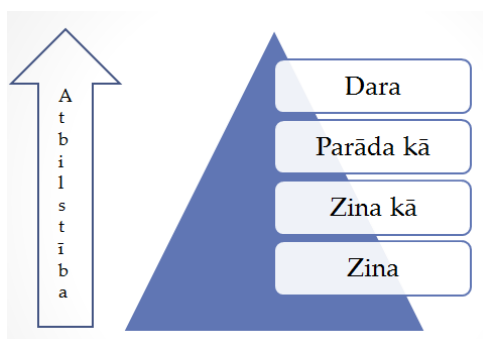
1.attēls. Kompetences un darba snieguma novērtēšana, pamatojoties uz Millera klīniskās kompetences piramīdu (Vestvūds, Grifins, 2013)
Figure 1. Assessment of competence and performance, based on Miller (Westwood, Griffin, 2013)

Plaša kompetenču vārdnīca arī sniegta SIA Eiropersonāls tulkotajā Spenseru grāmatā „Darba kompetences: izcila snieguma veidošana" (Spensers, Spensere, 2011). Īpašība nav kompetence, ja vien tā neparedz kaut ko jēgpilnu reālajā pasaulē. Psihologs Viljams Džeimss ir teicis, ka pirmajam zinātnieku likumam vajadzētu būt šādam: „atšķirība, *kas nerada* atšķirību, *nav* nekāda atšķirība". Īpašība vai skolas diploms, kas nerada nekādu atšķirību darba sniegumā, nav kompetence, un to nevajadzētu izmantot cilvēku novērtēšanā. (Spensers, 2011). Spenseri nosaka kompetenču grupas, piemēram, **sociālā un cita veida palīdzības** kompetenču grupa, kur kā nozīmīgākās vērtējamās kompetences tiek uzskaitītas: citu izpratne, empātija, klausīšanās, jūtīgums pret citiem, citu cilvēku jūtu apzināšanās, padziļināta izpratne (Spensers, Spensere, 2011).

Medicīnas māsām Spenseru uzskaitītās kompetences ir: citu attīstīšana, elastība, iniciatīva, konceptuālā domāšana, paškontrole, piederības interese, sasniegumu orientācija, valdonība/uzstājība, profesionālās zināšanas, tehniskās zināšanas, un netipiskās kompetences, ar to saprotot tieši specifiskās profesionālās zināšanas. Līdzīgi Spenseri definējuši ārstu kompetences, nosakot: iniciatīva, konceptuālā domāšana, pārliecība pār sevi, paškontrole, profesionālās zināšanas, u.c. Savukārt Vestvūds kompetenci saista ar darba snieguma kritērijiem. Piemēram, lai identificētu efektīvus ārstus, varētu tikt izveidots precīzas diagnozes un ārstēšanas mērījums. Ārstu ekspertu grupa varētu novērtēt simptomus pacientu grupai un formulēt diagnozes un ārstēšanas plānu. Novērtējamiem ārstiem lūgtu izmeklēt šos pašus pacientus. Kritērijs izciliem ārstiem būtu tas, cik lielā mērā viņu diagnozes un ārstēšanas plāni sakrīt ar ekspertu diagnozēm un ārstēšanas plāniem. (Westwood, 2013,112).

Latvijā, līdzīgi kā vairumā pasaules valstu (ASV, Lielbritānija, Austrālija, Zviedrija, Igaunija, Polija, Francija, u.c.) neatliekamā medicīna ir izveidota kā medicīnas pamatspecialitāte. Ministru kabineta noteikumi Nr.268 „Noteikumi par ārstniecības personu un studējošo, kuri apgūst pirmā vai otrā līmeņa profesionālās augstākās medicīniskās izglītības programmas, kompetenci ārstniecībā un šo personu teorētisko un praktisko zināšanu apjomu" nosaka ārstniecības personu un ārstniecības atbalsta personu reģistrā reģistrēto attiecīgās profesijas ārstniecības personu kompetenci ārstniecībā un pacientu aprūpē, kā arī attiecīgās profesijas ārstniecības personu teorētisko un praktisko zināšanu apjomu, sertificēto un ārstniecības personu un ārstniecības atbalsta personu reģistrā reģistrēto attiecīgās pamatspecialitātes, apakšspecialitātes, papildspecialitātes ārstniecības personu kompetenci ārstniecībā un pacientu aprūpē, kā arī attiecīgās pamatspecialitātes, apakšspecialitātes, papildspecialitātes ārstniecības personu teorētisko un praktisko zināšanu apjomu. Minētie noteikumi nosaka arī neatliekamās medicīnas ārsta un ārsta palīga kompetenci, lietpratības izpratnē, piemēram, *neatliekamās medicīnas ārsta kompetencē ir, pārvaldot neatliekamās medicīniskās palīdzības, intensīvās terapijas, reanimācijas, toksikoloģijas un katastrofu medicīnas teoriju,*

medicīniskās tehnoloģijas un praksi, sniegt neatliekamo palīdzību slimajiem/cietušajiem dzīvībai vai veselībai bīstamā, kritiskā stāvoklī pirmsslimnīcas etapā un stacionāro ārstniecības iestāžu uzņemšanas (neatliekamās medicīniskās palīdzības) nodaļās. Noteikumi nosaka neatliekamās medicīnas ārstam nepieciešamās teorētiskās zināšanas un praktiskās iemaņas, lai veiktu ārstniecisko darbību. Līdz ar to diskutabls ir jautājums par kompetences vai kompetenču novērtēšanu NMPD esošās darba izpildes snieguma novērtēšanas izpratnē, vērtējot tādas kompetences kā: rūpes par kārtību, precizitāti un kvalitāti, darbs komandā, patstāvība, atsaucība un ētiskums. Džonsons un Vaismena (Johnson, Wiseman, 2013) iesaka klīnisko kompetenci novērtēt salīdzinājumā ar darba sniegumu, uzskatot, ka darba snieguma novērtējums atrodas Millera piramīdas virsotnē – līmenī „dara", norādot, ka līmeņi „zina" un „zina kā" ir kognitīvie, izziņas līmeņi, kuros zināšanas un izpratni var pārbaudīt ar dažādiem testiem. Turpretim līmeņi „rāda kā" un „dara" atspoguļo reālo uzvedību, un tajos var vērtēt darba sniegumu un klīnisko kompetenci, izmantojot atgriezenisko saiti, simulāciju uzdevumus u.c. novērtēšanas metodes. Snieguma novērtēšana balstās uz vērtējumu kā ārstniecības persona var apvienot zināšanas, prasmes, lēmuma pieņemšanu un attieksmi darbā klīniskajā vidē. Pastāvīgi vērtējot personāla sniegumu ikdienas praksē, var atklāties prasmes, kas tiek veiktas izmantojot citas pieejas, un neatbilst noteiktajai kārtībai, tas ļauj arī pārbaudīt tādas jomas kā profesionālie paradumi, efektīva darbu organizācija, laika menedžments, komunikācija ar pacientu un kolēģiem, un darbs komandā. (Johnson, Wiseman, 2013). Šeit būtiska nozīme pašvērtējumam, pacientu, kolēģu novērtējumam un citiem būtiskiem profesionālas rīcības rādītājiem. Sistemātisks profesionālisma novērtēšanas pieeju apskats medicīnā ir adaptēts no Vilkinsona (Wilkinsonetal, 2006), kas atklāja, ka izmantojot novērtēšanā kolēģu vērtējumu, pacientu aptaujas, mediķa rīcību sarežģītos un kritiskos gadījumos, sadarbības izpausmes veidus kā ieguldījumu komandas darbā, pētījumus un mācību aktivitātes, slepeno simulēto pacientu, pašnovērtējumu, klīnisko situāciju uzdevumus, novērošanu procedūru veikšanas laikā, intervijas un simulāciju pārbaudi, rakstisku izvērtējumu, situācijas izpratnes pārbaudes testus, scenārijus, uz gadījumu veidotas diskusijas, un citus pārbaužu veidus, iespējams novērtēt profesionālismu (Gill, 2013), vai LR normatīvo aktu izpratnē – ārstniecības personas kompetenci.

Kā rāda iepriekšējie pētījumi, (Dambe, 2013[a,b], Dambe, Atstāja, 2014) tieši teorētiskās zināšanu pārbaudes NMPD ārstniecības personām rada vislielāko rezistenci pret zināšanu pārbaudēm, un to rezultātu iekļaušana darba snieguma novērtējumā veido korelāciju pa gadiem ārstniecības personu kvalifikācijas novērtējumā. Tajā pat laikā Džonsons norāda, ka mediķiem ir pamatotas aizdomas par novērtēšanas procedūrām, un kritēriju pieejas izmantošanu, lai novērtētu sarežģītību profesionālu rīcību, joprojām pastāv neskaidrības attiecībā uz standartiem, metodēm un mērķiem atsevišķām novērtēšanas metodēm. Tas

rada cinisku personāla attieksmi pret novērtēšanas procesu kā tādu (Johnson, Wiseman, 2013).

Būtiskākās lietas, ko ASV ārsti iesaka izmantot novērtēšanā ir kolēģu novērtējums, pacientu aptaujas, rīcības vērtējums sarežģītos un kritiskos gadījumos, sadarbības izpausmes kā ieguldījums komandas darbā, pētījumi un mācību aktivitātes, gadījumu analīze, izmantojot slepeno simulēto pacientu un darbinieka pašnovērtējums. Profesionālā attīstība ir process mūža garumā, ir grūti iedomāties jebkuru novērtēšanu kā patiesi apkopojošu, tas ir, ka indivīds ir sasniedzis „profesionālismu". Tā vietā novērtēšana būs kā nepārtraukts process ar pārbaudes punktiem ik pa laikam, lai noteiktu, vai indivīds ir gatavs viņam noteiktajam darbības līmenim. Personāla attīstības speciālistiem novērtēšana jāskata kā daļa no turpinājuma, veltot uzmanību iepriekšējam vērtējumam un sagaidāmajai izaugsmei. Autori uzsver, ka nav vienīgās pieejas efektīvai un jēgpilnai profesionālisma novērtēšanai, tā vietā tiek atļauts lietot dažādas metodes, lai pārbaudītu profesionālisma jomu kā organizācijai liekas būtiski un noderīgi viņu vidē. (Westtwood, Griffin, Hay, 2013).

Autores uzskata, ka neatliekamajā medicīnā pirmsslimnīcas etapā, kā tas ir NMPD, ir salīdzinoši sarežģīti nodrošināt visas iepriekšminētās metodes. Darba situācijas norisinās brigādes sastāvā, vadītājam, protams, ir iespējams notiekošo vērot videokamerā, taču darbinieku skaita un vienlaicīgo izsaukumu dēļ, tam ir nepieciešama plānota rīcība, kas negarantē konkrēto manipulāciju izpildes fakta novērošanas iespēju. Izsaukumu specifiku un tajā veicamās darbības nav iespējams iepriekš plānot. Ārste Džila (Gill, 2012) par nozīmīgu darbinieka novērtēšanā uzskata pakalpojuma lietotāja, pacienta vai klienta novērtējumu, uzskatot to par vissvarīgāko aspektu indivīda vai komandas profesionālisma novērtēšanā. Viņa uzsver, ka medicīnā, tas šobrīd ir viens no galvenajiem elementiem novērtēšanā un resertifikācijā. Latvijā pacientu aptaujas tiek veiktas salīdzinoši reti, NMP dienestā kvalitātes sistēmas ietvaros tāda tika veikta 2010.gadā, un deva ieskatu par iedzīvotāju apmierinātību kopumā, nevis konkrētās ārstniecības personas darba kvalitāti. Džila (Gill, 2012) norāda, ka pacientu aptaujas sniedz noderīgu informāciju par pakalpojuma kvalitāti un veselības aprūpes profesionāļu īpašībām un spējām. Pētot mazāk taustāmās jomas kā komunikācija, empātija, lēmumu pieņemšanas prasme, tām var būt jēgpilns ieguldījums profesionālisma novērtēšanā. Iepriekš minētās jomas pacientiem ir vissvarīgākās, taču darba devējam kompetences mērījumus kvalitāti vai atbilstību nozīmēs rīcības atbilstība darbības algoritmiem. Džila (Gill, 2012) norāda, ka tā kā šīs jomas ir svarīgas pacientiem, parasti viņi ļoti labprāt sniedz komentārus, ja tiek nodrošināta anonīma aptauja, un viņi tic, ka negatīva novērtējuma gadījumā tas neietekmēs viņu aprūpi. Taču pacienta viedoklis par sniegto pakalpojuma kvalitāti var atšķirties jautājumā par atbilstību ārstēšanas taktikai, biežāk jautājumi ir par sistēmu un darba organizēšanu, retāk par individuālu ārstniecības personu. Piemēram, kā uzsver Džila (Gill, 2012) mediķim var ielikt negatīvu atzīmi par viņa pieejamību pacientam, taču patiesībā

tas parāda izveidotā pakalpojuma pieejamību, nevis ārsta attieksmi pret pieejamību. Šādos gadījumos tiek ieteikts rezultātus skatīt kontekstā. Džila (Gill, 2012) apskata profesionālisma novērtējumu trīs dimensijās – profesionālisma novērtēšana kā indivīda fenomens, profesionālisma novērtēšana kā starppersonu fenomens un profesionālisma novērtēšana kā institucionāls/sabiedrības fenomens. Džila (Gill, 2012) uzskata, ka dažas profesionālisma komponentes var būt saistītas ar personiskajām īpašībām vai iezīmēm. Kā uzsver pētnieki, profesionālismu var saprast kā ārēju uzvedības izrādīšanu mijiedarbībā ar sarežģītu kognitīvo un attieksmes elementu kopumu savstarpēji un ar vidi. Tomēr uzvedības novērtēšana ir pastarpināta novērtēšana, kas balstās uz pieņēmumu, ka novērotā uzvedība atspoguļo pamatā esošās dimensijas. Pētījumi rāda, ka šis pieņēmums ne vienmēr ir pamatots. Šī iemesla dēļ, tikai uzvedības dokumentēšana, var būt nepietiekama, lai uztvertu kopējo profesionālisma uzbūvi, kas arī iekļauj zināšanas, vērtības, attieksmes un spēju lietot profesionālu uzvedību reālā darba vidē. Hodžs (Hodges et.al.,2011) rekomendē daudzdimensiālu, vairāku paradigmu pieeju profesionālisma novērtēšanai nodrošinot, ka profesionālisma novērtēšana nav vienkārši paplašināti izvērtētas indivīda īpašības, bet vērtējums kā indivīds praktizē, iekļaujot starppersonu, sabiedrības un institucionālo dimensiju novērtēšanu praksē. Būtiski uzvedības novērtēšanā izmantot uzticamas metodes, lai tās var pamatot ar ticamiem secinājumiem (Rogers, 2009, Mankin, 2009).Tāpat būtiska nozīme ir novērtēšanas sarunai vai nekavējošai atgriezeniskajai saitei par vērtējumu. (Adams, Schmidt, et al 1998, Cushing, Abbott, Lothian, 2011, Rogers, 2009, Mankin, 2009).

Ierobežojumi
Limitations

Analizējot 2013.un 2014.gada NMPD ārstniecības personu darba izpildes snieguma rezultātus un kompetences un kvalifikācijas ietekmi uz kopējo snieguma novērtējumu, pamatojoties uz valsts pārvaldē izstrādāto metodiku, nebija iespējams noteikt konkrētas vienas atsevišķas kompetences ietekmi uz kopējo vērtējumu, bet rezultātā analizēts kompetenču kopējais vērtējums pret kopējo rezultātu.

Secinājumi
Conclusions

Pētījuma rezultāti ļauj secināt, ka ārstniecības personāla ikgadējās novērtēšanas metodika un valsts pārvaldē noteiktās novērtējamās kompetences – rūpes par kārtību, precizitāti un kvalitāti, darbs komandā, patstāvība, atsaucība un ētiskums, neļauj vispusīgi novērtēt ārstniecības personas kompetenci un profesionālismu. Pašreizējā personāla novērtēšana nenodrošina tādu jomu atbilstības novērtēšanu kā orientācija uz attīstību, attieksme, empātija, lēmumu

pieņemšana un rīcība kritiskā situācijā, kas ir ārkārtīgi būtiski faktori ārstniecības personas ikdienas darbā. Pilnveidojot uz kompetenču pieeju balstītu darba snieguma novērtēšanu ieteicams izstrādāt metodiskās vadlīnijas indivīda pašvērtējumam, izmantot 360 grādu aptaujas, kolēģu novērtējumu, pacientu atsauksmes, situāciju analīzes, un citas iepriekš apskatītās pētnieku ieteiktās metodes. Iegūtie novērtējuma ļaus identificētkatra konkrēta indivīda pilnveidojamās prasmes un nepieciešamības gadījumā izveidot individuālu attīstības plānu.Nav vienotas izpratnes par termina *kompetence* lietošanu personāla vadības, profesionālās uzvedības un rīcības, kā arī izglītības izpratnē.

Summary

The purpose of this paper is to clarify whether performance assessment for Ambulance professionals increases the personnel's professional development, and if it provides the possibility to assess personnel's competence and professionalism. The results of State Emergency Medical Service (SEMS) ambulance professionals performance assessment in years 2013 and 2014 are analysed in the research. The results obtained reflect that there is no possibility to assess personnel's competence and professionalism for building personnel development programs in the future. It is clear, that a range of assessment methods should be used in the assessment of professionalism such us: peers, service users, self- assessment and proxy markers, to provide the best multi-dimensional assessment of professional competence and professionalism. To ensure effective programs for personnel development it is necessary to design the system for assessing professionalism on the basis of competence models, professional's self– assessment, and feedback from peers, service users and tutors. As a result, recommendations for enhancing future performance and development will be considered and suggested to a professional.

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STUDĒJOŠO JAUNIEŠU FIZIKĀS VESELĪBAS SAISTĪBA AR DZĪVESVEIDU

The Connection Between Young Students' Physical Health and Their Lifestyle

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Abstract. *The goal of this research is to analyze the status of young students' physical health and its connection with lifestyle. The research participants were 107 Medical College's 1st year students that formed part of the youth category as it is defined in Latvia, i.e., up until the age of 25. Students' physical health was evaluated in accordance with Apanasenko's methods based on investigative anthropometric and functional testing measurements. These measurements included body mass index, vital capacity, strength index, Robinson index and Recovery Heart Rate. Students' lifestyle habits were determined with the help of questionnaire that included question groups regarding the self-evaluation of health status, health problems and illnesses, eating habits, bad habits, rest and physical activities. During the research, lipid parameters in blood were also measured determining the total cholesterol (TC), high-density lipoprotein (HDL) and low-density lipoprotein (LDL).*

Keywords: lifestyle, physical health, students.

Ievads
Introduction

Veselība ir kā viena no pamatvērtībām cilvēka dzīves kvalitātes, viņa ģimenes un sabiedrības labklājības pamats. Pasaules veselības organizācijas skatījumā veselība ir ne tikai stāvoklis bez slimības vai fiziskiem trūkumiem, bet arī fiziska, garīga un sociāla labklājība. Pasaules veselības organizācijas informācija liecina, ka cilvēku veselību ekonomiski attīstītās valstis nosaka veselīgs dzīvesveids (50%), apkārtējā vide (20%) iedzimtība (20%) un veselības aprūpe (10%) (Matisāne & Romanovska, 2013). Būtiskākais veselību noteicošais faktors ir dzīvesveids. Tas ir faktors ko, cilvēks pats var izmainīt savā dzīves laikā. Veselīgam dzīvesveidam ir nozīmīga loma veselības saglabāšanā un uzlabošanā. Veselīgu dzīvesveidu nosaka veselīgs uzturs un ēšanas paradumi, sabalansēts dienas plānojums, fiziskās aktivitātes, labvēlīgas savstarpējās attiecības, izvairīšanās no veselībai kaitīgu, aizliegtu un izpriecu vielu lietošanas. Attīstītajās valstīs pieaug saslimšanu gadījumu skaits ar neinfekciozām saslimšanām, kuras galvenokārt ir saistītas katra indivīda

dzīvesveidu. Ir paredzams, ka 2020. gadā no tām nomirs septiņi cilvēki no 10 mirušajiem (Boutayeb, 2006).

No neinfekciozām slimībām līderu pozīcijā ir kardiovaskulārās slimības. 2010. gadā Latvijā 758,5 gadījumos uz 100000 iedzīvotāju sirds asinsvadu saslimšanas bija nāves iemesls, bet 2013. gadā – jau 812,8 gadījumi (Latvijas veselības aprūpes statistikas gadagrāmata, 2013). Indivīda dzīvesveids vislielākā mērā nosaka kardiovaskulāro slimību risku. Pēc INERHEART pētījuma 90% kardiovaskulāro saslimšanu notikumu nosaka deviņi riska faktori: hiperholesterinēmija, smēķēšana, hipertensija, cukura diabēts, nepareizs uzturs, mazkustīgums, viscerālā aptaukošanās, pārlieku liels alkohola patēriņš, stress (Mintāle, 2014).

Latvijā pasliktinās jauniešu veselības rādītāji, ko ietekmē neveselīgie uztura paradumi fizisko aktivitāšu trūkums, pieaugošā smēķēšana un narkotisko vielu izplatība jauniešu. Veselības stāvokli lielā mērā nosaka ģimenes sociāli ekonomiskais stāvoklis, kas ietver indivīda vai ģimenes ekonomiskā un sociālā stāvokļa izvērtējumu, balstoties uz izglītību, ienākumiem un nodarbošanos.

Sociālekonomiskā stāvokļa ietekmi uz iedzīvotāju veselību var aprakstīt, balstoties uz diviem mehānismiem. Pirmais mehānisms nosaka, ka pārtikušas sabiedrības ietvaros veselības stāvokli nosaka finansiālie resursi, kas nepieciešami, lai indivīds sev nodrošinātu labai veselībai nepieciešamos dzīves apstākļus. Augsts sociālekonomiskais stāvoklis nodrošina iedzīvotājus ar zināšanām par riskiem veselībai un veidiem kā šos riskus novērst. Piemēram, augsts sociālekonomiskais stāvoklis mazina riskus veselības stāvoklim un samazina mirstību, nodrošinot iespēju dzīvot labākos rajonos, labāk aprīkotā mājoklī, strādāt drošākā darba vidē, kas sniedz dažādas priekšrocības, kā piemēram iespēju apmeklēt trenažieru zāles un citas fizisko aktivitāšu programmas, kā arī nodrošina pieeju dažādiem veselības aprūpes un medicīniskiem pakalpojumiem Otrs mehānisms nosaka, ka zems sociālekonomiskais stāvoklis var ietekmēt neveselīga dzīvesveida izvēli. Šo cilvēku veselības problēmas lielākoties ir saistītas nevis ar nespēju atļauties veselības aprūpes pakalpojumus, bet ar veselībai kaitīgu patēriņa preču iegādi (Pampel & Rogers, 2004).

Korelācija starp sociālekonomisko stāvokli un veselīga dzīvesveida paradumiem ir aprakstīta daudzos pētījumos. Pētījumos noskaidrots, ka cilvēki ar zemu sociālekonomisko stāvokli savu veselību biežāk vērtē kā zemu. Šīs personas biežāk norādīja uz fizisko kaišu esamību, nekā personas ar augstu sociālekonomisko stāvokli. Zema sociālekonomiskā stāvokļa pārstāvji biežāk izvēlas neveselīgu ēdienu, smēķēšanu un retāk nodarbojas ar fiziskām aktivitātēm (Risch & Popoy, 2005).

Pētījuma mērķis ir izpētīt medicīnas koledžā studējošo jauniešu fizisko veselības stāvokli, tā saistību ar dzīvesveidu. Pētījumā iegūtā informācija ir nepieciešama, lai iegūtu precīzāku priekšstatu par nepieciešamajiem veselības veicināšanas pasākumiem koledžā un izglītības satura izmaiņām studiju

programmās. Sabiedrības, tai skaitā jauno speciālistu informētības uzlabošana, personisko iemaņu attīstības veicināšana un dzīves veida un uzvedības maiņas veicināšana ir nozīmīgi pasākumi hronisku slimību, tai skaitā sirds asinsvadu slimību profilaksei. Tas ir uzsvērts Sabiedrības veselības pamatnostādnēs 2014.–2020. gadam (2014).

Laba veselība un veselīgs dzīvesveids topošajiem medicīnas un aprūpes speciālistiem samazinās risku saslimt ar nopietnām hroniskām saslimšanām, kā arī būs uzskatāms paraugs saviem pacientiem izglītošanas pasākumos, aprūpes un ārstēšanas procesā. Sabiedrībā kaitīgo ieradumu mazināšanā liela loma ir tieši ārstniecības personām.

Metodes
Methods

Studentu fiziskā veselība tika noteikta, lietojot G. Apanasenko izstrādāto metodi (Клочко, 2012). Tā ir ekspresmetode, kura balstās uz organisma fiziskās attīstības un izturības novērtēšanu, kuru lieto, lai novērtētu lielas cilvēku grupas (Kapysheva, Makashev & Bakhtiyarova, 2013). Ar šīs metodes palīdzību var novērtēt ne tikai veselības līmeni, bet tā arī dod iespēju sastādīt individuālu programmu veselības uzlabošanai. Metode dod fiziskās veselības novērtējuma piecus līmeņus: zems, zem vidējā, vidējs, virs vidējā, augsts. Apanasenko metodē tiek novērtēti pieci salīdzinoši vienkārši indikatori, kuri ranžēti, katram rangam piešķirot noteiktu ballu skaitu. Četri indikatori tiek iegūti miera stāvoklī, bet piektais pēc fiziskas slodzes. Indikatori sievietēm un vīriešiem tiek rēķināti pēc atšķirīgiem algoritmiem. Summējot iegūtās balles, tiek iegūts veselības novērtējums.

Pirmais veselības indikators ir ķermeņa masas indeksa (ĶMI) novērtējums (ĶMIN). ĶMI tiek aprēķināts ķermeņa masu kilogramos dalot ar auguma (metros) kvadrātu. Sievietēm pēc Apanasenko ir šāds ĶMIN algoritms: ĶMIN = 0 balles (vidējs), ja ĶMI ir robežās no 18,7 līdz 23,8; ĶMIN = -1balle, ja ĶMI ir robežās no 17,0 līdz 18,6 (zem vidējā) vai robežās no 23,9 līz 26,0 (virs vidējā); ĶMIN = -2, ja ĶMI mazāks par 17 (zems) vai lielāks par 26,0 (augsts). Vīriešiem ir šāds ĶMIN aprēķina algoritms: ĶMIN = 0, ja ĶMI ir robežās no 20,1 līdz 25; ĶMIN = -1, ja ĶMI ir robežās no 19,0 līdz 20,0 vai robežās no 25,1 līdz 28,0; ĶMIN = -2, ja ĶMI mazāks par 18,9 vai lielāks par 28,0. Šāds vērtējums norāda, ka nav veselīgs ne tikai augsts ĶMI, bet arī zems. Īpaši tas ir nozīmīgi jaunietēm, kuras cenšas savu svaru pazemināt ar dažādām diētām, lai līdzinātos modelēm.

Pasaules veselības organizācija (World Health Organisation, 2000) piedāvā citu ĶMI novērtējuma algoritmu, kuru plaši pielieto arī Latvijā (Rubana, 2010). Šajā algoritmā sieviešu un vīriešu vērtējums neatšķiras: nepietiekama ķermeņa masa, ja ĶMI ir mazāks par 18,5; normāla ķermeņa masa ja ĶMI ir no 18,5 līdz 24,9; lieka ķermeņa masa, ja ĶMI ir no 25 līdz 29,9;I pakāpes aptaukošanās, ja

ĶMIno 30 līdz 34,9; II pakāpes aptaukošanās, ja ĶMI ir no 35 līdz 39,9 un III pakāpes aptaukošanās, ja ĶMI ir virs 40.

Otrais veselības indikators ir dzīvības indekss (DzI). Tas raksturo elpošanas sistēmas funkcionālās spējas nodrošināt organismu ar skābekli. To aprēķina vitālo plaušu tilpumu mililitros dalot ar ķermeņa masu kilogramos. Vitālais plaušu tilpums tika noteikts lietojot spirogrāfu Minispir ar rezultātu datoranalīzi. Sievietēm ir šāds DzI novērtējuma aprēķina algoritms: -1 (zems), ja mazāks par 41; 0, ja ir robežāsno 41 līdz 50; 1 (vidējs), ja ir robežās no 51 līdz 55; 2 (virs vidējā), ja ir robežās no 56 līdz 60, 3, ja ir virs 60. Vīriešiem ir šāds DzI novērtējuma aprēķina algoritms: -1, ja mazāks par 61, 0, ja ir robežās no 61 līdz 65; 1, ja robežās no 66 līdz 70; 2, ja robežās no 71 līdz 80; 3, ja ir virs 80. Dzīvības indeks var tikt izvērtēts arī pēc citiem kritērijiem: vīriešiem DzI norma ir 65–70 ml/kg, sievietēm – 55– 60 ml/kg, sportistiem DzI pārsniedz šos lielumus (Jauja & Žilinska, 2003).

Dzīvības indeksu var palielināt vai nu samazinot ķermeņa masu, kam tā ir palielināta, vai arī palielinot plaušu vitālo tilpumu. Vitālo plaušu tilpumu var palielināt atmetot smēķēšanu un veicot fiziskos vingrinājumus ar elpošanas aizturi, peldot.

Trešais veselības indikators ir spēka indekss (SI), ko nosaka ar plaukstas dinamometru vadošajai rokai. Plaukstas dinamometrija tiek plaši izmantota veselības stāvokļa noteikšanā (Bohannon, 2008), jo pastāv korelācija starp sirds muskuļa spēku un plaukstas muskuļu spēku. SI aprēķina ar dinamometru noteikto plaukstas spēku kilogramos dalot ar masu kilogramos un izsakot procentos. Sievietēm ir šāds SI novērtējuma aprēķina algoritms: -1 (zems), ja mazāks par 41; 0 (zem vidējā), ja robežāsno 41 līdz 50; 1 (vidējs), ja ir robežās no 51 līdz 55; 2 (virs vidējā), ja robežās no 56 līdz 60; 3 (augsts), ja ir virs 60. Vīriešiem ir šāds SI novērtējuma aprēķina algoritms: -1, ja mazāks par 61; 0 (zem vidējā), ja ir robežās no 61 līdz 65, 1 (vidējs), ja ir robežās no 66 līdz 70; 2 (virs vidējā), ja ir robežās no 71 līdz 80; 3, ja ir virs 80. Tomēr literatūrā atrodami arī citi mazāk stingri vērtējumi – vidējs sievietēm ir 45–50, bet vīriešiem 60–70 (Jauja & Žilinska, 2003).

Ceturtais veselības indikators ir Robinsona indekss (RI), kurš norāda uz miokarda funkciju. Tas ir integrālais sirds asinsvadu sistēmas stāvokļa un organisma trenētības rādītājs. To aprēķina miera sirdsdarbības biežumu minūtē reizinot ar sistolisko spiedienu un dalot ar 100. Jo zemāks Robinsona indekss, jo augstāks fiziskās veselības līmenis. Trenētiem cilvēkiem var būt fizioloģiskā bradikardija, pie kuras sirdsdarbības biežums ir mazāks par 55 reizēm minūtē, līdz ar to Robinsona indekss ir zems. Sievietēm un vīriešiem ir šāds RI novērtējuma aprēķina algoritms: -2 (zems), ja lielāks vai vienāds ar 111; -1 (zem vidējā), ja ir robežāsno 110 līdz 95; 0 (vidējs), ja ir robežās no 94 līdz 85; 3 (virs vidējā), ja ir robežās no 84 līdz 70, 5, ja ir zem 70. Kopējā fiziskās veselības vērtējumā Robinsona indeksam ir salīdzinoši liela nozīme.

Piektais veselības indikators ir sirdsdarbības biežuma atjaunošanās laiks (SBAL). Šis indikators raksturo kardio resperitorās sistēmas darba spējas, organisma trenētību, kas ietekmē kopējo izturību un aerobo kapacitāti. Šim rādītājam ir vislielākā nozīme veselības līmeņa izvērtēšanā. SBAL var mainīties no -2 līdz 7. Šo rādītāju var uzlabot fiziskiem vingrinājumiem un treniņiem. Mērījuma laikā students 30 s laikā izdara 20 pietupienus, vienlaicīgi izstiepjot rokas uz priekšu. Pēc tam tiek kontrolēts pulss un fiksēts laiks sekundēs, kad pulsa biežums atgriežas sākuma stāvoklī. SBAL novērtējuma aprēķina algoritms vīriešiem un sievietēm ir šāds: -2 (zems), ja laiks ir virs 180 s; 1 (zem vidējā), ja laiks no 179 līdz 120 s; 3 (vidējs), ja laiks no 119 līdz 90 s; 5 (virs vidējā), ja laiks no 89 līdz 60 s; 7 (augsts), ja laiks mazāks par 60 s. Šī Apanasenko izvēlētā indikatora noteikšanā izmantots Martinē testa dati.

Apanasenko fiziskās veselības novērtējums pēc ballu kopskaita sievietēm un vīriešiem ir šāds: zems – trīs balles vai mazāk, zem vidējā – četras līdz sešas balles, vidējs – septiņas līdz vienpadsmit, virs vidējā – divpadsmit līdz piecpadsmit, augsts –sešpadsmit līdz astoņpadsmit balles.

Studentu dzīvesveida paradumi tika noteikti ar autoru izstrādātās anketas palīdzību, kurā bija jautājumu grupas par veselības pašvērtējumu, veselības problēmām un slimībām, ēšanas paradumiem, kaitīgiem ieradumiem, atpūtu, miegu un fiziskām aktivitātēm. Studentu fiziskās aktivitātes tika novērtētas ar Starptautisko fizisko aktivitāšu aptaujas (International Physical Activity Questionnaire) īso formu (Craig, 2003), kuru autori tulkoja un pārbaudīja nelielā pilotpētījumā. Tulkojums nenozīmīgi atšķiras no A.Kaupuža un V.Lāriņa adaptētā varianta (Kaupužs & Lāriņš, 2009). Aptaujā tika vaicāts cik dienas nedēļā un cik minūtes dienā studenti veic ar smagu fizisku piepūli saistītas augstas intensitātes aktivitātes, vidējas intensitātes aktivitātes, staigā un sēž. No aptaujas var iegūt fiziskās aktivitātes novērtējumu punktos un novērtējumu trīs līmeņos.

Pētījuma gaitā tika mērīti arī lipīdu parametri. Ar SD LipidoCare analizatoru tika noteikts kopējais holesterīns (KH), augsta blīvuma lipoproteīdi (ABL), zema blīvuma lipoproteīdi (ZBL).

Pētījuma dati tika iegūti 2014. gada rudenī, tajā piedalījās 107 LU Latvijas Universitātes P. Stradiņa medicīnas koledžas pirmā kursa studenti, kuri iekļāvās Latvijā definētā jauniešu kategorijā vecumā līdz 25 gadiem (Jaunatnes likums, 2008).

Rezultāti
Results

Lielākai daļai studentu (89 %) veselības vērtējums ir zems un zem vidējā. 71 % studentu bija zems fiziskās veselības novērtējums, bet 18 % studentu bija veselības novērtējums zem vidējā. Tikai 12 % jauniešu veselības novērtējums bija vidējs. Novērtējums virs vidējā un augsts nebija nevienam studentam (skat.

1. tab.). Vidējais veselības novērtējums ballēs bija 1,5 no diapazona no -8 līdz 10. Apanasenko algoritma vērtējuma diapazons ir no -8 līdz 18. Tātad rezultātu sadalījums pētījumā ietverto studentu vidū ir stipri novirzījies uz negatīvo pusi, kas norāda uz izteiktām iespējamām fiziskās veselības problēmām atsevišķu indivīdu vidū.

1. tabula. Pētījumā noteiktie studentu fiziskās veselības līmeņi
Table 1. Students' Physical Health Levels Determined in the Study

Indekss	Studentu skaits procentos fiziskās veselības novērtējuma līmeņos				
	Zems	Zem vidējā	Vidējs	Virs vidējā	Augsts
Ķermeņa masas indeksa novērtējums	13%	29%	58%	N	N
Dzīvības indeksa novērtējums	3%	3%	12%	12%	70%
Spēka indeksa novērtējums	95%	5%	0	0	0
Robinsona indeksa novērtējums	25%	22%	18%	27%	7%
Sirdsdarbības biežuma atjaunošanās laika novērtējums	46%	1%	28%	23%	1%
Kopējais vērtējums pēc Apanasenko	71%	18%	12%	0%	0%

N – netiek noteikts

Grupā ar zemu veselības stāvokli iegūto ballu skaits studentiem svārstījās no 3 līdz mīnus 8. Šajā grupā visvairāk bija studentuar vērtējumu 3 un 2 (22% no visiem jauniešiem). Vērtējums zem nulle bija 24 % no visiem studentiem. Tātad gandrīz ceturtajai daļai studentu ir izteikti zems veselības novērtējums, kas būtu vērtējams kā palielināts risks hroniskām neinfekciozām saslimšanām nākotnē.

Grupā ar veselības stāvokli zem vidējā (4–6 balles) studentusadalījums pēc ballēm bija vienmērīgs, bet vidējas veselības grupā (7–11) visvairāk bija studentu ar 8 ballēm. Vērtējums virs vidējā un vidējs nebija nevienam studentam. Ja salīdzina ar Ukrainā 2011. gadā veiktu pētījumu, kurā arī tika izmantota Apanasenko algoritms, var saskatīt līdzīgus rezultātus. Tajā pētījumā piedalījās medicīnas studenti vecumā no 17 līdz 23 gadiem. Iegūtie rezultāti liecināja, ka lielākai daļai studentu (76 %) veselības novērtējums bija zems un zem vidējā, tomēr bija arī studenti ar vidēju vērtējumu (9%) un virs vidējā (14%) (Михалюк, Малахова & Левченко, 2012).

Var saskatīt likumsakarības starp studentu pašvērtējumspar pašreizējo veselības stāvokli un veselības stāvokļa novērtējumu pēc Apanasenko. 33 % studentu savu veselību vērtē kā labu, kas aptuveni atbilst veselības novērtējuma grupām „vidējs" un „zem vidējā". Studentiem, kuri savu veselību vērtēja kā labu, vidējās balles bija 2,6, bet pārējiem tās bija 0,73 (starpība ir statiski nozīmīga, p=0,02).

Vērtējot studentu fiziskās aktivitātes pēc Starptautiskās fizisko aktivitāšu aptaujas, tika konstatēts, ka fiziski augsti aktīvi ir 59% studenti, minimāli aktīvi – 34% un neaktīvi tikai 7%. Aplūkojot kopēji iegūtos punktus, sakarība ar studentu fiziskās veselības kopējo vērtējumu netika atrasta. Tomēr tika atrasta pozitīva un statistiski nozīmīga korelācija Robinsona indeksam, kurš ietilpst kopējā vērtēšanas sistēmā, ar augtas intensitātes aktivitātēm. Tas norāda, ka šajā vecuma posmā, vidējas un zemas intensitātes fiziskās aktivitātes praktiski neiespaido veselības stāvokli, to veicina tikai augstas intensitātes aktivitātes. Kopumā daudzi studenti atzīmē, ka nodarbojas ar sporta aktivitātēm. 66% apgalvo, ka sporto ārpus mājas, bet 61% – veic sportiskas aktivitātes mājās. Sportisko aktivitāšu veikšana mājās neuzrāda saistību ar studenta veselības stāvokli. Toties statistiski nozīmīga atšķirība (p=0,02) veselības stāvokļa vērtējumā pēc Apanasenko ir studentiem, kuri nodarbojas vai nenodarbojas ar sporta aktivitātēm ārpus mājas. Tas norāda uz sporta aktivitāšu nozīmīgumu veselības stāvokļa uzlabošanā un nostiprināšanā. Aplūkojot ārpusmājas sporta aktivitāšu saistību ar materiālo stāvokli, var konstatēt, ka studenti ar materiālo stāvokli zem vidējā ievērojami retāk iesaistās šajās aktivitātēs – tikai 45%.

Aplūkojot dažādu pārtikas produktu lietošanas biežuma saistību ar veselības stāvokli, var redzēt nedaudzas sakarības. Nav saistības ar augļu un dārzeņu lietošanas biežumu, nav saistības ar gaļas un tās izstrādājumu lietošanu. Tomēr var redzēt, ka studenti ar zemu veselības stāvokli daudz retāk lieto piena produktus (gan vājpiena, gan pilnpiena, biezpienu, sieru, krējumu un sviestu), retāk lieto arī saldumus. Studenti, kuriem ir palielināta ķermeņa masa, seko savam uzturam. Pētījums parāda, ka kopumā studenti pārzina veselīga uztura principus. Salīdzinot ar pārējiem, viņi mazāk lieto sviestu un cukuru, retākas ir uzkodas starp ēdienreizēm (atšķirības statistiski nozīmīgas pie p=0,05). Kopumā nevar teikt, ka šo studentu uzturs būtu neveselīgs, bet domājams, ka atšķirības ir ēdienu daudzumā. Arī mazāks uzkodu skaits starp ēdienreizēm var palielināt apetīti.

Cilvēka veselības stāvokļa novērtēšanā ir svarīgi ņemt vērā arī lipīdu parametrus. Holesterīna metabolisma traucējumi rada dislipīdemiju, kas izpaužas kā kopējā holesterīna (KH), zemā blīvuma lipoproteīdu (ZBL) un triglicerīdu līmeņa paaugstināšanās asinīs, bet augstā blīvuma lipoproteīdu holesterīna (ABL) līmeņa pazemināšanās. Vēlamais KH līmenis asinīs ir līdz 5,2 mmol/l, bet ZBL – 3,4 mmol/l, pārsniedzot to, attīstās ateroskleroze, bet koronārās sirds slimības risks palielinās 2,2 – 2,5 reizes. Turpretim, pazeminot ZBL par 1%, koronārās sirds slimības risks arī samazinās par 1% (Third Report, 2002).

Pētījumā tika konstatēts, ka KH paaugstināts ir 6% studentu un ZBL ir paaugstināts 5% studentu. Visi šie studenti atradās zemas un zem vidējās veselības grupās pēc Apanasenko dalījuma. Pētījumā tika novērota korelācija starp veselības vērtējuma ballēm (pēc Apanasenko) un ABL līmeni. Zems veselības līmenis saistīts ar zemāku ABL līmeni un otrādi. To svarīgākie

mehānismi var būt saistīti ar: (1) ABL paaugstinājuma veidošanu, ka kompensācija no paaugstināta zemā blīvuma holesterīna, (2) augstu ABL līmeni, bet to struktūra nav pilnvērtīga, (3) nepareizu dzīvesveidu, kas ietver arī veselīgo uzturu, jo dzīvesveida izmaiņas būtiski pazemina saslimstību ar sirds asinsvadu slimībām un mirstību no tām, (4) pārāk daudz piesātināto taukskābes saturošo produktu lietošanu, jo šie produkti ir lētāki un sātīgāki, tādēļ studenti tos biežāk izmanto.

Secinājumi
Conclusions

Tika konstatēts, ka tikai 12% studentu ir vidējs veselības līmenis, kurš noteikts pēc Apanasenko metodes, lielā mērā tas sakrita ar studentu veselības pašvērtējumu. Zemais veselības vērtējums lielā mērā saistīts ar sirds asinsvadu sistēmas funkcionālo stāvokli, trenētības trūkumu. To varētu skaidrot ar nepietiekamām augstas intensitātes fizikām aktivitātēm, ar aktivitātēm kuras tiek veiktas ārpus mājas. Šo aktivitāšu trūkumu daļēji var skaidrot gan ar treniņzāļu augstām izmaksām, gan ar sportošanas iespēju trūkumu koledžā. Vairākos gadījumos zemo veselības stāvokli ietekmē arī paaugstināta ķermeņa masa, kuru studenti apzinās. Kopumā studentu uzturs vērtējams kā veselīgs, viņi pārzina veselīga uztura principus. Studenti ar paaugstinātu ķermeņa masu ierobežo treknu un saldu ēdienu lietošanu.

Studentu veselības stāvokļa uzlabošanai būtu ieteicami šādi pasākumi: (1) nodrošināt studentus koledžā ar sportošanas iespējām, (2) studiju kursos vairāk informēt ne tikai par veselīgu uzturu, tā sastāvu, bet arī par produktu nepieciešamo daudzumu atbilstoši fiziskām aktivitātēm.

Summary

It was concluded that students' physical health status is relatively poor (only 12% students have moderate health status according by Apanasenko's method), mostly regarding the functional state of the cardiovascular system. The connection between health status and lifestyle was also found, namely, the lack of high-intensity physical activities, as well as the scarcity of information regarding the needed amount of nutrition. In many cases, poor health status is also affected by increased body mass, which students are aware of. Overall, these students' nutrition can be viewed as healthy, and they are familiar with the principles of healthy eating. However, it is believed that they consume inappropriately large portions which are inadequate to their physical activities.

To improve students health situation would be recommended for the following measures: (1) provide students with sports opportunities in college, (2) in study courses more aware not only of a healthy diet, the composition of the food but also for the required amount of product according to physical activities.

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YOUNG PEOPLE OF THE IMPORTANCE OF HEALTHY EATING AND INFORMING

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Abstract. *Lately, the variety of health -related research conducted in Estonia and elsewhere in the world, has been increased. The proportion of studies about right nutrition has increased especially, which shows that people are more aware and considered about the important link between diet and health.*
The aim of the research was to find out how young people evaluate their eating habits, what is their expertise in this field and what are the wishes and suggestions from them in relation to the nutrition information. In quantitative research for data collections were used surveys. The sample consisted of 131 young peole, aged 7-26 years.
Young people eat mostly unhealthy. This is primarily due to bad habits, which is related to the fast-paced lifestyle. It can be said that the youth nutrition knowledge is good, but implementation in practice is poor.

Keywords: *added ingredient, eating habits, nutrient, nutritional needs, youth.*

Introduction

In a short period of time young people have changed a way of eating in a large scale. Today they use mostly industrially produced foods and fast foods, which are often associated with negative aspects. Meals for many young people contain „fast sugars" with saturated fats, low protein and vitamins and excess of salt. There is parallely growing number of young people with health problems and overweight.

Tackling major risk behaviours (unhealthy diet, sedentary lifestyle) can help prevent many chronic diseases, which affect people over a long periods and generally have a slow progress. Some of them (diabetes) represent leading causes of mortality. But to be effective, such efforts need to be based on targeted health promotion, prevention and early detection (Public health, 2014).

Most people are ordinary citizens of the society, without the specific training of nutrition. Diet-related problems began to receive the attention of society from the 1950s. People ate mostly natural and near-natural state of foods in the past. Now, almost ¾ of our daily food on our dining room table is processed (Marks et al., 2005, Worobey et al., 2006). In The White Paper, „Europion Strategy of Nutrition, Overweight and Obesity related health issues „ for the European Parliament adopted a resolution (2008) of all the governments and parliaments of the world health organization states have mentioned that the diet-related diseases are taking the epidemic forms and belonging in to the

reasons of major source of morbidity and mortality in Europe. There is the poor diet the major risk factor and the reason of death. Therefore a healthy diet should conform the individual's specific needs, based on the following criteria: nutritional, toxicological characteristics, digestibility of the food, the ecology of production.

Young people, 7-26 age, are forming 22.1% from the population of Estonia at the beginning of year 2014. Young people aged 15-24 considered their health status as „good" in the year 2013. Thus, over the last decade, youth health ratings are improved (Batujeva, 2014).

Balanced diet is one of the mainstays of health, which is particularly important for the growing young organism. People are able to consume almost anything in modern society, so their consumption and consumer behavior study right now become very important. Dietary habits acquired in young age and follow during all life. There are influence from following factors: family, adults, culture, traditions. It is necessary to examine the eating habits of young consumers. We wish to emphasize young people's health and their rising awareness in terms of healthy nutrition.

It is important to have a healthy and balanced diet for young, active people. This means that the food has to be as diverse in culinary processing and fresh, also contain a sufficient amount of balance of the basic nutrients (Panchenko, 2005). Healthier foods are the ones you should eat every day, because they include substances for the growth of young organism, development and increase the resistance of the bodies vital. Less healthy foods are the ones you should eat less. These are especially processed foods, which contain the greater number of fat, sugar, salt, and various additives (Teesalu, 2006). A varied diet and high nutrient density is a prerequisite for obtaining of sufficient amount of minerals and vitamins from food (Deikina & Jõeleht, 2009). Young daily energy consumption is relatively easily accommodated. It is more difficult to ensure proper nutritional balance of the food. Scientific and technological progress nowadays have added the definition „The theory of optimal or adequate diet". This theory takes into account the changes that are taking place under the influence of food in the digestive system. The key here is the difference in the absorption of fission products also competition between them and forming products in digestive system, which are unnecessary and harmful to the body, the effects of the compounds. It should also be taken into consideration when making choices of food and drink also that the intermediates formed during digestion may either stimulate or inhibit the activity of the brain. All these issues must be considered on individual basics, to take into account the characteristics of the organism and gastrointestinal reactions (Simson & Oja, 2010). Nutrition has a very different individual needs and changing lives. Organism´s accessories like the amount of nutrients depends primarily on age, sex, physical and mental work proportions, also on the body's physiological state (Pappel & Kuiv, 2001; Teesalu, 2006).

From research of school pupils have conducted by Institute of Health Development of Estonia on 2006, appears that many teenage girls are trying to avoid eating. 42% of 15-year-old girls had changed their eating habits during the last year to control their body weight. The majority of them had taken for diet. Study reveal that only half of the 15-year-old girls eat breakfast and hot lunch every day. Have mentioned fact that the majority of young people feel that eating in a public place is unpleasant, as well as eating in front of other coevals (Aasvee et al., 2009; Nilsson, 2011). Pomerantz et al. (2013) mention that there has developed a problem in the weight-lowering agents and tablets, which are available online, and uncontrolled use of these is as same dangerous as using drugs.

Research of Nutrition Habits And Satisfaction With School Food of School Pupils have conducted by Institute of Health Development of Estonia in 2012 mention that the most common foods in the morning at homes are mostly sandwiches, coffee / tea / juice, muesli / breakfast cereals, porridge and cheese curd for pupils. Foods, made from eggs eat rarely in the morning. Almost half of the pupils are eating vegetables salads and fresh fruit a few times a week, but not every day. Young people admit that the main reason to buy several snack from the school buffet (in all age) is that the stomach goes empty before the lunch break (Hillep et al., 2012). If people eat more sweets, then there you are slower and more passive with less control over ourselves (Simson& Oja, 2010). Young women may have noticed a conscious diet (for example, ate more fruit). While people were quite aware of the fat content of food or alcohol as harmful, they usually were not willing to change their eating habits so easily. Food choice was decisive, however, the cost of food and smell. Young men cholesterol was quite high. Vitamins and minerals consumption were the main deficiencies of vitamins D, B2, iron, and calcium intake (Pomerleau et al., 2000).

Valery`s et al. (2012) study among young people in Australia, explained the strong connection between nutrition (diet), physical activity and obesity. Young people with overweight were less physically active. One third (1/3) of the subjects consumed at least twice a week fast food and deep fried food. Half of respondents ate fruit at least once a day and more than three-quarters (3/4) of the subjects vegetables.

Kornides et al. (2014) explained that cooking at home was positively associated with regular shared family meals, but the convenience and fast food consumption were negatively associated. In families, where at least one parent worked with part-time or was at home, were significantly more regular shared family meals than in families where both parents worked full-time. Also given attention to the importance of cooking skills and obstacles.

World nutritionists are in the opinion that the increase of food intolerance is caused by the fact that there are added the growing number of new food products into the human diet, the body has not enough time to get used with them. The immune system is „programmed" to respond to everything what is

foreign for the body (Simson & Oja, 2010; Teesalu, 2006). And increasing share of corporate advertising campaigns targeted for younger customers. If the taste experience comes from an early age and from McDonald's and Hesburger, stay young people happy on the wide way of sweet, salty and greasy meals. Many young people will replace the fat diet with less fat content, products, advertising „light" products, so as to reduce feelings of guilt, which is caused by the eaten burgers and drunken lemonades. Fat is important taste carrier and it`s replacement with protein or carbon hydrates will inevitably affect the taste. So should support the taste with new additives, but if the fat also will disappear beneficial vitamins (Nilsson, 2011).

An and Sturm (2012) did not find examining over 13 thousand Californian young people connections between diet providing environments existence (supermarkets, fast food places, shops nearby school or home) or consumption of food offered from there. It is noted that the major fast-food places, supermarkets etc. should encourage the consumption of a healthy diet, not induce overexploitation.

The European Union launched the reform of the fruit and vegetable sector in September 2007. The main purpose of that was to increase fruit and vegetable consumption. In approving the reform, was reported „in view of the fact that obesity among school children has increased significantly, as soon as possible to submit the proposal for a school fruit program on the basis of its inherent benefits, practicability and administrative costs related to impact assessment" (Commission of the European Communities, 2008). Youth Work supports a healthy lifestyle and the health values and attitudes of young people with all it´s activities. It requires workforce competencies and tools who work on the area of young people, consistent development of knowledge based approach to the target groups, training, tools and interventions to in paragraph (Youth Work Development Plan 2014-2020). There is Health Education, in among of other things, youth work`s part and nutrition as part of it. From the position of health education, there is important that the desired behavioral changes become as habit and decision to change would be made by young adopted on the basis of values. There is unhealthy dietone of the types of risk behavior (Streimann et al, 2011).

The main organizations dealing with young people outside of school education in the compulsory education system are youth centers, information and counseling centers, hobby schools, youth organisations and groups. Youth centers are the main promoters of youth work (Youth Work Act, 2010). Youth info aim is to increase the range of options that are available to young people, providing to direct or indirect information from public life and enables young people to make independent choices in organizing their lives (Lange & Rutjes, 2003).

The aim and research questions

The aim of the research was to find out how young people evaluate their eating habits, what is their expertise in that field and what are their wishes and suggestions in relation to the nutrition information. The research questions were: how do young people evaluate their own eating habits? Who or what influences young people's eating habits? What do young people know about nutrition? Do young people have been informed enough about healthy diet? What are the recommendations from young people to youth-workers in order to raise awareness about nutrition among young people?

Results

The sample was selected on the principle purpose of the sample. The sample included young people aged 7-26 years, participated in a total of 131 young people from each age group: there were 4% 7-11 years old young people. The most represented (43%) were 17-21 age old young. The remaining 23% were in age 12-16 years and 30% from 21-26 years old. The study took place in the spring of 2014.

Appeared that behavioural eating habits are as the main factors influencing food choice. 20% of respondents indicated that making food choices based on the food salubrity. We dare to believe, that there is more of a desire to act. The real situation and the desire of young people to eat healthily often do not coincide. This is also confirmed by the fact that the question of how to appreciate their own eating habits, only 5% of young people answered „very good". This, however, may in turn be due to the economic situation, as 16% of the respondents points out that these choices are particularly affected by the economic situation.

Respondents mentioned series of non-healthy foods (donuts, burgers, deep fried food, sweets, potato chips, other snacks) and there were asked to form the basis of their ranking. Most young people were limited by the list deep fried food (38%). Then were more mentioned burgers, potato chips / snacks and donuts. The least restrictive by youth are sweets (37%).

Most of the respondents (86%) are aware of the fact that even if the diet is sufficient, it is possible that there is a deficiency of nutrients. By asking respondents to mention the diseases that are caused by incorrect diet and name a variety of nutrition-related diseases, most mentioned were: obesity, cardio-vascular disorders, anorexia, bulimia, diabetes, allergy, aweak immune system, stress, depression, dental disorders, digestive problems, cancer, increased cholesterol, hyperactivity.

Generalizing the nutrition knowledge of young people, we can make the conclusion that knowledge is good, young people know which foods or what rations should be avoided and what prefer. In fact, young people are consuming foods that does not meet their needs quite often. Each option is worth

considering, because each subsequent selection of new options, which in turn will affect all future choices. The habit has become an easy, but very difficult to change. Therefore, any forwarding, attention management, reporting and thus to contribute to young people's changing habits are necessary for young people. Early recognition, prevention is always better than dealing with the consequences later. The majority of respondents (85%) believe that youth workers can raise the awareness of young people about healthy nutrition. Youthworker as an exemplar for young people came out from several proposals, which draws attention how much responsibility is in youthworker´s work. It also shows how important is to have the wide horizons of youth workers, a large knowledge base, and complement themselves in the field of nutrition.

Most found mention the need to organize in the relevant subjects in schools, training courses, lectures, information sessions, as well as conducting a cooking theme in different keys. Respondents consider that cooking practices contributes to instilling healthy habits, and also to break the myth that healthy food does not taste good.

Appearedthat nutrition topics which have been covered by media and what are dealt in the school system, are known for young people. They are able to justify the myth of"light" products, know even about the intestinal rhythm work and the term „processed food". However, as reflected in the term „cocktail effect" from the latest research and the reasons „why white sugar is bad", has received little coverage in the media, and thus there are limited or lack of knowledge among young people in these issues. For example about white sugar, the white sugar increases the porosity of the intestinal wall and is the nutrient for pathological microflora, which also weakens the immune system, the body's homeostasis and promotes the violation of minerals out from the body (Simson & Oja, 2010). The term „cocktail effect" is a new and young people are not able to find link between foodadditives and reaction effects forthe body. However, the researchers who also examined that topic say that the first studies concerning the „cocktail effect" will start to arrive (Nilsson, 2011).

From our research appeared that young people´s assessment for themselves in general is: young people eat more unhealthy. By asking respondents to characterize the dietary habits with one word, main answeres of young people were; unhealthy, high-speed, unvaried, fast food, insufficient. 57% of respondents rated their eating habits passable or acceptable. Also from the reseach of the Institute ofHealth Development of Estonia 2006 conducted a health survey of school students reveals that only half of the 15-years-old eat daily breakfast and hot lunch (Aasvee et al., 2009; Nilsson, 2011).

Conclusion

The research results obtained can be used in practice. Knowing that young people are interested in nutrition info, we should allow it for them. Human beings are not born with knowing how to make healthy choices in life: to eat a varied, balanced and according to individual needs. This is a skill that is acquired through the life and if are treated seriously and consciously, the more likely it is to live a fulfilling life. It is important to know that, mentioning the relevant data about health field for young people, we preventing health problems caused by unhealthy lifestyles, which in turn provides them fulfilling life.

Youth worker must be competent and able to share the nutritional knowledge to young people or direct them to that main point. By drawing attention to the dietary habits of young people, youth worker should explain the harmful effects of substances on the body, not only limited withstatements that one or the other food is bad for you. Youth worker`s work among young people carried out by the advice and information in the form of prevention, health education, must be with high quality, reasonable and understandable for young, which in turn ensures a high efficiency in the long run.

A person can consume almost everything in modern society,so the consumer and the consumer's behavior has become extremely important. People acquire eating habits in young age and maintain them throughout their life and there are influencing factors like the family, culture, traditions, it is also necessary to examine what are the eating habits of young consumers. Knowing that young people are interested in information of nutrition, should allow it to them.

Human beings are not born with knowledge how to make healthy choices in their life: to eat a varied, balanced and according to individual needs. This is a skill that is acquired through lifetime and if they are treated seriously and consciously, then more probable to live a full life. It is important to know that, reduceing health-relevant information for young people we canprevent the health problems caused by unhealthy lifestyles, which provides them valuable full of life. Today's young people rather eat unhealthily, it is primarily the result of bad eating habits in their opinion, as well as accelerating busy lifestyle. One of the key ofimprovement of the nutritionalsituation of young people is considered reformulation of foods. Till now, there is the most focused the reduction of salt, sugar, trans fats and saturated fatty acids to change the composition of processed foods.

The research results obtained can be used in practice. Youth workers must be competent to share general healthy nutritional knowledge to young people, or direct them to that point. By drawing attention to their dietary habits of young people, also would be able to explain the harmful effects of substances tothe organism and not to confined with the allegations that one or the other food is „bad for you“.

Counselling and information, conducted by youth workers among the youth, asthe form of prevention and health education, must be quality and justified understandably for young, which in turn can ensure the long-term efficiency. The main recommendations for youth workers to raise young people's awareness of nutrition are: perform and use thematically training courses, information days, lectures, games, camps, study tours, workshops, posters, movies, campaigns. Promote healthy eating and the importance of personalized nutrition systematically, to help young people improve their eating habits and if necessary, redesign them.

As food production has become more and more industrial, only well-fed young people can pass their knowledge of food quality and influence, about food preparationfor future generations in later adulthood.

By making simple changes in daily food menu and the food menu refinement of the necessary nutrients, are obtained excellent results by nutritionists to improve the health problems of young people. Therefore, attention should be paid and to contribute to the future ofyoung people, a healthy diet assured of better health.

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ATHLETIC IDENTITY OF STUDENTS ACTIVELY INVOLVED IN SPORTS AND ITS RELATIONSHIP WITH INDUCED STRESS

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Abstract. *The expression of the athletic identity in academic environments may become a stress-reducing and a stress-enhancing factor depending on the conditions of the environment when expressing one's athletic identity (Chen et al., 2010).Methods. 214 students (105 females and 109 males) took part in the research. All of them were first year students of the first level of studies (i.e. BA studies) at Lithuanian Sports University. All the students were actively practicing sports. Their age ranged from 18 to 25 with the age average of 19.24 (0.76). The study made use of questionnaires: Reeder Stress Assessment Scale and Athletic Identity Questionnaire (AIQ).Conclusions. The stress levels experienced by students actively practicing sports and possessing a more prominent athletic identity yet not going for results in sports are lower than those experienced by students with a less prominent athletic identity.*

Keywords: athletic identity, stress, students, sport.

Introduction

Individuals may choose a wide variety of fields for the development of their identity such as family, job, science, arts or sports. Athletic identity is closely related with physical activity, sports or sports activity within which the personal identity is created (Houle et al, 2010). Athletic identity is one of the lifelong developing parts of the self-reflection of the personality which shows to what extent an individual relates him/herself with physical activity or sports activity (Brewer et al., 1993; Anderson, 2007). Athletic identity is also perceived as the unique fulfillment of one's physical *Me* by taking a role in sports and by the establishment of one's identity with sports and a sports community (Banayi et al., 2014).

For an individual, sport is turning into a social environment where s/heis competing with others and going for results in sports in a specific branch of sports in order to fulfill oneself and to gain recognition of the society (Esfahani et al., 2014). It has been observed that strong athletic identity has a prominent impact on the personal life of an individual (Banayi et al., 2014). The strong athletic identity undertaken by an individual facilitates social integration and consequently increases self-confidence (Finch, 2009). Yet, excessively manifested athletic identity of the young people actively going in for sports may bear a negative impact on the psychological and physical health of an individual (Houle et al., 2010).

Young people with a more prominently expressed athletic identity see sport as one of the best ways of self-expression and self-fulfillment (Finch, 2009). Hence a youngster with a prominently expressed athletic identity may be experiencing a crisis of identity; this crisis consequently evolves into the increased induced stress which is also manifested in other social environments. Students representing a team and possessing a prominently expressed athletic identity will be experiencing more stress related not only with the academic activity but also with their sports activity (Chen et al., 2010). Even the successful development of a career in sports inevitably features such additional stressors as failures or losses in sport competitions, lack of time, poor relationship among team members, high demands of the coach, etc. Yet further stress may be inflicted by a combination of professional sports and studies (Chen et al., 2010; Houle et al., 2010).

On the other hand, athletic identity may also decrease the stress experienced by students; students possessing a more prominent athletic identity and fulfilling themselves in a sports activity will not be experiencing stress as long as they have no obligations to a team, and the levels of stress will be reduced since physical activity with no commitment to a team will have the impact of a stress-reducing factor. Hence the expression of the athletic identity in academic environments may become a stress-reducing and a stress-enhancing factor depending on the conditions of the environment when expressing one's athletic identity (Chen et al., 2010). In this context, the issue of the interrelation of the athletic identity and the suffered stress in sportspeople is seen as an area of major academic interest.

The aim of the research is to establish the athletic identity of first year students actively practicing sports and the relationship between the athletic identity and the experienced stress. Consequently, by combining quantitative data and qualitative research-based insights, the present research strives to contribute to the research of the impact of professional sports on full time students.

Research Methodology

The research was conducted during the spring semester of the academic year 2013/2014 in the course of *Personal Identity* classes at Lithuanian Sports University, Kaunas, Lithuania.

214 students (105 females and 109 males) took part in the research. All of them were first year students of the first level of studies (i.e. BA studies) at Lithuanian Sports University. All the students were actively practicing sports. Their age ranged from 18 to 25 with the age average of 19.24 (0.76). The participants of the research represented various study programs of the University. They were divided into two groups of the research sample: Group One consisting of 121 students actively practicing sports (i.e. students practicing

sports at least 2 or 3 times per week) but not seeking to produce officially recognized results including 61 females (50.4%) and 60 males (49.6%) and Group Two represented by 93 students actively practicing sports and going for officially recognized results (1 or 2 practice sessions daily), among whom there were 44 females (47.3%) and 49 males (52.6%).

The participants of the research had to fill in questionnaires during the classes of the *Personal Identity* subject. The participants of the research were fully aware that the questionnaire was anonymous.

Methods of the research. Reeder Stress Assessment Scale (Reeder et al., 1968) commonly used to measure the subjectively perceived stress was employed to quantify psychological stress. The stress levels were assessed by research participants providing evaluations for seven statements defining the way the research subject typically feels. The assessment was quantified in the range from 1 to 4, and the points were added up. The obtained result which may potentially range from 7 to 28 indicates the level of stress as perceived by an individual; here specifically 21 to 28 means 'no stress', 15 to 20 stands for 'nervous strain' (intermediate state) and 7 to 14 signifies a state of stress. The Cronbach alpha of the scale is 0.814.

For the assessment of athletic identity, the Athletic Identity Questionnaire for Youth was employed (*Athletic Identity Questionnaire*; Anderson et al., 2007). The questionnaire consists of 40 statements on the grounds of which the four primary components of the athletic identity are measured:

- sportscompetence (for example, *I believe I would be able to take part in numerous sporting activities if I made sufficient effort and had enough practice*);
- one's looks (for example, *I look sportive, i.e. I look like a person doing exercises*);
- importance of physical activity to the concerned individual (for example, *I prefer being physically active to lying on the bed or watching TV while sitting on a couch*);
- social encouragement (support) to be physically active (for example, *My parents incite me to exercise and/or be physically active*).

The agreement or disagreement with the statements was measured in a scale ranging from 1 to 5 where '1' stood for complete disagreement with the statement, '2' meant partial disagreement with the statement, '3' showed neither agreement nor disagreement with the statement, '4' represented partial agreement with the statement and '5' indicated complete agreement with the statement. The higher values in the scale thus represented a more prominent athletic identity (or a specific component of athletic identity) of students. The Cronbach alpha of the scales ranged from 0.794 to 0.901.

The groups of the participants of the research were drafted on the grounds of the median of the scale of their general athletic identity (less prominently versus more prominently expressed athletic identity levels).

The relationship of the qualitative features were assessed by employing chi square $(\chi)^2$ criterion and t criterion for independent samples. Differences were treated as statistically important if p was discovered to be <0.05. Calculations were performed with *SPSS Statistics 21* Version.

Research results

The research also sought to explore the athletic identity of students and the manifestation of its specific components. On the grounds of the Athletic Identity Model by C. B. Anderson (2004), the athletic identity consists of four essential constituting elements: the evaluation of the physical abilities of oneself (*competence*), the looks (*sportive* versus *non-sportive*), *the importance of physical activeness* and the extent of the social support (*incitement*) to do sports or to be physically active. When taking measurements of the sports competence, looks and the importance of physical activeness, the highest values of all the research subjects were recorded. It was also established in what cases the values of the constituent parts of encouragement were the lowest.

The results of the research showed that the first year university students going for results in sports exhibit statistically significantly more prominent athletic identity in comparison with those students who do not go for officially recognized events in sports (see Table 1). The differences are observed between the groups and also specifically when comparing males and females (t, p<0.01).

Table 1. Manifestation of athletic identity of first year students actively practicing sports

Athletic identity	Not going for results in sports n=121		Going for results in sports n=93		t	p
	Mean	SD	Mean	SD		
Athletic identity	3.63	0.52	4.61	0.42	-4.70	**0.0001**
Components of athletic identity:						
Competence	4.03	0.81	4.78	0.59	-3.38	**0.0001**
Looks	3.79	0.96	4.65	0.74	-4.09	**0.0001**
Importance	3.59	0.87	4.92	0.63	-4.76	**0.0001**
Encouragement *(Parents)*	3.24	1.24	3.74	0.79	-3.02	**0.0001**
Encouragement *(Peers)*	2.91	0.79	3.84	1.14	-3.21	**0.0001**
Encouragement *(Other adults)*	3.11	1.31	4.31	1.07	-4.06	**0.0001**
Encouragement *(General)*	3.07	0.92	4.02	0.68	-3.66	**0.0001**

The more prominently expressed athletic identity is also discovered when specific constituent parts of athletic identity are considered. Students going for results in sports assessed their competences in sports, their sportive looks and the importance of sports and physical activity in their lives much more positively (all of these differences are statistically significant); they claimed they had been experiencing stronger social support from their environment including their parents, friends and other adults in comparison with the support which the

students not going for results in sports claimed to be receiving. This difference is also statistically significant.

Having explored the stress suffered by students it was established that 61 (28.5%) students actively involved in sports activities were not experiencing stress, 88 (41.1%) individuals were feeling nervous strain (i.e. the intermediate state of stress) whereas 65 (30.4%) students were facingthestateofstress (see Table 2). Besides, it was established that the stress experienced by students maintaining intense sporting activity and going for results in sports is statistically significantly more prominent than the stress which the students not going for results in sports were undergoing.

Table 2. Stress experienced by first year students actively involved in sports

Students actively practicing sports	Suffered stress[*]					
	Not experiencing stress		Nervous strain		State of stress	
	n	per cent	n	per cent	n	per cent
Going for results in sports	12	12.9	42	45.2	39	41.9
Not going for results in sports	49	40.5	46	38.0	26	21.5

[*]*Differences between groups:x^2=16.02; df=2; p=__0.0001__*

During the research, it was established that athletic identity is related with the stress experienced by students. Besides, differences between the groups of students going versus not going for results in sports may thus be highlighted (see Table 3).

Table 3. Comparison of the manifestation of the suffered stress in students actively practicing sports: less prominently vs. more prominently expressed athletic identity

Students actively practicing sports	Groups of athletic identity				t	p
	Less prominently expressed		More prominently expressed			
	Mean	SD	Mean	SD		
Going for results in sports, n=93	2.69	0.53	3.12	0.74	5.01	__0.0001__
Not going for results in sports, n=121	2.95	0.81	2.57	0.69	4.97	__0.0001__

The results of the research revealed that the students not going for results in sports who are actively practicing sports and whose athletic identity is expressed less prominently are subjectively experiencing worse levels of stress than the students with a more highlighted athletic identity. Meanwhile, to the contrary, students actively practicing sports and going for results are subjectively strained by higher levels of stress if their athletic identity is manifested more prominently in comparison with the students with a less prominent athletic identity.

Discusion

The present research also corroborates the results obtained by other researchers showing that the manifestation of the personal athletic identity may be twofold. It was observed that physical activeness is related with lower levels of stress (Williams, 2008) and that physically active individuals are more self-confident; their self-esteem is also higher (Shaffer, Wittes, 2006). It is likely that the lower rate of stress experienced by students whose athletic identity is more prominently expressed and who are actively going in for sports without seeking results in sports is determined by their higher levels of physical activity and consequent superior self-confidence (Finch, 2009; Riemel, 2009).

On the other hand, the students with a more prominently expressed athletic identity seeking results in sports and having commitments in the academic environment while doing their studies undergo higher levels of stress than the students whose activity is restricted to the academic performance (Chen et al., 2010; Finch, 2009; Lally, Kerr, 2005). It is likely that those students who have ambitions in sports encounter such stress-inducing factors as the expectations of their environment concerning their achievements both in sports and studies; that is why students with ambitions in both sports and studies suffer from higher levels of pressure induced by their surroundings. These individuals also have more modest time resources since they have to deal with their commitments in the academic community as well as in the sports community. Other stress-inducing factors are related with victories and losses in sports in the context of the highly taxing workloads incurred in the process of studies. Even though the athletic identity and the feeling of being part of a team are of positive influence to the first year students while adapting to the new environment, yet these factors act as an additional stressor in the course of studies. Furthermore, students practicing sports and having high amounts of training practices and competitions tend to skip public events of the student community, they travel a lot, and, upon experiencing injuries, they get detached from public activities and sports. They ultimately start experiencing more stress than students having no prominent athletic identity (Lally, Kerr, 2005).

Athletic identity also has a positive impact on the psychosocial health of an individual (Esfahani et al., 2014; Valente, 2004). According to academic researches, athletic identity has a positive impact on studying sportspeople as it boosts their self-confidence and increases their social integration. However, at some time, an internal conflict between the matters of sports and academic affairs is turning into a major hazard.

Athletic identity is a major source of self-expression among first year students (Finch, 2009); that is why active sportspeople do their best so that to combine sports and academic affairs (Chen et al., 2010; Finch, 2009; Wolniak et al., 2001). Students will likely experience higher levels of sports and studies-related stress if they aspire for high results in sports. Students with ambitions in

sports possessing more prominent athletic identity will have their social integration facilitated at the beginning of their studies; however, already during the first year of studies, it will result in additional stress which is further worsened by the stressors stemming from the requirements imposed by the course of academic studies (Brewer et al., 1993; Miller, 2009). On the other hand, physical activeness and sports will serve the students not going for results in sports as a stress-reducing factor on condition that the students have developed a more prominent athletic identity (Miller, 2009).

The research presupposes the idea that students going for results in sports belong to the group of individuals suffering from enhanced risks of experiencing stress or emotional strain; this is extremely prominent in the students with a stronger athletic identity, i.e. the students who identify themselves with the sports environment rather than with any other social area or activity.

Conclusions

1. The stress suffered by students actively involved in sports activities and going for results in sports is more prominent than the stress experienced by the students not going for results in sports.
2. The athletic identity of students actively involved in sports and going for professionally recognized results in sports is more prominently expressed than the athletic identity of students not going for results in sports.
3. The stress levels experienced by students actively practicing sports and possessing a more prominent athletic identity yet not going for results in sports are lower than those experienced by students with a less prominent athletic identity. However, students possessing a more prominent athletic identity actively involved in sports activity and seeking results in sports are experiencing higher levels of stress than the students with less prominent levels of athletic identity.

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STATISKĀ LĪDZSVARA NOVĒRTĒŠANAS METOŽU SALĪDZINOŠĀ ANALĪZE

The Comparative Analysis of the Postural Stability Assessment Methods

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Abstract. *The sense of balance is one of the most important functional capabilities that provide the postural position of the human body and the ability to move. Vestibular disorders are most commonly found in the elderly population, but this problem has not been adequately studied in children and teenagers. The digital force platforms and functional tests that can be carried out without the hardware are commonly used for postural balance assessment. The aim of the study is to compare EUROFIT balancing test and digital platforms BIOSWAY results. Eighty-three 11–14(M=12.5) year-olds primary schools pupils performed both balance tests. The research data reveals significant problems of postural stability, but results of both methods do not correlate (r=-0.14 to 0.2). The study results indicate the necessity to continue to develop and approve methods for early diagnosis of balance disorders in children that could be available and usable.*

Keywords: digital balance platform, Eurofit, proprioceptive system, vestibular testing.

Ievads
Introduction

Līdzsvara izjūta ir viena no svarīgākajām organisma funckcionālām spējām, kas nodrošina cilvēka ķermeņa vertikālo pozīciju un spēju orientēties telpā. Akadēmiskajā terminu datubāzē līdzsvars tiek definēts kā ķermeņa vai mehāniskās sistēmas stāvoklis, kurā sistēmas parametri (koordinātas) izraudzītajā atskaites sistēmā ir nemainīgi un līdzsvars var būt statisks un dinamisks (LZA Terminoloģijas komisija). Sporta zinātnē tiek analizēts kopējā ķermeņa smaguma centra atrašanās vieta telpā, kā arī vērtē, vai pamats ir nekustīgs/stabils vai kustīgs/nestabils (Bell, 1998).

Analizējot līdzsvaru, literatūrā bieži tiek lietots termins „posturāls", kas norāda uz vertikālo pozu vai stāju (Rothbart, 1994). Posturālā līdzsvara dinamisko procesu raksturo speciālu maņu receptoru darbība, kuri sniedz informāciju par dažādiem vides stāvokļiem, kas var ietekmēt indivīda spēju noturēt līdzsvaru (Nashner, 1993). Bērnu vecumā posturālā kontrole ir noteicošais faktors motoro spēju attīstīšanai. Tā ir indivīda spēja saglabāt

gravitātes (smaguma) centru virs atbalsta laukuma miera stāvoklī, pārvietojoties, kā arī uzsākot un apturot kustību (De Kegel et al., 2010).

Līdzsvara sistēmas darbības traucējumu savlaicīga diagnosticēšana ir nozīmīgs faktors veselības komplikāciju risku mazināšanai.

Līdzsvara sistēmas darbības teorētiskais apskats
The theoretical review of balance system

Līdzsvara funkcija ir komplicēts organisma mehānisms, ko regulē vizuālā, vestibulārā aparāta un propriorecepcijas sistēmas. Ķermeņa līdzsvars ir cieši saistīts ar centrālās nervu sistēmas inervācijas un atbildes reakcijas saskaņotu darbību. Darbībā iesaistīto muskuļu spēka balansam un reakcijas laikam uz kairinājumu ir būtiska nozīme līdzsvara kontrolē (Nashner & Black, 2007).

Vairāku sistēmu integrētā mijiedarbība nodrošina šo funkcionālo spēju. Līdzsvara un telpas sajūtas centrālās nervu sistēmas regulācija ir ciešā mijiedarbībā ar kustību, redzes un psihomotorām funkcijām (1.attēls) (Ļubkina et al., 2013).
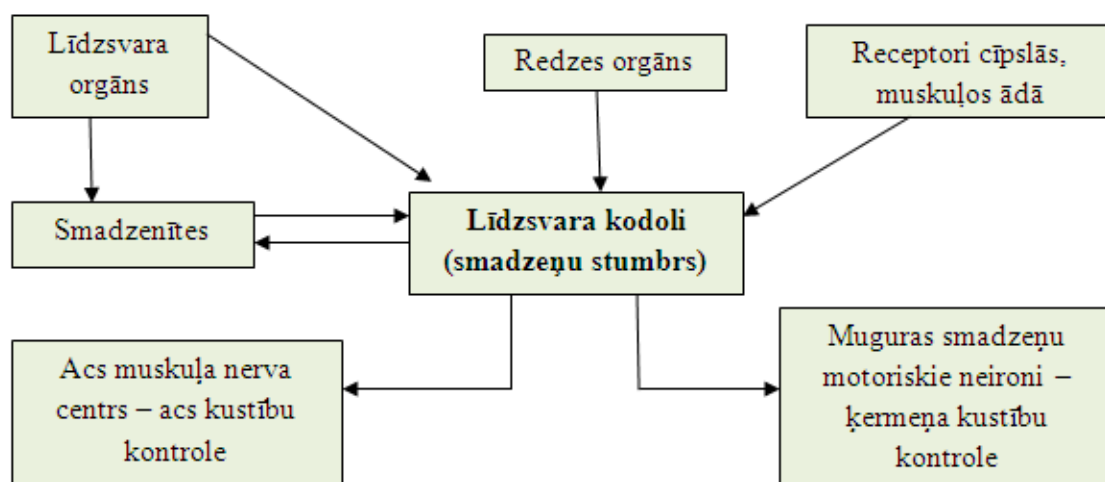
1.attēls. Neirālās informācijas apstrāde, saglabājot ķermeņa līdzsvaru
Figure 1. Processing of neural information, maintaining of the body balance

Vairāku autoru pētījumos (Niemensivu, et al., 2006; Geldhof, et al., 2006; Nashner, et al., 2007; Shumway-Cook, 2007), kā galvenie līdzsvara saglabāšanas komponenti tiek minēti: vestibulārais aparāts, redze un propriorecepcijas sistēma. Ja šīs trīs sistēmas pilnvērtīgi darbojas un nav bojātas, tad indivīds spēj noturēt līdzsvaru un izvairīties no kritieniem. Pētījumu dati (Cromwell, et al, 2007) norāda uz tiešu korelāciju starp līdzsvara problēmām un kritieniem, kas būtiski palielina traumu risku, īpaši gados vecākiem cilvēkiem. Savukārt apakšējo ekstremitāšu traumas ievērojami pasliktina posturālo kontroli (Fitzgerald et al., 2000). Savukārt arī bērnības un jauniešu vecumposmā pastāv iespēja, ka šīs sistēmas nedarbojas pilnvērtīgi, tādēļ ir vērojami līdzsvara traucējumi. Kā norāda Rose un līdzautoru pētījums (Rose et al., 2002), bērniem

ar cerebrālās triekas diagnozi spastiskās displēģijas rezultātā, posturālā kontrole ir dominējošais funkcionālais traucējums, kas ietekmē motoro attīstību.

Pētījumu rezultāti apliecina, ka vislabākā kustību kontrole tiek sasniegta pēc 16 gadiem un vidēji spēj saglabāties optimālā līmenī līdz 60 gadu vecumam. (Lavs et al., 2008). Rikks un līdzautori noteica, ka jaunākā vecumā, cilvēki izmanto galvenokārt „potīšu stratēģiju", kas ir līdzsvara saglabāšana, sabalansējot muskuļu darbību galvenokārt potītes locītavā, bet senioru vecuma cilvēki izmanto „gūžas locītavu stratēģiju" (kustības iegurņa locītavās) vai „soļa stratēģiju" (līdzsvara saglabāšana, sperot soli) (Ricci et al., 2009). Vērtējot posturālā līdzsvara svārstības, ir jāņem vērā, ka bērniem tas var būtiski atšķirties no pieaugušajiem, jo ķermeņa daļu proporcijas un smaguma centra atrašanās vietas ir dažādas. Svārstību amplitūdu un ātrumu ietekmē arī bērnu (kas ir jaunāki par 10 gadiem) nepilnīgi izveidojušies kustību paterni (Shumway-Cook, 2007). Posturālā līdzsvara kontroles mehānismi un kustību stratēģijas turpina atttīstīties arī pusaudžu vecuma posmā (Wu et.al., 2009).

Līdzsvara traucējumi bērniem var izpausties dažādās formās. Hroniski vai progresējoši traucējumi var izraisīt kustību kontroles attīstības novirzes. Akūtas līdzsvara problēmas var izpausties kā ataksija, anoreksija, vemšana un sāpes vēderā. Biežas galvassāpes, redzes dubultošanās, patoloģiskas acu kustības, vai dzirdes traucējumi arī var liecināt par iespējamiem vestibulārajiem traucējumiem (Wiener-Vacher, 2001).

Vestibulārā aparāta traucējumi visbiežāk tiek konstatēts gados vecākiem cilvēkiem, bet bērnu un pusaudžu posmā šī problēma nav pietiekami izpētīta. Visbiežāk iepriekš minētiem simptomiem netiek pievērsta pietiekama uzmanība, jo tās var būt sekundāras komplikācijas arī citām saslimšanām. Latvijā ir nepietiekami veikti pētījumi par bērnu un pusaudžu līdzsvara traucējumiem, savukārt ārzemju literatūrā ir atšķirīgi dati. Jelsma un līdzautori (2014) atklāja, ka, līdzsvara traucējumi var skart 2-7% bērnu. Savukārt citā pētījumā tiek norādīts, ka 8 % bērnu vecumā no 1 līdz 15 gadiem tiek konstatēti simptomi (reibonis, nestabilitāte, neveiklība, motorā aizture), kas var liecināt par līdzsvara traucējumiem. Fong un līdzautoru pētījumā tika konstatēts, ka 6% pirmskolas vecuma bērniem ir koordinācijas traucējumi (Fong et al., 2013). Savukārt bērniem ar traucētu koordinācijas attīstību 73-87 % gadījumos raksturīgs arī posturālā līdzsvara kontroles deficīts (Macnab, Miller, & Polatajko, 2001)

Smaguma centra pārvietošanās virziena noteikšanai laboratorijas apstākļos visbiežāk tiek izmantotas digitālās līdzsvara (tenzo) platformas (Golriz 2012). Šādu iekārtu rezultāti ir ļoti precīzi un tie tiek uzskatīti, kā „zelta standarts" līdzsvara parametru noteikšanai (Huurnink 2013). Vērtējot līdzsvara parametrus ar netiešām metodēm, tādām kā Romberga tests, Berga skala, Unterbergera tests, Babinska-Veila tests, nav iespējams iegūt tik objektīvus datus, ko sniedz jutīgie sensori, kas ir iebūvēti platformā (Ušča & Ļubkina, 2014). Turklāt, izmantojot iepriekš iegūto datu bāzi, ir iespējams diagnosticēt iespējamo kritienu risku (Piirtola & Era, 2006). Viena no ierīcēm līdzsvara parametru novērtēšanai ir

BIOSWAY portatīvā platforma. BIOSWAY līdzsvara platforma nodrošina gan standartizētu testu veikšanu, gan trenējošas rehabilitācijas programmas realizēšanu. Tomēr pieeja šāda līmeņa aparatūrai ir ierobežota, jo tā ir dārga, grūti transportējama un ir nepieciešamas iepriekšējās zināšanas tās izmantošanai. Tādēļ praksē visbiežāk izmanto līdzsvara testus, kuriem nav nepieciešams papildus aprīkojums. Viens no visplašāk izmantojamiem fiziskās sagatavotības novērtēšanas veidiem ir Eurofit tests. Tas ir fizisku kontrolvingrinājumu kopums, kas ir paredzēts ātruma, spēka, lokanības, izturības, koordinācijas spēju, tai skaitā līdzsvara sajūtu parametru izvērtēšanai. Kontrolvingrinājumu kopums tika izstrādāts skolas vecuma bērniem un tiek izmantots Eiropas izglītības iestādēs kopš 1988.gada un 1995.gadā tas tika pielāgots pieaugušajiem. Eurofit testi ir standartizēta un zinātniski pamatota metode, ko izmanto sporta medicīnā, ar mērķi noteikt izmeklējamā fizisko attīstību, fizisko sagatavotību un organisma funkcionālās spējas. Latvijā Eurofit metode kopš 2005.gada ir apstiprināta kā medicīniskā tehnoloģija sporta medicīnā. Kopš 2006.gada Latvijas Sporta medicīnas valsts aģentūra veic regulāru fiziskās sagatavotības apsekojumu sportistiem un bērniem ar paaugstinātu fizisko slodzi, kā arī vispārizglītojošo mācību iestāžu skolēniem.

Pētījuma mērķis: veikt pusaudžu posturālā līdzsvara parametru noteikšanu, izmantojot tiešās un netiešās novērtēšanas metodes, un salīdzināt iegūto rezultātu savstarpējo korelāciju.

Pētījuma organizācija un metodes
Research design and methods

Pilotpētījums tika veikts Valsts pētījumu programmas „Inovatīvi risinājumi sociālajā telerehabilitācijā Latvijas skolās iekļaujošās izglītības kontekstā". Pētījumā piedalījās 83 Latgales reģiona skolēni vecumā no 11-14 gadiem (vidējais vecums - 12.5gadi), no tiem 45 bija meitenes un 38 zēni. Pētījuma dalībnieku vidējais ķermeņa masas indekss bija 18.61(SD=3.42), zēniem -19.02 (SD=3.51), meitenēm – 18.26 (SD=3.27). Pirms pētījuma realizēšanas tika saņemta rakstiska vecāku vai aizbildņu piekrišana par viņu bērnu piedalīšanos pētījumā.

Līdzsvara parametru noteikšanai ar netiešo metodi tika izmantots Eurofit Flamingo tests. Testa tehnoloģija: testa veikšanai nepieciešams hronometrs un 50 cm garš, 4 cm augsts un 3 cm plats metāla stienis, segts ar neslīdošu materiālu (maksimālais biezums 5 mm), kas stipri piestiprināts pie stieņa. Stienim piestiprināti 2 balsti (15 cm gari un 2 cm plati), kas nodrošina stabilitāti. Pirms testa izmeklējamo iepazīstina ar uzdevuma izpildes noteikumiem. Izmeklējamai personai ļauj veikt vienu mēģinājumu, lai iepazītos ar testu un pārliecinātos, ka instrukcija saprasta. Persona iedod roku, nostājas uz vienas (pacienta izvēlētas) kājas un satver otru kājas saliektu ceļgalā pēdas virspusi ar roku. Kad atlaiž roku, tiek ieslēgts hronometrs. Ir jānotur līdzsvars 1 minūti.

Katru reizi, kad zaudē līdzsvaru: palaiž vaļā brīvo kāju vai skar grīdu, testu pārtrauc un apstādina hronometru. Pēc katra pārtraukuma testu turpina līdz vienai pilnai minūtei. Testu veic tikai vienu reizi (Valsts Sporta medicīnas centrs, 2015). Rezultātu statistiskai apstrādei tests tika modificēts. Ja izmeklējamā persona zaudēja līdzsvaru 10 reizes, tika fiksēts laiks, ko summēja, dalībniekam atrodoties uz līdzsvara stieņa.

Posturālā līdzsvara parametru noteikšanai ar tiešo metodi tika izmantota BIOSWAY platforma ar integrēto Sensorās organizācijas līdzsvara pārbaudes standartizēto testu (m-CTSIB), kas paredz 4 stāvokļus.

m-CTSIB testā ir 4 sākuma stāvokļi, kuru ilgums ir 30 sekundes ar 10sek. intervālu. Uzdevums - saglabāt līdzsvaru ar minimālu svārstību amplitūdu. Ar testa palīdzību iespējams noteikt, cik lielā mērā un kādas sensomotorās sistēmas cilvēks izmanto līdzsvara saglabāšanai.

Sākuma stāvokļu raksturojums m-CTSIB testa laikā:
1) atvērtas acis, stabila virsma, sākumpozīcijas stāvoklis, kas iesaista visas trīs sistēmas (redzes, vestibulārajai un proprioreceptīvā);
2) aizvērtas acis, stabila virsma - darbojas vestibulārā un proprioreceptīvā sisitēma;
3) nestabila virsma (sintētiska pildījuma līdzsvara spilvens), ar redzes kontroli – traucēta proprioreceptīvas informācijas saņemšana, galvenokārt darbojas redzes un vestibulārā sistēma;
4) aizvērtas acis, nestabila virsma, galvenokārt darbojas tikai vestibulārā sisitēma.

Rezultāti
Results

Analizējot pētījuma dalībnieku ķermeņa masas indeksu datus, statistiski ticamas atšķirības starp dzimumiem netika konstatētas (p=0.362). Vidējie rādītāji zēniem bija 19.02 un meitenēm – 18.26, kas atbilstoši G.Selgas un līdzautoru pētījuma datiem ir mazāki par liekā svara robežvērtībām (85 procentiles) šajā vecumposmā (Selga, Lāriņš, Sauka, 2008). Tomēr 26.3% zēnu tika konstatēts liekais svars un aptaukošanās, bet meitenēm šis parametrs bija mazāks, t.i. - 16%.

Lai gan atsevišķos pētījumos ir norādīts, ka auguma parametri var ietekmēt līdzsvara saglabāšanas rezultātus (Greve et al., 2012), mūsu gadījumā tas netika konstatēts. Veicot pētījuma dalībnieku antropometrisko rādītāju un līdzsvara testu rezultātu savstarpējo salīdzināšanu, statistiski ticamas korelācijas netika atklātas. Spīrmena rangu korelācijas rezultāti bija robežās no 0.001 līdz -0.205.

Izvērtējot Eurofit Flamingo testa rezultātus, tika noskaidrots, ka tikai 6 bērni spēja noturēties uz līdzsvara stieņa 1 minūti ar mazāk kā 10 kļūdām. Vidēji 10 kļūdu robeža tika sasniegta 38.6 (SD=14.9) sekundēs. Gandrīz katrs trešais dalībnieks (35.4%) zaudēja līdzsvaru 10 reizes pirmajās 30 sekundēs. Tika

konstatēts, ka izpildīt testu ar labo kāju izvēlējās 56.7% dalībnieku. Lai gan ir pretrunīgi dati par statiskā līdzsvara testu rezultātu ietekmi, veicot to uz vadošās (dominantās) kājas (McCurdy & Langford, 2006), tomēr A.Kļaviņas un I.Jēkabsones (2014) pētījumā tika noskaidrots, ka līdsvara rezultāti uz labās kājas bija labāki. Salīdzinot rezultātus strap dzimumiem, statistiski būtiskas atšķirības netika konstatētas (p=0.978).

BIOSWAY platformas m-CTSIB testa rezultātu analīzē tika konstatēts, ka svārtību indeksa (SI) vidējie rezeltāti ir normatīvo datu robežās. Rezultātu statistiki būtiska atšķirība (p=0.034) starp dzimumiem tika konstatēta vienā testa pozīcijā - uz cietas virsmas ar atvērtām acīm (tabula Nr.1).

1.tabula. Svārstību indeksa vidējo rādītāju atšķirības starp dzimumiem un normatīvo datu robežvērtības
Table 1. The differnces of average results of the sway index between gender and normative data limits

Testa pozīcija	Normatīvie dati	Meitenes vidējie (SD)	Zēni vidējie (SD)	*p<0.05
Cieta virsma, acis atvērtas	0.21-0.48	0.33 (0.11)	0.38 (0.11)	0.034*
Cieta virsma, acis aizvērtas	0.48 – 0.99	0.73 (0.27)	0.77 (0.26)	0.440
Mīksta virsma, acis atvērtas	0.38-0.71	0.64 (0.13)	0.70 (0.18)	0.091
Mīksta virsma, acis aizvērtas	1.07 – 2.22	1.84 (0.33)	1.82 (0.33)	0.654

Tomēr, analizējot rezultātus, ir jāņem vērā, ka platformas izgatavotāji veica normatīvo datu analīzi, apsekojot 100 dalībniekus vecumā no 17 līdz 72 gadiem (Biosway Portable Balance System, Operation Manual), līdz ar to pētījuma iekļautajai vecuma grupai Latvijas populācijā iegūtie dati ir pirmatnējie rezultāti. Tādēļ turpmākai analīzei tika veikta iegūto rezultātu sadale procentilēs, lai noteiktu testa robežvērtības (tabula Nr.2)

2.tabula. Svārstību indeksa procentiļu robežvērtības
Table 2. The data limits of sway index percentiles

	Cieta virsma, acis atvērtas	Cieta virsma, acis aizvērtas	Mīksta virsma, acis atvērtas	Mīksta virsma, acis aizvērtas
Vidēji (SD)	0.35 (0.11)	0.75 (0.26)	0.67 (0.15)	1.83 (0.33)
Procentiles 25	0.27	0.55	0.56	1.58
50	0.33	0.74	0.64	1.80
75	0.43	0.89	0.76	2.08

Apkopojot rezultātus var secināt, ka testa pozīcijā uz cietas virsmas ar atvērtām acīm virs kritiskās SI vērtības-0.43 ir 22.9% dalībniekiem, t.i. 28 bērniem no 83 ir konstatētas negatīvas novirzes no vidējiem parametriem. Līdzīgi rezultāti iegūti arī citās pozīcijās. Uz cietas virsmas ar acīm ciet arī 22.9% dalībnieku rezultāti ir virs kritiskās robežvērtības. Savukārt uz mīkstas virsmas abos testos zem robežvērtības bija vēl lielāks skaits, t.i. 24.1%. Iegūtie

dati norāda, ka gandrīz katram ceturtajam bērnam līdzsvara testa parametri ir zem vidējiem rādītājiem.

Veicot Biosway platformas un Eirofit testu rezultātu salīdzinošo analīzi, statistiski ticamas korelācijas netika atklātas. Spīrmena rangu korelācijas rezultāti bija robežās no 0.2 līdz -0.14.

<div align="center">

Diskusija
Discussion

</div>

Proprioceptīvās sistēmas pilnvērtīga darbība nodrošina cilvēkam iespēju veikt neapzinātās kustības, saglabāt pareizu stāju un veikt ikdienas aktivitātes. Mehāniskie muskuļu receptori nodrošina nervu sistēmu ar informāciju par muskuļa garumu un saraušanās ātrumu, tādējādi nodrošinot locītavu kustību un stāvokļa izjūtu (Shaffer, Harrison, 2007). Muskuļa sensorie receptori nodrošina aferento reakciju, kas pārveido dotos singālus attiecīgās refleksatorās un apzinātās kustībās. Pētījumā iegūtie rezultāti norāda uz iespējamību, ka dalībniekiem ir nepietiekama proprioreceptorās funkcijas attīstība.

Ir jāatzīmē, ka lielam procentuālajam skaitam pētījumā iesaistīto bērnu tika konstatēti sliktāki rezultāti par platformas izstrādātāju normatīvajiem rezultātiem (uz cietas virsmas ar atvērtām acīm - 11%, uz mīkstas virsmas ar aizvērtām acīm – 13%, uz cietas virsmas ar aizvērtām acīm – 18%, bet uz mīkstas virsmas ar atvērtām acīm – 37%). Kritisks rezultāts tika konstatēts testa pozīcijā uz mīkstas virsmas ar atvērtām acīm, t.i. vairāk kā trešdaļai bērnu rezultāti ir sliktāki par normatīvajiem datiem, kas tika iegūti pētījuma grupā, kur bija dalībnieki arī senioru vecumā. Mīkstās virsmas ietekmē CNS saņem izmainītu proprioceptoru informāciju un posturālais līdzsvars tiek saglabāts galvenokārt analizējot vestibulārās un redzes sistēmas informāciju. Iegūtie dati norāda, ka iespējams apsekotajiem bērniem nav pietiekami attīstītas proprioreceptīvās, jeb muskuļu „dziļās jušanas” iemaņas, kas sāk veidoties kopš bērna dzimšanas. Tas var daļēji apstiprināt citu pētījumu datus par ierobežotu kustību apjomu agrīnā bērnībā un nepietiekamu bērnu fizisko aktivitāti pirmskolas vecumā (Johansson et al., 2015).

Arī Eurofit testa rezultāti uz sašaurinātas atbalsta virsmas, kas ietekmē proprioreceptīvo uztveri, ir nepietiekami. Saskaņā ar Latvijā veiktajiem Eurofit testu baterijas pētījumiem, ko skolās organizēja Latvijas Sporta medicīnas valsts aģentūra laika posmā no 2004. līdz 2009.gadam, līdzsvara rezultāti bija robežās no 9.7 līdz 11.6, tas nozīmē, ka vidēji minūtes laikā dalībnieki zaudēja līdzsvaru 10 reizes (Sauka et al., 2011). Savukārt mūsu veiktajā pētījumā 10 kļūdu robeža tika sasniegta 38 sekundēs. Rezultātu atšķirība daļēji būtu izskaidrojama ar to, ka M.Saukas un līdzautoru pētījums tika veikts pirms vairāk kā pieciem gadiem, un šajā laika posmā ir mainījies arī bērnu brīvā laika pavadīšanas veids, kas kļuvis mazāk aktīvs. Lai gan tomēr tam būtu nepieciešami papildus pētījumi.

Vairāku autoru pētījumi norāda, ka ir novērojamas posturālā līdzsvara atšķirības starp dzimumiem, kas līdz ar laiku izmainās. Atsevišķos pētījumos ir noskaidrots, ka meitenēm 9-10 gadu vecumā ir mazākas svārstības, saglabājot līdzsvaru, nekā zēniem (Nolan et al., 2005; Geldhof et al., 2006; Lee & Lin, 2007). Odenriks un Sandstets noteica, ka meitenēm ir labāka līdzsvara kontrole, jo arī fiziskā sagatavotība šajā vecumposmā meitenēm attīstās ātrāk (Odenrick & Sandstedt 1984). Arī I.Liepiņš norādīja, ka meitenēm gan statiskā, gan dinamiskā līdzsvara spējas līdz pubertātes vecumam uzlabojas straujāk nekā zēniem (Liepiņš, 2000). Tomēr mūsu veiktajā pētījumā statistiski ticamas atšķirības tika konstatētas tikai vienā Biosway testa pozīcijā, bet citās pozīcijās un Eurofit testā zēnu un meiteņu līdzsvara parametri būtiski neatšķīrās. Iegūtie rezultāti tikai daļēji saskan ar M.Saukas un līdzautoru datiem, kur tika konstatētas statistiski ticamas atšķirības starp dzimumiem Eurofit līdzsvara testā tikai 8 un 12 gadu vecumā.

Secinājumi
Conclusions

Apkopojot pētījuma rezultātus var secināt, ka aptuveni vienai trešdaļai bērnu vecuma posmā no 11-14 gadiem ir novērojamas novirzes no vidējiem rādītājiem līdzsvara saglabāšanas testos. Statistiski ticami labāks rezultāts tika konstatēts meitenēm testā, kad līdzsvara saglabāšanā darbojas visas trīs motorās kontroles sistēmas (vestibulārais aparāts, redzes un proprioreceptoru sistēma). Līdzsvaru testu rezultāti uz ierobežotas un mīkstas virsmas norāda uz tendenci, ka lielai daļai bērnu nav pietiekami labi attīstīta proprioreceptorā sajūtas. Tas norāda uz nepieciešamību lielāku uzmanību pievērst kustību pieredzes pilnveidošanai, iekļaujot gan ikdienas aktivitātēs, gan sporta nodarbībās papildus vingrinājumus un uzdevumus kustību koordinācijas, veiklības un līdzsvara izjūtas attīstīšanai.

Savstarpēji salīdzinot tiešās un netiešās līdzsvara parametru noteikšanas metodes, tika konstatēts, ka starp iegūtajiem rezultātiem nav statistiski ticamas korelācijas. Tas norāda, ka izmantojot Eirofit testu var noteikt tikai līdzsvara parametru izmaiņu tendenci, bet nevar precīzi diagnosticēt novirzes pakāpi. Līdz ar to ir jāturpina izstrādāt metodes, kas būtu pietiekami precīzas un izmantojamas ikdienas pedagoģiskajā darbā.

Summary

The balance skill is one of the most important functional capabilities that are critical for the acquisition of the postural control and ability to move. Regardless of one's age, good balance control is significant ability in relation to participating in physical activities, dealing with daily activities, and avoiding injuries.

Vestibular disorders are most commonly found in the elderly population, but this problem has not been adequately studied in children and teenagers.

The motor strategies used to maintain a postural balance are associated with the ability to precisely perceive the environment through visual, vestibular, proprioceptive inputs and analysing it at the level of the central nervous system. The use of a digital force platform to assess postural balance control is commonly used in laboratory settings but not in field settings. Outcome measures obtained with a force platform are objective and previously considered a 'gold standard' for assessing postural balance but it has some limitations (costs, personal, and laboratory environment). Therefore functional tests as Eurofit can be carried out without the hardware are commonly used for postural balance assessment in field settings.

The aim of the study is to compare EUROFIT balancing test and digital platforms BIOSWAY results. Eighty-three 11–14(M=12.5) year-olds primary schools pupils performed both balance tests. The research data reveals significant problems of postural stability, but results of both methods do not correlate (r=-0.14 to 0.2). Eurofit balance test reveals that pupils lost balance control over 10 times in 38.6s (SD=14.9). It was found that only 6 children to maintain balance for 1 minute with less than 10 mistakes. Almost every third of participant (35.4%) lost balance 10 times in the first 30 seconds. Summarizing the BIOSWAY data it can be concluded that a large percentage of the study participants were found the worse results than the critical normative data (on a firm surface with eyes open - 11%, on a soft surface with eyes closed -13% on a firm surface with eyes closed - 18% but on a soft surface with open eyes - 37%). But it should be taken in to account that the normative data are driven from a survey of 100 participants aged 17 to 72 years.

The study results indicate the necessity to continue to develop and approve methods for early diagnosis of balance disorders in children that could be available and usable.

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SPECIĀLO SKOLU SPORTA SKOLOTĀJU PROFESIONĀLĀ ATTIEKSME PRET MĀCĪBU PROCESU SKOLĒNIEM AR SMAGIEM GARĪGĀS ATTĪSTĪBAS TRAUCĒJUMIEM

Professional Attitude of Physical Education Teachers Toward Education Process of Students with Severe Intellectual Disabilities

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Abstract*. Physical education teachers face many challenges when teaching students with severe intellectual disability (SID) because of extensive adaptations and assistance they need. The purpose of this study was to determine attitude of PE teachers in Latvia and Lithuania toward teaching students with SID in the special education environment. Method: Participants were 84 PE teachers from special schools. The Survey of Physical Education Teachers' Attitude Toward Teaching Students with SID (Strazdina & Klavina, 2012) was used. Results and Conclusions: Results revealed significant differences in results across teachers' age, gender and work experience. Latvian teachers' beliefs were more positive towards teaching students with SID than teachers in Lithuania.Stepwise multiple regressions analyses demonstrated that overall there was significant relationship between predictors and behavioral intention.*

Keywords: *physical education, professional attitude of physical education teachers, severe intellectual disability.*

Ievads
Introduction

Eiropas speciālās izglītības attīstības agentūras (2012) publikācijā identificētas četras mācīšanas un mācīšanās pamatvērtības, kas veido pamatu visu skolotāju darbībai iekļaujošā izglītībā. Šīs pamatvērtības ir saistītas ar skolotāju kompetences jomām. Kompetences jomas sastāv no trīs elementiem: attieksmēm, zināšanām un prasmēm. Noteiktai attieksmei vai pārliecībai ir nepieciešamas noteiktas zināšanas vai izpratnes līmenis un tad ir nepieciešamas prasmes, lai pielietotu šīs zināšanas praktiskās situācijās. Katrai identificētajai kompetences jomai tiek prezentētas būtiskās attieksmes, zināšanas un prasmes, kas tās apstiprina.Tomēr šie faktori nav izkārtoti hierarhiskā kārtībā un tos nevajadzētu aplūkot izolēti, jo tie ir cieši saistīti savā starpā un ir savstarpēji atkarīgi viens no otra.

Pēc LR IZM pārskata (2014) Latvijā ir 61 pašvaldības speciālās izglītības iestāde (izņemot speciālās pirmsskolas izglītības iestādes), tajā skaitā viena

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speciālā sākumskola, 48 speciālās pamatskolas un četras speciālās vidusskolas. Lai novērstu diskriminējošo praksi izglītībā atbilstoši „Reformu īstenošanas rīcības plānā vispārējā izglītībā” (2012) noteiktajiem uzdevumiem, speciālās izglītības iestādēm kopš 2012. gada septembra dota iespēja nomainīt izglītības iestādes nosaukumu, atsakoties no vārda „speciālā” lietojuma, ko līdz 2013. gada decembrim veikusi 51 izglītības iestāde. Valsts statistikas dati (2014) liecina, ka izglītojamo skaits speciālajās skolās un klasēs ar speciālo izglītības programmu ir 7916 (3,94% no kopējā izglītojamo skaita valstī). Jāņem vērā, ka darbā ar šiem skolēniem neliela mācību progresa panākšanai nepieciešams ilgs laiks, daudzveidīgi resursi un palīdzība. Bieži šiem bērniem ir sekundāras veselības problēmas, piemēram, paaugstināts ķermeņa svars, redzes, dzirdes traucējumi, epilepsija un citi, kas vēl vairāk sarežģī viņu ikdienas mācību procesu. Īpaši spilgti tas jūtams sporta stundās, kur mācību aktīvā, bieži mainīgā un plašā vide ļoti atšķiras no salīdzinoši statiskās un mierīgās klases telpas vides. Vairākos pētījumos ir pierādīts, ka regulāras fiziskās aktivitātes bērniem ar īpašām vajadzībām aizkavē hronisku slimību progresēšanu, uzlabo vispārējo veselību un funkcijas (Grunbaum, Kann, Kinchen, et. al., 2002; Rimmer, et. al., 2007). Pētījumi Kanādā noteica, ka bērniem un pusaudžiem ar invaliditāti ir 4.5 reizes zemāka fiziskā aktivitāte nekā līdzīga vecuma indivīdiem bez invaliditātes. Pusaudži ar kustību traucējumiem pavada laiku pie televizora divas reizes ilgāk, kā to vienaudži, skatoties raidījumus vismaz 4 stundas dienā (Steelee, Rossen, Biggar, 2004).

Skolēnu ar smagiem intelektuālās attīstības traucējumiem (turpmāk tekstā IAT) iekļaušana mācību procesā speciālā skolā atspoguļo šodienas izglītības divas galvenās problēmas, 1) sabiedrības pareizas attieksmes veidošana (sabiedrībai ir jāapzinās, ka cilvēku, kuriem ir speciālas vajadzības, pakāpeniska iesaiste un līdzdalība sabiedrības dzīvē ir vērtīgs ieguvums gan cilvēkam ar speciālām vajadzībām, gan sabiedrībai kopumā) (Interešu izglītība Latvijas speciālās skolās, 2007) un 2) resursu atbilstība (pedagoģiskie kadri, palīgierīces, metodikas, mācību līdzekļi) (Jurgena, 2002). Pedagogiem jābūt labām zināšanām speciālajā pedagoģijā, psiholoģijā un arī dažādo funkcionālo traucējumu klīniskajās izpausmēs. Ļoti uzskatāmu pedagoģiskās kompetences definējumu ir devis J. Stabiņš, atzīmēdams, ka „skolotāja profesionālā kompetence ir izglītības procesā iegūta un uz zināšanām, pieredzi, vērtībām un attieksmēm balstīta spēja, kas izpaužas prasmēs – gatavībā pedagoģiskai darbībai“ (Stabiņš, 2001). Neapšaubāmi, pedagoga profesionālās kompetences veidošanos ietekmē ne vien atbilstošās profesijas praktiskā un teorētiskā pieredze, bet arī paša pedagoga emocionālās inteliģences pakāpe un personīgo īpašību kopums – temperamenta un rakstura iezīmes.

Pedagogu profesionālās kompetences fatktori un to saistība ar mācību procesu ir plaši pētīta balstoties uz plānotās rīcības teoriju (Theory of Planned Behavior) (Ajzen & Fishbein, 1980; Fishbein & Ajzen 1975; Ajzen 1991),

uzsverot tās veidošanos gan agrākā pieredzē, gan sociālajā vidē, gan studiju procesā, gan saskarsmē ar audzēkņiem, gan profesionālās pilnveides jomās.

Sporta pedagogu profesionālās kompetences faktorus iekļaujošā izglītības vidē skolēniem ar funkcionāliem traucējumiem pētījuši Conatser, Block, & Gansneder (2002), Kudlacek et al., (2002); Theodorakis, Bagiantis, & Goudas (1995), Jeong & Block (2012) un citi ārzemju autori. Tomēr ārzemju autoru darbos un Latvijā nav bijis izpētīta sporta skolotāju profesionālā kompetence darbā ar audzēkņiem ar smagiem IAT, kas mācās speciālā izglītības iestādē. Multiplie funkcionāli traucējumi un speciālās izglītības vajadzības ir iemesls šo audzēkņu izglītošanai segregētā mācību vidē. Pēc ārzemju pētnieku rezultātiem, sporta pedagogiem ir lielākas problēmas šiem audzēkņiem nodrošināt mērķtiecīgu, drošu un katra indviduālajām spējām atbilstošu mācību vidi. Tāpat tiek secināts, ka šiem audzēkņiem nepieciešama nepārtraukta asistēšana vai palīdzība (Klavina & Block, 2008; Klavina, 2008; Lienert, Sherrill, & Myers, 2001; Vogler, Koranda, & Romance, 2000).

Pētījuma mērķis bija speciālo izglītības iestāžu sporta pedagogu profesionālās attieksmes faktoru par mācību procesu skolēniem ar smagiem intelektuālās attīstības traucējumiem noteikšana un analizēšana.

Metodes
Methods

Lai noskaidrotu speciālo skolu sporta skolotāju profesionālās attieksmes faktorus, pētījumā tika iekļautas 44 Latvijas (LV) un 40 Lietuvas (LT) speciālo skolu sporta skolotāji, kuri ikdienā māca audzēkņus ar smagiem intelektuālās attīstības traucējujiem (IAT). 45.2 % respondentu bija vīrieši, 54,8 % - sievietes, dzimuma sastāvam valstīs neuzrādot statistiski nozīmīgas atšķirības (p > 0,05). Respondentu grupas vidējais vecums bija 43 gadi. Pētījumā tika izmantota aptauja "Sporta skolotāju profesionālā attieksme darbā ar audzēkņiem ar smagiem intelektuālās attīstības traucējumiem" (Stradiņa & Kļaviņa, 2013). Aptauja tika izstrādāta pēc Plānotas uzvedības teorijas zinātniskā pamata (Ajzen & Fishbein, 1980; Fishbein & Ajzen 1975; Ajzen 1991). Pilotpētījumā tika noteikti 114 sporta pedagogu profesionālās attieksmes faktori. Pēc faktoru klasificēšanas tika atlasīti faktori ar augstāko atkārtojamību vai biežumu katrā kategorijā. Aptaujas gala versijā tika izmantoti 44 faktori, kas iekļāvās 75% no faktoru kumulatīvās frekvences. Jautājumi tika konstruēti balstoties uz trīs Plānotās uzvedības teorijas komponentiem, 1) personas subjektīva attieksme, 2) citu personu viedoklis, kuru aptaujātā persona augsti vērtē, un 3) personas spējas vai notikumi, kas sekmē vai bremzē konkrētas attieksmes veidošanos. Aptaujas iekšējās validitātes pārbaudei pilota pētījumā tika iesaistīti 6 ārvalstu eksperti - profesori un asociētie profesori no ASV, Spānijas, Čehijas, Austrijas, Lietuvas un Zviedrijas ar vismaz 15 gadu darba pieredzi pielāgotas sporta izglītības jomā. Aptaujas atbilžu varianti tika sastādīti pēc Likerta skalas

kritērijiem (no 1 līdz 7), kas atspoguļo respondentu viedokli attiecībā pret konkrēto jautājumu.

Pētījuma rezultāti tika analizēti ar SPSS 20 programmu. Datu analīzē tika izmantota aprakstošā statistika un faktoru regresijas analīze. Papildus, lai noskaidrotu, kādi faktori ietekmē Latvijas un Lietuvas respondentu attieksmi mācību procesā audzēkņiem ar smagiem IAT, tika veikta dispersiju analīze, kā ietekmējošos faktorus nodalot dzimumu, vecuma grupu un darba stāžu. Respondenti pēc vecuma datu apstrādē tika sadalīti trīs grupās: vecumā līdz 30 gadiem, vecumā no 31 līdz 50 gadiem un vecumā 51 gads un vecāki. Savukārt, pēc darba stāža tika izveidotas 3 apakšgrupas: līdz 5 gadiem, 6 līdz 15 gadi un 16 un vairāk gadi.

Rezultāti
Results

Vērtējot aptaujas rezultātu analīzi Lietuvā un Latvijā apkopotie respondentu rezultāti parādīja, ka skolotāju attieksme darbā ar audzēkņiem, kuriem ir smagi IAT, būtiski neatšķiras (p > 0,05). Tikai 25% (n = 11) Latvijas speciālo skolu sporta skolotāji nav strādājuši ar šādiem audzēkņiem savukārt Lietuvā 17.5% (n = 7). Rezultātu analīzē tika noteikts, ka abu valstu sporta skolotāji tic, ka audzēkņiem ar smagiem IAT piedaloties sporta stundā, uzlabosies komunikācijas prasmes, sadarbība ar citiem audzēkņiem, kas sekmēs sociālo iekļaušanu vienaudžu vidū. Šie skolēni gūs pozitīvas emocijas, apgūs jaunas kustību prasmes, kas savukārt uzlabos skolēnu veselību un fiziskās spējas.

Analizējot rezultātus pec Plānotās uzvedības teorijas *pirmās jautājumu grupas par personas subjektīvo attieksmi* tika noteikts, ka atbildes statistiski nozīmīgi ietekmē vecuma grupa, darba stāžs, kā arī abu faktoru - vecumgrupas un darba stāža savstarpējā mijiedarbība. Latvijas respondentu grupā tika secināts, ka gados jaunākie sporta skolotāji augstāk vērtēja iespēju skolēnam ar smagiem IAT sporta stundā sadarboties un iekļauties vienaudžu vidū (p =.040) un gūt pozitīvas emocijas (p = .024), kā gados vecākie kolēģi. Savukārt gados vecākie sporta skolotāji zemāk vērtēja iespēju audzēkņiem ar smagie IAT uzlabot veselību un fiziskās spējas sporta stundās (p = .031). Šie rezultāti sakrīt ar citu autoru pētījumiem, kur gados jauni sporta skolotāji un studējošie sporta izglītības studiju programmās pozitīvi vērtēja audzēkņu ar speciālām izglītības vajadzībām iekļaušanu sporta stundā (Lienert, Sherrill, & Myers, 2001; Place & Hodge, 2001; Rizzo, 1984). Jāatzīmē, ka gados jaunie sporta skolotāji ir ieguvuši zināšanas par pielāgoto sporta izglītību, kas kopš 2002.gada tiek nodrošinātas Latvijas Sporta pedagoģijas akadēmijas sporta zinātnes un veselības aprūpes studiju programmās. Lietuvas skolotāju vecuma grupas un darba stāža kopējās mijiedarbības ietekme tika konstatēta attiecībā uz iespēju uzlabot audzēkņu ar smagiem IAT komunikācijas prasmes sporta stundas

ietvaros. Gados vecāki skolotāji šo faktoru novērtēja kā nozīmīgu, savukārt, skolotājiem ar darba stāžu līdz 5 gadiem bija pretējs viedoklis.

Analizējot respondentu atbildes par problēmām un ierobežojumiem attiecībā uz mācīšanas procesu audzēkņiem ar smagiem IAT gan Latvijas, gan Lietuvas rezultātos tika noteikta statistiski ticama vecuma grupas, dzimuma un darba stāža savstarpējā mijiedarbība. Latvijā gados vecāki sporta skolotāji zemāk kā gados jaunie kolēģi vērtēja materiālās bāzes neatbilstību (p=.030). Savukārt, sievietes salīdzinot ar vīriešiem, biežāk par nozīmīgu problēmu uzskatīja palīgierīču trūkumu. Tālāk rezultātu analīzē tika noteikts, ka gados vecāki sporta skolotāji uzskata, ka audzēkņiem ar smagiem IAT ir problemātiski iekļauties starp vienaudžiem, ko savukārt neapgalvo gados jaunāki kolēģi (p = 0.021).

Lietuvas respondentu grupai šādi rezultāti netika novēroti. Tomēr sievietes ar ilgāku darba stāžu par būtisku problēmu uzskatīja atšķirīgo individuālo audzēkņu spēju līmeni. Savukārt, statistiski ticamas atšķirības Lietuvas kolēģu atbildēs starp dzimumiem tika konstatētas attiecībā uz audzēkņu ar IAT iespēju apgūt un ievērot sporta spēles noteikumus (attiecīgi p = .043 un p = .032). Sievietes vērtēja šo faktoru pozitīvāk, kā vīrieši.

Analizējot rezultātus pēc Plānotās uzvedības teorijas otrās jautājumu grupas attiecībā uz *citu personu viedokļa ietekmi uz profesionālo attieksmi,* tika noteikts, ka Lietuvā sievietes sporta skolotājas sabiedrības viedokli vērtē būtiski augstāk nekā vīrieši (p = .01) un sporta skolotāji ar darba stāžu līdz 5 gadiem (p = .01), kā kolēģi ar ilgāku darba pieredzi (p < .05). Latvijā statistiski ticamas rezultātu sakarības netika noteiktas. Tas nozīmē, ka sporta pedagogu profesionālo attieksmi būtiski neietekmē ne skolas vadības, ne audzēkņu vecāku, ne sabiedrības, ne arī kolēģu no rehabilitācijas nozares (piem., fizioterapeitu) viedoklis. Šie rezultāti atšķiras no citu valstu pētījumiem, kur tika noteikts, ka skolas vadības viedoklis ir svarīgs sporta pedagoga profesionālās attieksmes ietekmes faktors (Lienert, Sherrill, & Myers, 2001).

Tālāk analizējot respondentu atbildes par to, kuri cilvēki neatbalstītu audzēkņu ar smagiem IAT dalību sporta stundās, Latvijas pieredzējušie kolēģi (darba stāžs virs 5 gadiem) norādīja uz pedagogiem, kuru klasē ir vairāki šādi audzēkņi (p = .50). Savukārt, Lietuvas respondentu atbildēs statistiski ticamas atšķirības tika noteiktas starp gados vecākiem un jaunākiem pedagogiem, kur gados vecākie pedagogi tic, ka skolotāji ar mazu praktisko pieredzi neatbalstītu audzēkņu ar smagiem IAT dalību sporta stundās (p = .022). Savukārt, pieaugot darba stāžam, skolotāji maina viedokli, kur mazajam darba stāžam vairs netiek dota tik liela nozīme (p = .017).

Jautājumu grupā par citu kolēģu viedokļa ietekmi uz sporta pedagogu attieksmi par audzēkņu ar smagiem IAT dalību sporta stundās, Latvijas respondentu atbildēs tika noteikta statistiski ticama sakarība ar respondentu vecumu. Jo vecāki skolotāji, jo mazāk viņu attieksmi ietekmē citu kolēģu viedoklis, piemēram, pieredzējuši kolēģi no citām skolām (p = .015), klases

audzinātājs (p = .000), skolas metodiķis ar pieredzi (p = .004), salīdzinot ar gados jauniem kolēģiem. Savukārt, pretēja ietekme vērojama Lietuvas respondentu grupā, t.i., pieaugot sporta pedagogu vecumam, pedagogi proporcionāli augstāk vērtē citu kolēģu viedokli (p < .05).

Analizējot rezultātus pēc Plānotās uzvedības teorijas trešās jautājumu grupas attiecībā *uz personas spējām vai notikumiem, kas sekmē vai bremzē konkrētas attieksmes veidošanos,* tika noteikts, ka Latvijas respondentu atbildēs ir statistiski ticama sakarība starp telpu pieejamību un dzimuma un darba stāža faktoriem. Lietuvas respondentu grupā statistiski ticamas sakarības netika noteiktas. Tālāk šajā jautājumu grupā atbilžu analīzē tika noteikts, ka Lietuvas vecāka gada gājuma pedagogi par būtisku uzskata skolotāja palīga trūkumu salīdzinot ar jaunākiem kolēģiem (p = .018). Savukārt, pedagogi ar lielāku darba stāžu kā nozīmīgu ietekmes faktoru vērtē neprofesionālu pedagogu (p = .018), bet pedagogiem ar mazu darba stāžu šis faktors nav nozīmīgs.

Noslēdzošā jautājumu grupā par citiem apstākļiem vai faktoriem, kas ir svarīgi audzēkņu ar smagiem IAT mācīšanas procesā tika noteiktas statistiski ticamas sakarības starp dzimuma un darba pieredzes faktoriem. Latvijas sieviešu kārtas pedagogi, kā nozīmīgu apstākli vērtē profesionālās pilnveides kursu nepieciešamību, bet vīriešiem pedagogiem šis faktors ir zemāk novērtēts (p =.041). Tālākā rezultātu analīze parāda, ka pieaugot darba stāžam līdz 15 gadiem, respondentu profesionālās pilnveides kursu nepieciešamības novērtējums strauji pieaug, savukārt, pedagogiem ar darba stāžu grupā 16 un vairāk gadi šis faktors vairs nemainās (p >.05). Lietuvas kolēģu atbildēs šajā jautājumu grupā statistiski ticamas sakarības netika noteiktas.

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Secinājumi
Consuclusions

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Pētījumā ir apstiprinājies, ka sporta skolotāju profesionālās attieksmes veidošanās pamatā ir noteiktas zināšanas un izpratnes līmenis, kā arī prasmes un pieredze, lai pielietotu šīs zināšanas.

Pētījuma rezultātos tika noteiktas statistiski ticama attieksmes faktoru korelācija ar sporta pedagogu vecumu. Respektīvi, jaunāki sporta pedagogi pozitīvāk vērtēja audzēkņu ar smagiem IAT iespēju uzlabot veselību un fiziskās spējas sporta stundās. Rezultātu analīzē tika noteikts, ka abu valstu sporta skolotāji tic, ka audzēkņiem ar smagiem IAT piedaloties sporta stundā, uzlabosies komunikācijas prasmes, sadarbība ar citiem audzēkņiem, kas sekmēs sociālo iekļaušanu vienaudžu vidū.

Latvijas respondentu grupā tika secināts, ka gados jaunākie sporta skolotāji augstāk vērtē iespēju skolēnam ar smagiem IAT sporta stundā sadarboties un iekļauties vienaudžu vidū un gūt pozitīvas emocijas. Savukārt, gados vecākie sporta skolotāji zemāk vērtēja iespēju audzēkņiem ar smagiem IAT uzlabot veselību un fiziskās spējas sporta stundās.

Lietuvas skolotāju vecuma grupas un darba stāža kopējās mijiedarbības ietekme tika konstatēta attiecībā uz iespēju uzlabot audzēkņu ar smagiem IAT komunikācijas prasmes sporta stundas ietvaros. Gados vecāki skolotāji šo faktoru novērtēja, kā nozīmīgu, savukārt, skolotājiem ar darba stāžu līdz 5 gadiem bija pretējs viedoklis.

Analizējot respondentu atbildes par problēmām un ierobežojumiem attiecībā uz mācīšanas procesu audzēkņiem ar smagiem IAT gan Latvijas, gan Lietuvas rezultātos tika noteikta statistiski ticama vecuma grupas, dzimuma un darba stāža savstarpējā mijiedarbība. Latvijā gados vecāki sporta skolotāji zemāk kā gados jaunie kolēģi vērtēja materiālās bāzes neatbilstību.

Lietuvas sporta skolotājas ar ilgāku darba stāžu salīdzinājumā ar jaunākiem kolēģiem par būtisku problēmu uzskatīja atšķirīgo individuālo audzēkņu spēju līmeni.

Lietuvas sporta skolotājas sabiedrības viedokli vērtē būtiski augstāk nekā vīrieši. Latvijas sporta pedagogu profesionālo attieksmi būtiski neietekmē ne skolas vadības, ne audzēkņu vecāku, ne sabiedrības, ne arī rehabilitācijas speciālistu (piem., fizioterapeitu) viedoklis.

Pētījumā konstatēts, jo vecāki skolotāji, jo mazāk viņu attieksmi ietekmē citu kolēģu viedoklis, piemēram, pieredzējuši kolēģi no citām skolām, klases audzinātājs, skolas metodiķis ar pieredzi. Savukārt, pretēja ietekme vērojama Lietuvas respondentu grupā, t.i., pieaugot sporta pedagogu vecumam, pedagogi proporcionāli augstāk vērtē citu kolēģu viedokli.

Lietuvas vecāka gada gājuma pedagogi par būtiskāku salīdzinājumā ar jaunākiem kolēģiem uzskata skolotāja palīga trūkumu.

Latvijas sieviešu kārtas pedagogi, kā nozīmīgu apstākli vērtē profesionālās pilnveides kursu nepieciešamību, bet vīriešiem pedagogiem šis faktors ir zemāk novērtēts. Tālākā rezultātu analīze parāda, ka pieaugot darba stāžam līdz 15 gadiem, respondentu profesionālās pilnveides kursu nepieciešamības novērtējums strauji pieaug, savukārt, pedagogiem ar darba stāžu grupā 16 un vairāk gadi šis faktors vairs nemainās. Lietuvas kolēģu atbildēs šajā jautājumu grupā statistiski ticamas sakarības netika noteiktas.

Kopumā pētījuma rezultāti atklāja, ka profesionālo attieksmi tieši vai netieši ietekmē profesionālā pieredze, dzimums un vecums.

Summary

Physical teachers' attitudes are important predictor of the successful education of children with severe intellectual disabilities (SID). However, physical education teachers face many challenges when teaching these students because of extensive adaptations and assistance they need. **The purpose** of this study was to determine attitude of PE teachers in Latvia (LV) and Lithuania (LT) toward teaching students with SID in the special education environment. In the present study attitude is defined as a "person's degree of favorableness or unfavorableness with respect to a psychological object" or "evaluation of an object, concept, or behavior along a dimension of favor or disfavor, good or bad, like or dislike." (Ajzen & Fishbein, 2000, p. 1). Development of the survey was done during Pilot Study on 2012 based

on the Theory of planned behavior (Ajzen & Fishbein, 1980; Fishbein & Ajzen, 1975). According to the Theory of planned behavior (Ajzen, 1991, 2001), attitudes toward a specific behavior (teaching students with severe intellectual disability in physical education) are determined by people's evaluations of the possible consequences of the behavior. Intention is influenced by attitude toward the behavior, subjective norm (social pressures), and perceived behavioral control. **Method:** Participants were 84 PE teachers from special schools (44 - LV, 40 - LT). The Survey on Special Physical Education Teacher Attitudes Toward Teaching Students with SID (Klavina & Strazdina, 2012) was used. **Results:** Comparative analyses between results from the two countries indicated significant differences across variables of attitude components.The correlated T test revealed that Latvian teachers' beliefs were more positive towards teaching students with SID than teachers in Lithuania.Stepwise multiple regressions analyses demonstrated that overall there was significant relationship between predictors and behavioral intention. The professional experience was significantly correlated to lack of practical experience. The gender was significantly correlated with positive outcome of teaching the student with SID. In general woman teachers were more favorable toward teaching students with SID than male teachers. **Conclusions:** The first important funding in this study was that attitudes had a significant correlation with age of PE teachers illustrating that younger tecahers had more positive attitude toward teaching students with SID in PE than older teachers. This finding suggests that the knowledge and quality of teaching experience is important in fostering positive attitudes. A second important finding was that teachers over 30 years of age was less optimistic regarding teaching outcomes of students with SID in PE. These results may indicate that teaching experience may influence attitudes indirectly through perceived competence. Overall, results of this study revealed that professional attitudes are influenced directly or indirectly by professional experience, gender and age.

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SEX AND AGE DIFFERENCES IN LEVELS OF ANOMIA OF LATVIAN INHABITANTS

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Abstract. Anomia is one of the important factors, which can influence the psychological well-being of individuals. It is especially valuable to determine those socio-demographic groups which can demonstrate the highest levels of anomia. The purpose of the research was to determine whether there are sex and age differences in levels of anomia of Latvian inhabitants. The secondary data from the third European Quality of Life Survey (EQLS) were used. The sample consisted of Latvian inhabitants (n = 1009), aged from 18 to 92 years (male – 34.9%, female – 65.1%). 3 indices and 3 subscales of anomia (Social Distrust, Social Isolation and Meaninglessness) were constructed (Ļevina, Mārtinsone & Kamerāde, 2015a, 2015b). A multivariate analysis of variance was conducted. It was found that there was a significant difference in multidimensional anomia between Latvian inhabitants of different age groups.

Keywords: anomia, meaninglessness, social distrust, social isolation.

Introduction

Anomia is one of the important factors, which can influence the psychological well-being of individuals. Anomie refers to the condition or state, in which there is a breakdown of social norms and guidance for the citizens of a society (Durkheim, 1893), as well as to the discrepancy between common social goals and the legitimate means to attain those goals (Merton, 1964). Anomia is subjectively perceived anomie (Olsen, 1969; Srole, 1956; Lytkina, 2012).

Anomie is recognised as one of the most important concepts in sociology and criminology (Cao et al., 2010). However, there is the lack of anomia research in the field of psychology. Thus, this study is focused on anomia.

Research of anomia is actual in the period when the society endure social and economic changes. It is especially valuable to determine those socio-demographic groups which can be more sensitive and vulnerable to socio-economic changes and transitions and can demonstrate the highest levels of anomia.

The purpose of this research was to determine whether there are sex and age differences in levels of anomia of Latvian inhabitants.

Method of the research – analysis of the secondary data from the third European Quality of Life Survey (European Quality of Life Survey (EQLS), 2012).

Participants – the inhabitants of Latvia (*n* = 1009), aged from 18 to 92 years (male – 34.9%, female – 65.1%).

Instrument – the Anomia Scale developed on the base of the questionnaire of the EQLS and the integrative multidimensional model of anomia (Ļevina, Mārtinsone & Kamerāde, 2015a, 2015b).

The concept of anomia

Despite of the great importance of anomia, there are certain gaps and problems in the field of both theoretical and empirical research, such as the lack of clear definition of anomia, the existence of problems with operationalization and measurement of anomia.

The notion of anomia

The concept of anomia was introduced by Leo Srole (Srole, 1956), who distinguished between two levels of existence of the phenomenon – macrosocial level (*anomie*) and microindividual level (*anomia*). Anomia refers to microindivital level and can be understood as the individual impact of anomie. According to Srole anomia is an individual's generalized sense of "self-others alienation".

E. Lytkina (Лыткина, 2014) offers to differ three notions: *anomie* as a social phenomenon, *anomia* as an individually psychological state of a person, and *anomy* as a psychological state of anxiety, distrust, pessimism, hopelessness the loss of a sense of safety. She also emphasizes that the notion of anomy is more relevant to psychological studies and psychological measures. At the same time in her empirical studies (Lytkina, 2012) she differentiates between the two concepts – *anomie*, which stands for a state of society characterized by the lack of norms and regulations, and *anomia*, which characterizes the level of individual state of members of the society.

Thus, anomie is an objective social state of the society. In turn, anomia is a subjectively perceived anomie, an individually psychological state, characterized by subjectively perceived normlessness and such feelings as helplessness, alienation, and concern about future.

The structure of anomia

The analysis of literature allows to conclude that different researchers of anomie and anomia conceptualized these phenomena as consisting of different dimensions.

First of all Durkheim's (Durkheim, 1966) definition of **anomie** was connected to the idea of *social isolation* and *normlessness*. In turn, Robert Merton (Merton, 1962) treated the concept of **anomie** as *normlessness*.

Srole (Srole, 1956) conceptualized three dimensions of anomia*: norm devaluation,* referring to deflation of moral guidelines in goal-striving,

interpersonal disintegration, referring to the destabilization of interpersonal supports, and *future foreclosure* expressing the abandonment of further goal-striving.

Some researchers analyze the concept of anomy through the prism of the theory of alienation. Alienation is conceptualized as having five major components or dimensions: powerlessness, normlessness, social isolation, meaninglessness, and self-estrangement (Dean, 1961; Seeman, 1959). According to Seeman (Seeman, 1959) anomia refers to *normlessness* and is therefore one of the indicators of *alienation*. Later Seeman (Seeman, 1982) describes two aspects of anomia – *normlessness* and *meaninglessness*.

Lytkina (Лыткина, 2014) recognizes the same dimensions of anomia - *normlessness* and *meaninglessness*. Respectively she has constructed the two indices of anomia.

Examination of the existing literature allows one to conclude that anomia is multidimensional. However, at the same time researchers conceptualized the dimensions of anomia differentially. Some dimensions are similar, some – specific.

The integrative multidimensional model of anomia

On the base of the analysis of theoretical and empirical research of anomia the integrative multidimensional model of anomia was developed (Ļevina, Mārtinsone & Kamerāde, 2015a, 2015b; Levina, Martinsone et al., 2014). The model includes three main dimensions of anomia, such as *normlessness*, *meaninglessness*, and *social isolation*.

The first dimension of anomia – normlessness – could be defined as a perceived breakdown of the social order in which norms no longer regulate behavior. This dimension can be divided into two sub-dimensions – an individual's deviation from prescribed rules or customs and social distrust. Two main signs of an individual's deviation from prescribed rules or customs are the lack of an individual's respect of presumed norms and readiness to engage in particular acts of deviance and to use non-normative means. In its turn, the lack of trustworthiness to government and other social institutions as well as trustworthiness to other people, that is the extent to which people doubt that others are generally fair, honest and respect presumed norms, are main signs of social distrust.

The second dimension of anomia is meaninglessness. Meaninglessness as an absence or unclarity of prescriptions for behavior is divided into the lack of goal clarity and generalized sense of meaninglessness. The lack of goal clarity is being without desirable and sensible goals. On the other hand, the main signs of the generalized sense of meaninglessness are the sense of the lack of control and freedom, the sense of boredom.

At last the third dimension of anomia - social isolation was divided into two sub-dimensions – estrangement to others and cultural isolation. The lack of social support, the sense of loneliness are the signs of the estrangement to others, when the sense of loss of internalized social norms and values is the main signs of the cultural isolation.

As a result of the review of theories and empirical research of anomia one possible representation of the integrative multidimensional model of anomia was developed (see Fig. 1).
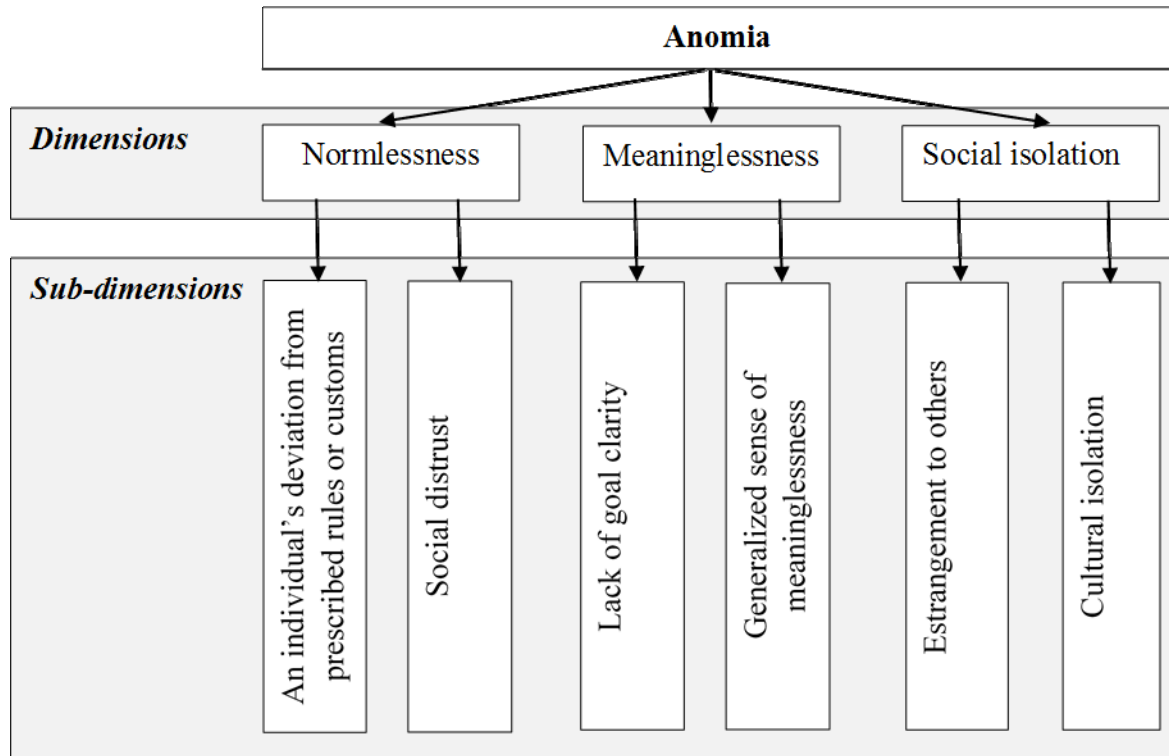

Figure 1. Representation of the integrative multidimensional model of anomia (Ļevina, Mārtinsone, & Kamerāde, 2015b)

Thus, the concept of anomia can be defined as an individual's characteristic when the person beliefs that there are no social norms, rules and prescriptions, which can regulate his / her own behavior as well as the behavior of other citizens of the society, when the person endures the psychological state of meaninglessness and social isolation.

Anomia and its association with sex and age

Examination of the existing literature allows to conclude that in previous studies researchers have investigated how individuals' sense of anomie, t.i. anomia is related to the social and economic position of the individual in a society. Some studies of determinants of anomie have also focused on the relationship between such variables as sex and age and subjectively perceived anomie.

Cao and co-authors (Cao et al., 2010; Zhao & Cao, 2010) measured individuals' sense of anomie as an index of the individual's acceptance of the legitimacy of different instrumental criminal scenarios such as violations of laws for monetary gains. It is important to note that Cao and co-authors use the term "anomie" and at the same time, they emphasize that the research object is anomie at the individual level, t.i. individuals' sense of anomie, in other words – anomia. They reported that it was found that male respondents had a higher level of anomie than female respondents. Similarly, young people reported an elevated level of anomie than seniors. The authors concluded that at the individual level, the older one is the less anomic one becomes; men are more likely to report a stronger sense of anomie than women. Thus, in their study Cao and co-authors found that such aspect of anomia as normlessness and more precisely – an individual's deviation from prescribed rules – is related to gender and age.

Sev'er and co-authors (Sev'er et al., 1993) measured subjectively perceived anomie by a modified version of Leo Srole's **Anomie** Scale (Srole, 1956). Sev'er and co-authors found that that the main effect of gender on subjective perceptions of anomie was not significant. However, there was a significant interaction between ethnic groups and gender. The authors concluded that there were no anomie gender differences in most of the high ethnic status groups, but some lower status gender variations were found.

Some previous investigations have focused on such dimension of anomia as meaninglessness and sex differences. Some researchers report that sex and anomia are not associated (Richmond et al., 1969). However, in other studies there was found that men did express more meaninglessness than females (Metha, 1972).

The present study

Examination of the existing literature allows to conclude that in some previous studies researchers have focused on relations between sex and age and a single certain dimension of anomia. Thus, the main objective of this study was to investigate whether males and females of different age differ in multiple dimensions of anomia. Second, the results of the previous studies of the links between anomia and sex are inconsistent – some researchers have found that there were sex differences in levels of subjectively perceived anomie while other investigators concluded that anomia and sex were not associated. Third, there is a lack of research about interaction between sex and age group. Thus, in the current study there are three main research questions:
1. Are there any sex differences in levels of multidimensional anomia for Latvian inhabitants? If yes, what are they?
2. Are there any age differences in levels of multidimensional anomia for Latvian inhabitants? If yes, what are they?

3. Is there a significant interaction between the effects of sex and age of Latvian inhabitants on levels of multidimensional anomia?

Methodology

In this study the secondary data from the third European Quality of Life Survey (European Quality of Life Survey (EQLS), 2012) were used. The EQLS is carried out every four years and examines the objective circumstances of European citizens' lives and how they feel about those circumstances and their lives in general.

The third EQLS took place in 2011-2012 in 34 countries. The Latvian sample consisted of the inhabitants of Latvia ($n = 1009$), aged from 18 to 92 years (male – 34.9%, female – 65.1%).

All Latvian respondents were classified into four age groups according to periodization of human development (Craig & Baucum, 2001): late adolescents / youths (from 18 to 21 years old), early adults (from 22 to 40 years old), middle adults (from 41 to 65 years old), and late adults (66 and older).

On the base of the questionnaire of the EQLS and the integrative multidimensional model of anomia (Ļevina, Mārtinsone & Kamerāde, 2015a, 2015b) three indices of anomia and respectively three subscales, which measure different dimensions of anomia, were constructed.

At the first stage of the construction of the Anomia Scale all original questions of the EQLS were analyzed and compared with different dimensions, subdimensions, and signs of anomia. Thus, based on the integrative multidimensional model of anomia the initial item pool was chosen. The first item pool consisted of 21 items. Some of the original items of the EQLS initially were negatively worded. These items were reversed. Each score for all items was converted to a z-score.

Based on the results of the psychometric analysis, the number of items was reduced to 13. Thus, the newly established Anomia Scale consists of 13 items that form three subscales: Social Distrust ($k = 6$), Social Isolation ($k = 3$), and Meaninglessness ($k = 4$). Cronbach's alpha coefficients for all subscales were computed (the coefficients ranged from .69 to .84).

A brief description of the three subscales of anomia is as follows:
1. Social distrust – the higher score means the lower level of trustworthiness to government and other social institutions;
2. Social Isolation – the higher score means the higher ratings of lack of social support, being without social recognition, sense of loneliness;
3. Meaninglessness – the higher score means the higher ratings of being without desirable and worthwhile goals, sense of lack of control and freedom, pessimism about the future.

Results

As it was mentioned above, the main purpose of this research was to determine whether there are sex and age differences in levels of anomia of Latvian inhabitants. Descriptive statistics for measures of anomia for male and female respondents from different age groups are presented in Table 1.

Table 1. Means and Standard Deviations for Anomia Scales as a Function of Age and Sex

| | | Anomia Scales | | | | | |
| | | Social Distrust | | Social Isolation | | Meaninglessness | |
Group	*n*	*M*	*SD*	*M*	*SD*	*M*	*SD*
18-21 years							
Males	20	-.56	3.65	-.87	1.92	-1.43	2.16
Females	26	-.41	4.00	-.39	1.74	-1.78	1.79
22-40 years							
Males	114	.44	3.95	-.68	2.14	-.87	2.75
Females	125	.00	4.13	-.38	2.09	-.47	2.50
41-65 years							
Males	114	1.53	4.22	.43	2.70	.41	2.74
Females	213	-.16	4.43	-.09	2.58	-.04	2.80
66-92 years							
Males	45	-.02	4.61	.45	2.36	-.23	2.85
Females	145	-.78	4.63	-.12	2.27	.16	3.13

The levels of Social Distrust, Social Isolation and Meaninglessness for male and female respondents from different age groups are also presented in Figure 2.

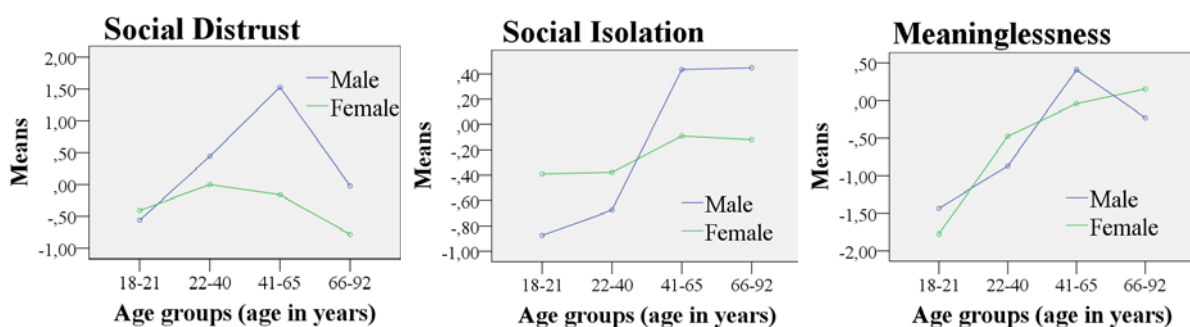**Figure 2. The levels of Social Distrust, Social Isolation and Meaninglessness for male and female respondents from different age groups**

To assess whether males and females from different age groups have different Anomia Scales composite scores, and whether there was an interaction between age and gender, a multivariate analysis of variance (two-factor MANOVA) was conducted. The assumption of homogeneity of covariances

across groups was checked and met. It was found that the interaction between sex and age was not significant, Wilks' Λ = .985, F (9, 1927.67) = 1.36, p = .05, multivariate η^2 = .01. There was a statistically significant difference in multidimensional anomia between Latvian inhabitants of different age groups, Wilks' Λ = .956, F (9, 1927.67) = 4.08, p = .00, multivariate η^2 = .02. The main effect for sex was not significant, Wilks' Λ = .996, F (3, 792) = .98, p = .05, multivariate η^2 = .00.

Follow-up ANOVAs (see Table 2) indicate that there were statistically significant differences between respondents of different age groups for Social Isolation scores and for Meaninglessness scores.

Table 2. Effects of Age and Sex on Anomia Scales Composite Scores

Source	Dependent variable	*df*	*F*	η^2	*p*
Age	Social Distrust	3	2.49	.01	.059
	Social Isolation	3	5.27	.02	.001
	Meaninglessness	3	8.20	.03	.000
Sex	Social Distrust	1	2.73	.00	.099
	Social Isolation	1	.11	.00	.736
	Meaninglessness	1	.00	.00	.986
Age x Sex	Social Distrust	3	1.27	.01	.284
	Social Isolation	3	1.95	.01	.121
	Meaninglessness	3	.34	.01	.259
Error	Social Distrust	794			
	Social Isolation	794			
	Meaninglessness	794			

Additionally *Post hoc* tests using Games-Howell were performed for multiple comparisons of Social Isolation and Meaninglessness scores for respondents from different age groups. The results of *Post Hoc* tests showed that respondents aged between 41 and 65 years (middle adulthood) had significantly higher scores for Social Isolation than 22-40 years old respondents (early adulthood) (p < .05). It was also found that 18-21 years old respondents (late adolescence/youth) had significantly lower scores for Meaninglessness than respondents aged between 22 and 40 years (early adulthood) (p < .05), respondents aged between 41 and 65 years (middle adulthood) (p = .00), and respondents aged between 66 and 92 years (late adulthood) (p = .00). It was also found that 22-40 years old respondents (early adulthood) had significantly lower scores for Meaninglessness than respondents aged between 41 and 65 years (middle adulthood) (p < .01), and respondents aged between 66 and 92 years (late adulthood) (p < .05).

Conclusions

The present study was designed to investigate the level of anomia of Latvian inhabitants. The aim of this study was to examine whether there were differences in levels of anomia for males and females from different age groups.

The results of the present research show that there are age differences in levels of anomia for Latvian inhabitants. In particular, it was found that middle-aged adults had higher scores for Social Isolation than respondents from the group of early adults. This finding has at least two possible explanations. First, from the developmental perspective it can be connected with the developmental changes such as changes in the family structure – middle-aged adults can feel more social isolation and have the higher ratings of lack of social support and sense of loneliness because their the grown-up children leave home and start living separately from parents. Second, middle-aged adults reported an elevated level of social isolation than early adults because they can have less possibilities for social inclusion and participation offered by the Latvian society.

It was also found that Latvian inhabitants from the group of late adolescents-youths had the lowest scores for Meaninglessness comparing with all other age groups, and early adults – lower scores for Meaninglessness than middle and late adults. First, late adolescents and youths feel less meaninglessness than respondents from all other age groups because late adolescence-youth is the stage of psychosocial development when the life of a young man is filled with future plans and hopes. Second, adolescents and youth as well as early adults can have the lower ratings of being without desirable and worthwhile goals and pessimism about the future because they can be more flexible, easier accept social, political and economic changes and, as a result, they can easier find the new goals in the new socially economic conditions.

Sex differences in levels of anomia were not found. These findings allows to propose that, perhaps, socially and environmental factors are more important for the sense of anomie that biologically determined factors.

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CHARACTERISTICS OF PERSONAL VALUE-MEANING SYSTEMS OF LATVIAN YOUTHS IN 1998, 2005, 2010 AND 2015: A COMPARATIVE STUDY

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Abstract. Research of personal values is one of the most important tasks in the context of social and economic changes of the society. The purpose of this research was to compare the values and the level of disintegration of personal value-meaning systems of Latvian youths in different periods of socio-economic development of Latvian society. The research was conducted in 1998 and repeated in 2005, 2010 and in 2015. All participants were students of 11th or 12th grade. To provide a measure of value-meaning systems the M. Rokeach technique modified by E.B. Fantalova was used. The results revealed that there were differences in ratings of importance and attainability of values as well as in levels of discrepancy between importance and attainability of values of Latvian youths in different periods of socio-economic development of Latvian society.

Keywords: attainability of value, discrepancy between importance and attainability of value, importance of value, personal value-meaning system, values.

Introduction

Values research is recognized as one of the most important themes in the field of psychology. Personal values determine life choices, decisions and actions. Values are conceptions of the desirable that influence the way people select action and evaluate events (Schwartz & Bilsky, 1987). Values are **acquired** during the process of personality development and do change under the influence of various events and life experience (Eŋģele, 2015).

Research of personal values is topical during the period when the society endures transitions in its development, when social, economic, political and cultural changes require from an individual a reconsideration and revaluation of values. Especially actual is the investigation of values during the late adolescence and youth when an individual's personal and professional self-determination and identity are the main developmental tasks. Disintegration of the personal value-meaning system is one of the major factors, which can influence the ability of young men to determine life goals as well as their psychological health in general.

During the last two decades, Latvian society endured certain transitions such as the economic crisis, joining the EU, the introduction of the euro, changes in the labour market and labour migration, changes in the higher education sector and student migration. All these changes could affect value-meaning systems of Latvian youths. Thus, **the purpose of this research** is to determine whether there are differences in personal value-meaning systems of Latvian youths in different periods of socio-economic development of Latvian society.

The concept of personal values and value-meaning systems

Schwartz and Bilsky (Schwartz & Bilsky, 1987, 1990), integrating features from many existing definitions of values, defined values to be concepts or beliefs, pertaining to desirable end states or behaviors (modes of conduct), that transcend specific situations, guide selection or evaluation of behavior, people and events, and are ordered by relative importance.

Sets of values form value systems. Researchers (e.g. Salikhova, 2015a, 2015b) distinguish two main parameters, which characterize an individual's personal value-meaning system, - substantial and dynamic. The first important parameter of values is their substantive content. Respectively, according to the content of values, classifications of types of values were developed (e.g. Allport et al., 1960; Rokeach, 1973; Schwartz, 1992). Values are hierarchically organized (Cieciuch et. al., 2014; Schwartz et. al., 2012; Rokeach, 1973). The dynamic side of a person's value-meaning sphere refers to the relation of personality existential expectations and actual life situation (e.g. Salikhova, 2015a, 2015b). Fantalova (Фанталова, 2001) hypothesized that one of the most important determinants of the motivational personality sphere was the ratio of value and measure of its attainability in life. The state when the certain value is important, but not attainable, is defined as a state of the deep inner conflict. The state when the value is attainable, but not so important, is defined as the state of inner meaning vacuum. The discrepancy of importance and attainability of values is the main indicator of disintegration of the personal value-meaning system. Thus, the content and the level of discrepancy of importance and attainability of values are two main characteristics of an individual's personal value-meaning system.

Youths' values

In recent decades researchers have increasingly focused on youths' values. Substantial and / or dynamic parameters of personal value-meaning systems of youths in connection to social, economic, politic, cultural factors were investigated worldwide (Karvonen et al., 2012; Lan, 2009; Likitapiwat et al., 2015; Maercker et al., 2015; Meral, 2000; Petrov, 2008; Salikhova, 2015a).

Youths' values were also investigated in Latvia (Austruma, 2012; Izglītības un zinātnes ministrija, 2013; Jirgena & Mārtinsone, 2007; Karpova, 1994; Koroļeva et al., 1999; Lūse, 2001; Šteinberga & Tunne, 1999; Tunne, 1997). Jirgena (now Mihailova) and Martinsone (Jirgena & Mārtinsone, 2007) in their research of Latvian youth's values in 1998 and in 2005 concluded that the values of Latvian youth whose childhood passed during the times of Socialism and the times of National Awakening, did not differ. They found that the most important values in both samples were love and good and reliable friends. Very similar results were obtained in the research conducted in 1994 by Karpova (Karpova, 1994), who also found that the most important values of Latvian students were good and reliable friends, love, health and happy family life. However, Jirgena and Martinsone (Jirgena & Mārtinsone, 2007) identified some tendencies of changes of personal value-meaning systems of Latvian youths. They reported that the ratings of importance of such values as self-confidence and cognition were higher in 1998 comparing with 2005, while the ratings of health value were higher in 2005.

Recently, Austruma (Austruma, 2012) conducted the research of values, which were acquired by young people in the modern consumer society in Latvia. She reported that young people's values in the consumer society reflect a collectively-fixed experience and the goal of the society that is promoted by the dominant post-modern consumer society. Austruma found that the prior values, chosen by young people from all culture-historical regions of Latvia, were family, friends, health, education, love, career and freedom.

In the research of Latvian youth's values, conducted in 2012/2013 (Izglītības un zinātnes ministrija, 2013), it was found that Latvian youth most often identified as the more significant such values as cozy house, stable job, interesting job, happy life with a partner, profession which allows to earn good money, good education, ability to give own children a secure future.

Examination of the existing literature allows to conclude that such values as, for example, family, friends, love appear consistently important for Latvian youths. On the other hand, youths' values are also modified and reflect the experience of the social community's life.

The present study

Previous investigations have mainly focused on substantial parameters of personal value-meaning systems of youths. Less is known about dynamic parameters of personal value-meaning systems. There is also a lack of comparative studies, which are focused on differences in personal value-meaning systems of Latvian youths in different periods of socio-economic development of Latvian society. Thus, in the current study there are three research questions: are there any differences (1) in ratings of importance of values and (2) in ratings of attainability of values as well as (3) in the level of

discrepancy between importance and attainability of values of Latvian youths in different periods of socio-economic development of Latvian society?

Methodology

For measurement of importance and attainability as well as discrepancy between importance and attainability of values, the M. Rokeach (Rokeach, 1973) technique modified by E.B. Fantalova (Фанталова, 2001) was used. The Latvian version of the instrument was developed by S. Jirgena (now Mihailova) (Jirgena, 1999). The research participants received the list of twelve terminal values and two tables of all possible pairs of values. In the first table in each pair of values students had to mark the more important value, in the second – the more attainable value. Importance scores (I) were computed as the number of cases when a value was chosen as a more important, and attainability scores (A) – as the number of cases when a certain value was marked as a more attainable. The index of discrepancy (R_{I-A}) between importance and attainability was computed as a total difference of importance and attainability for all values ($\Sigma[I-A]$).

First time the research was conducted in 1998 and then was repeated in 2005, 2010 and in 2015. All participants were students of 11th or 12th grade from Riga secondary schools (aged between 16 and 19 years). The sample of the study in 1998 consisted of 115 participants (42.6 % males, 57.4% females). In 2005 the sample consisted of 79 participants (17.7 % males, 82.3% females). 82 students took part in the research in 2010 (32.9 % males, 67.1% females). At last, in 2015 the sample consisted of 144 participants (39.6 % males, 60.4% females).

Results

In order to determine whether there were differences in students' ratings of importance and attainability of values as well as in levels of discrepancy between importance and attainability of values in 1998, 2005, 2010 and 2015 the Kruskal-Wallis H test was used.

Results of the comparison of the importance of values

Descriptive statistics for the index of importance of values and the results of the comparative analysis are presented in Table 1.

The Kruskal-Wallis H test showed that there was a statistically significant difference in students' ratings of the importance of the following values: health ($p = .00$), interesting job ($p = .05$), love ($p = .00$), good and reliable friends ($p = .00$), self-confidence ($p = .00$), cognition ($p < .05$) and creativity ($p = .001$). The pairwise comparisons were conducted using the Mann-Whitney U test.

Table 1. The comparison of the importance of values

Values	The research year				χ^2	p
	1998	2005	2010	2015		
	Mdn (IQR)	Mdn (IQR)	Mdn (IQR)	Mdn (IQR)		
Active life	3 (2-5)	4 (2-5)	4 (2-5)	4 (2-5)	1.78	.618
Health	6 (4-8)	7 (5-10)	7 (5-10)	8 (6-10.75)	27.40	.000
Interesting job	5 (4-7)	5 (4-6)	5 (4-6)	4 (3-6)	9.34	.025
Beauty of nature and art	2 (1-3)	2 (1-3)	2 (1-3)	1 (0-4)	3.56	.313
Love	8 (7-10)	9 (7-10)	9 (7-10)	7 (5.25-9)	19.66	.000
Material welfare	6 (4-8)	7 (4-8)	7 (4-8)	6 (4-8)	6.48	.090
Good and reliable friends	8 (6-9)	8 (6-9)	8 (6-9)	6.5 (4.25-8)	24.38	.000
Self-confidence	4 (3-6)	3 (2-5)	3 (2-5)	5 (3-7)	20.30	.000
Cognition	6 (4-8)	5 (3-7)	5 (3-7)	5 (3-7)	8.76	.033
Freedom	5 (4-8)	7 (4-8)	7 (4-8)	7 (5-9)	7.55	.056
Happy family life	9 (6-10)	9 (8-10)	9 (8-10)	9 (6-10)	1.48	.687
Creativity	2 (0-4)	1 (0-3)	1 (0-3)	2 (1-4)	17.40	.001

Note. For *IQR* Q_1 and Q_3 are presented.

Health. It was found that there was a significant difference in students' ratings of importance of health value between respondents participated in the research (1) in 1998 and in 2005 ($z = -2.83$, $p < .01$), (2) in 1998 and in 2010 ($z = -3.41$, $p = .001$), (3) in 1998 and in 2015 ($z = -5.05$, $p = .000$). The results indicated a statistically significant increase in the ratings of importance of health value for the students in 2005, 2010 and 2015 comparing with the students participated in the research in 1998.

Interesting job. The pairwise comparisons indicated that there was a significant difference in students' ratings of importance of interesting job between respondents participated in the research (1) in 1998 and in 2015 ($z = -2.55$, $p < .05$), (2) in 2005 and in 2015 ($z = -2.47$, $p < .05$). The results showed that the ratings of importance of interesting job were significantly higher for the students in 1998 and in 2005 than for the students in 2015.

Love. A statistically significant difference existed in students' ratings of importance of love between respondents participated in the research (1) in 1998 and in 2015 ($z = -3.31$, $p = .001$), (2) in 2005 and in 2015 ($z = -4.03$, $p = .00$). The ratings of importance of love were significantly higher for the students in 1998 and in 2005 than for the students in 2015.

Good and reliable friends. The Mann-Whitney U test indicated a significant difference in students' ratings of importance of good and reliable friends between respondents participated in the research (1) in 1998 and in 2015 ($z = -4.29$, $p = .00$), (2) in 2005 and in 2015 ($z = -3.82$, $p = .00$), (3) in 2010 and in 2015 ($z = -2.20$, $p < .05$). The results indicated a statistically significant decrease in the ratings of importance of good and reliable friends for the

students in 2015 comparing with the students participated in the research in 1998, in 2005 as well as in 2010.

Self-confidence. It was found that there was a significant difference in students' ratings of importance of self-confidence between respondents participated in the research (1) in 1998 and in 2005 (z = -2.30, p < .05), (2) in 2005 and in 2015 (z = -4.04, p = .00), (3) in 2010 and in 2015 (z = -3.24, p = .001). The results indicated a statistically significant decrease in the ratings of importance of self-confidence for the students in 2005 comparing with the students participated in the research in 1998, and a statistically significant increase in 2015 comparing with 2005 and 2010.

Cognition. The pairwise comparisons indicated that there was the only significant difference in students' ratings of importance cognition – between the group participated in the research in 1998 and between the group participated in the research in 2015 (z = -2.67, p < .01). The results indicated a statistically significant decrease in the ratings of importance of this value for the students in 2015 comparing with the students participated in the research in 1998.

Creativity. There was a significant difference in students' ratings of importance of creativity between respondents participated in the research (1) in 1998 and in 2010 (z = -2.74, p < .01), (2) in 1998 and in 2015 (z = -2.21, p < .05), (3) in 2005 and in 2010 (z = -3.43, p = .001), (4) in 2005 and in 2015 (z = -3.19, p = .001). The results indicated a statistically significant increase in the ratings of importance of creativity for the students in 2010 and 2015 comparing with the students participated in the research in 1998 and in 2005.

Results of the comparison of the attainability of values

Descriptive statistics for the index of attainability of values and the results of the comparative analysis are presented in Table 2. The Kruskal-Wallis H test showed that there was a statistically significant difference in students' ratings of the attainability of the following values: active life (p = .00), health (p = .05), beauty of nature and art (p = .01), love (p = .05), good and reliable friends (p = .00), cognition (p = .00), happy family life (p = .05) and creativity (p = .05). For these values the follow-up pairwise comparisons (using the Mann-Whitney U test) were completed.

Active life. The pairwise comparisons indicated that there was a significant difference in students' ratings of attainability of active life between respondents participated in the research (1) in 1998 and in 2015 (z = -4.40, p = .00), (2) in 2010 and in 2015 (z = -2.76, p < .01), (3) in 2010 and in 2015 (z = -2.82, p < .01). The results showed that the ratings of attainability of active life were significantly higher for the students in 2015 than for the students in 1998, 2005 and 2010.

Table 2. The comparison of the attainability of values

| Values | The research year | | | | χ² | p |
| | 1998 | 2005 | 2010 | 2015 | | |
	Mdn (IQR)	Mdn (IQR)	Mdn (IQR)	Mdn (IQR)		
Active life	6 (5-8)	7 (6-8)	7 (5-9)	8 (6-10)	22.26	.000
Health	5 (3-7)	3 (1-6)	5 (2.75-6.25)	4 (2-6)	9.10	.028
Interesting job	5 (4-7)	5 (4-7)	6 (4-7)	5.5 (4-7)	1.05	.790
Beauty of nature and art	7 (3-9)	8 (5-10)	6 (3-9)	8 (5.25-10)	15.31	.002
Love	5 (2-7)	4 (2-7)	4 (2-6)	3 (2-5)	9.86	.020
Material welfare	3 (1-5)	3 (2-6)	4 (2-6)	3 (2-5)	7.18	.066
Good and reliable friends	6 (4-8)	7 (4-9)	6 (3-8)	4 (3-6)	23.08	.000
Self-confidence	6 (4-8)	6 (4-8)	6 (3.75-7)	5 (4-7)	6.59	.086
Cognition	8 (6-10)	9 (7-10)	7 (5-9)	7 (5-9)	26.74	.000
Freedom	6 (4-9)	7 (4-8)	5 (4-8)	6 (4-8)	3.33	.344
Happy family life	2 (1-5)	3 (1-6)	4 (1-6)	3 (2-5)	9.97	.019
Creativity	5 (2.75-8)	5 (2-8)	5 (2-8)	7 (3-9)	8.46	.037

Note. For *IQR* Q_1 and Q_3 are presented.

Health. The Mann-Whitney U test indicated a significant difference in students' ratings of attainability of health between respondents participated in the research (1) in 1998 and in 2005 ($z = -2.75$, $p < .01$), (2) in 2005 and in 2010 ($z = -2.06$, $p < .05$). The results indicated a statistically significant decrease in the ratings of attainability of health value for the students in 2005 comparing with 1998 and a significant increase for the students in 2010 comparing with 2005.

Beauty of nature and art. The results of the pairwise comparisons indicated that there was a significant difference in students' ratings of attainability of beauty of nature and art between respondents participated in the research (1) in 1998 and in 2015 ($z = -2.59$, $p = .01$), (2) in 2005 and in 2010 ($z = -2.58$, $p < .01$), (3) in 2010 and in 2015 ($z = -3.46$, $p = .001$). The ratings of attainability of this value were significantly lower for the students in 2010 comparing with 2005 and higher for the students in 2015 than for the students in 1998 as well as in 2010.

Love. A statistically significant difference existed in students' ratings of attainability of love between respondents participated in the research (1) in 1998 and in 2015 ($z = -2.96$, $p < .01$), (2) in 2005 and in 2015 ($z = -2.00$, $p < .05$). The results indicated a statistically significant decrease in the ratings of attainability of this value for the students in 2015 comparing with the students participated in the research in 1998 and in 2005.

Good and reliable friends. It was found that there was a significant difference in students' ratings of attainability of this value between respondents participated in the research (1) in 1998 and in 2015 ($z = -3.89$, $p = .00$), (2) in

2005 and in 2015 (z = -3.69, p = .00), (3) in 2010 and in 2015 (z = -3.41, p = .001). The ratings of attainability of this value were significantly lower for the students in 2015 comparing with the students in 1998, 2005 and 2010.

Cognition. A statistically significant difference existed in students' ratings of attainability of cognition between respondents participated in the research (1) in 1998 and in 2010 (z = -2.97, p < .01), (2) in 1998 and in 2015 (z = -3.55, p = .00), (3) in 2005 and in 2010 (z = -3.67, p = .00), (4) in 2005 and in 2015 (z = -4.18, p = .00). The results indicated a statistically significant decrease in the ratings of attainability of this value for the students in 2010 and in 2015 comparing with the students participated in the research in 1998 and in 2005.

Happy family life. It was found there was a significant difference in students' ratings between respondents participated in the research (1) in 1998 and in 2010 (z = -2.85, p < .01), (2) in 1998 and in 2015 (z = -2.41, p < .05). The ratings of attainability of happy family life were significantly higher in 2010 and in 2015 comparing with the students' ratings in 1998.

Creativity. A statistically significant difference existed in students' ratings between respondents participated in the research (1) in 1998 and in 2015 (z = -2.32, p < .05), (2) in 2005 and in 2015 (z = -2.15, p < .05), (3) in 2010 and in 2015 (z = -2.21, p < .05). The ratings of attainability of creativity were significantly higher in 2015 comparing with the students' ratings in 1998, in 2005 and in 2010.

Results of the comparison of levels of discrepancy between importance and attainability of values

Descriptive statistics for the level of discrepancy between importance and attainability of values and the results of the comparative analysis are presented in Table 3.

Table 3. The comparison of the level of discrepancy between importance and attainability of values

	The research year					
	1998	2005	2010	2015		
	Mdn	*Mdn*	*Mdn*	*Mdn*	χ^2	*p*
	(IQR)	*(IQR)*	*(IQR)*	*(IQR)*		
The level of discrepancy	42 (31-54)	49 (35-56)	39 (26-54)	50 (36-60)	16.00	.001

The Kruskal-Wallis H test showed that there was a statistically significant difference in levels of discrepancy between importance and attainability of values (p = .001). The pairwise comparisons were conducted using the Mann-Whitney U test. A significant difference in levels of discrepancy between importance and attainability of values existed between respondents participated in the research (1) in 1998 and in 2015 (z = -3.01, p < .01), (2) in 2005 and in 2010 (z = -2.09, p < .05), (3) in 2010 and in 2015 (z = -3.41, p = .001). The level of discrepancy between importance and attainability of values has decreased in

2010 comparing with 2005, and it has increased in 2015 comparing with results obtained in 2010 and in 1998.

Conclusions

Initially the study was conducted in 1998 among the youths whose childhood passed during the times of Socialism. The study was repeated in 2005 (in the period of economic growth and prosperity, among the youths whose childhood passed during the times of National Awakening), then in 2010 (in the post-crisis period), and in 2015 (in the period when with the support of the EU youths' opportunities of self-realization are expanded).

First, *the importance of such values as health and creativity increased, while the importance of such values as love and good and reliable friends as well as interesting job and cognition decreased.* The importance of health increased in 2015, 2010 and 2005 comparing with 1998. The importance of creativity increased in 2015 and 2010 comparing with 2010 and 1998. The importance of interesting job and love decreased in 2015 comparing with 2005 and 1998. The importance of good and reliable friends decreased in 2015 comparing with 2010, 2005 and 1998. The importance of cognition decreased in 2015 comparing with 1998. In addition, there were also some changes in ratings of the importance of self-confidence. *The importance of self-confidence decreased* in 2005 comparing with 1998 *and increased* in 2015 comparing with 2005 and 2010.

Second, *the attainability of such values as active life and creativity as well as happy family life increased, while the attainability of such values as love and good and reliable friends, as well as cognition decreased.* The attainability of active life and creativity increased in 2015 comparing with 2010, 2005 and 1998. The attainability of happy family life increased in 2010 and in 2015 comparing with 1998. At the same time, the attainability of love decreased in 2015 comparing with 1998 and 2005. The attainability of good and reliable friends decreased in 2015 comparing with 1998, 2005 and 2010. The attainability of cognition decreased in 2010 and 2015 comparing with 1998 and 2005. There were also some changes in ratings of attainability of health and beauty of nature and art. *The attainability of health decreased* in 2005 comparing with 1998, *and increased* in 2010 comparing with 2005. *The attainability of beauty of nature and art decreased* in 2010 comparing with 2005, *and increased* in 2015 comparing with 1998 and 2010.

Some patterns of changes of personal value-meaning systems of Latvian youths (e.g., the observed increase of the importance of creativity and the revealed decrease of the importance of love and friends) allows to propose that the values of Latvian youth underwent certain changes toward a more competitive and individualistic orientation.

Third, *the level of discrepancy between importance and attainability of values has decreased in the post-crisis period* (in 2010) *comparing with the results obtained in the period of economic growth and prosperity* (in 2005). However, *it has increased in the period of expanding opportunities for self-realization* (in 2015) *comparing with the results obtained in the post-crisis period* (in 2010) *and in the period of stabilizing of socially economic state of society* (in 1998). Such findings allows to propose that the expansion of opportunities make some values more attainable, however, not necessary important, and as a result, can cause meaning vacuums and internal emptiness.

The obtained results supported the expectation that there should be differences in ratings of importance and attainability of values as well as in levels of discrepancy between importance and attainability of values of Latvian youths in different periods of socio-economic development of Latvian society.

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APTAUJAS ANKETAS ATBILSTĪBA VECĀKU VAJADZĪBĀM BĒRNA HOSPITALIZĀCIJAS LAIKĀ. EKSPERTVĒRTĒJUMS

Correspondence of the Questionnaire to the Needs of Parents During Hospitalization of Child. Expert Evaluation

Madara Miķelsone

Ruta Renigere

Dagnija Gulbe

Latvija

Abstract. *Needs of parents during hospitalization of a child, during the health care process, are connected with the interaction of multilevel environment in the hospital setting. Created expert evaluation questionnaire and performed research serve as a basis for creation of the activity research questionnaire for parents of children and nurses employed in the health care field using acquired data. To heighten validity of the obtained data during each cycle of data analysis triangulated data acquisition methods were used. During research of the needs of parents during hospitalization of their child following methods of triangulation were used: data triangulation – quantitative and qualitative data obtained during research; sources: child's parents and nurses; triangulation of researchers – author of the dissertation, scientific head of the dissertation, experts; triangulation of theories – sustainability/sustainable development, ecology of human development, holistic health care model, system model; triangulation of methods – questionnaires, expert evaluations, analysis of qualitative data and thematic qualitative analysis. During research the strategy of triangulation contains use of several sources of information. Relatively autonomous research methods give purposeful answers to the research questions on needs of parents during hospitalization of a child. Data obtained during activity research indicate ability of the parents and health care teams to satisfy their needs.*

Keywords*: activity research, expert evaluation, strategy of triangulation.*

Ievads
Introduction

Veselības aprūpes procesā vecāku vajadzības bērna hospitalizācijas laikā, ir saistītas ar daudzlīmeņu vides mijiedarbību stacionāra vidē un jaunu neierastu sociālu, kognitīvu un emocionālu pieredzi (Tondi, 2010; Moghaddam etal., 2011).

Bērna hospitalizācijas mērķis ir slimības diagnostika, ārstēšana un veselības aprūpe, kuras laikā veidojas sarežģīts savstarpējo attiecību tīklojums ar veselības aprūpes komandu. Vecākiem un bērnam šajā neierastajā stacionāra vidē ir jāapgūst jaunas socializācijas iemaņas, jāapgūst zināšanas un iemaņas, lai spētu uztvert, saprast jaunu informāciju un piedalītos veselības aprūpes procesā. No ierastās drošās mājas vides vecāku un bērna vajadzības un ieradumi jāspēj

pielāgot un transformēt atbilstoši stacionāra videi, hospitalizācijas laikā, lai nerastos atsvešinātība un tiktu saņemts atbalsts no tuviniekiem, veidotos līdzestība un sadarbība atveseļošanās procesā (Macdonald et al., 2012; Avis & Reardon 2008).

Ekspertvērtējuma mērķis ir noteikt izveidotās aptaujas anketas atbilstību vecāku vajadzībām bērna hospitalizācijas laikā.

Pētījumu teorētiskais pamatojums
Theoretical Basis of the Research

Lai noteiktu vecāku vajadzības bērna hospitalizācijas laikā: teorētiskais pamatojums veidots (1.att.), balstoties uz trīs pamatkonstrukcijas bloku mijiedarbību: 1) U. Bronfenbrennera (Bronfenbrenner, 1979) cilvēka attīstības ekoloģijas modeli, kas raksturo procesa – personas – konteksta – laika sistēmu, 2) B. Ņumenas (Neuman, 1982) veselības aprūpes sistēmas modeli, kurā strukturēti definēti personas iekšējās un ārējās vides sistēmas mijiedarbība, 3) ilgtspējība/ ilgtspējīga attīstība (*sustainability/ sustainable development)* veselības aprūpē (Izglītība pārmaiņām, 2008).
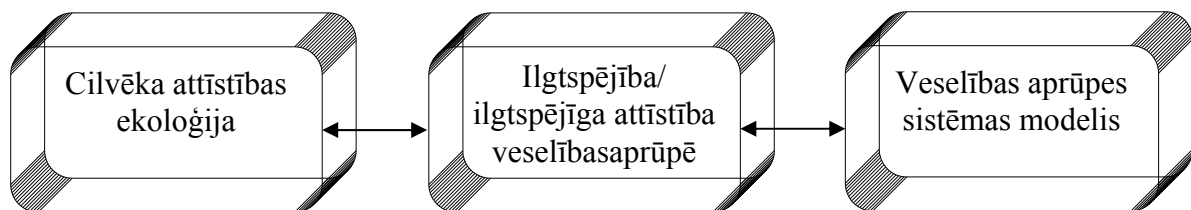
1. attēls. Teorētiskā pamatojuma pamatkonstrukcijas bloki
Figure 1. Building Blocks of Theoretical Basis

Ilgtspējīgas attīstības koncepcijas skaidrojumā akcentēts *augsts izglītības līmenis* un *laba veselības aprūpe*, kas ir sasniedzama, ja tiks veidota informēta sabiedrība un uzsvērta izglītības nozīme un vērtība, kā arī svarīgs aspekts ir iesaistīt sabiedrību procesos, pieņemot lēmumus. (Römpczyk, 2007). Ilgtspējīgas attīstības koncepcijas skaidrojums aktualizē jēdzienus – *attieksmes maiņa*, *vides apziņa*, *uzvedība*, *atbildība* un *vērtības*, kuri ietilpst medicīnas māsas profesionālās kompetences komponentu raksturojumā (UNESCO report for Education for the 21st Century, 1997).

Veselības aprūpes komandas spēja profesionāli saskatīt un radoši risināt vecāku vajadzības stacionāra vidē, nosaka izglītības kvalitāte, zināšanas, prasmes un profesionālās kompetences komponentu prezentācija veselības aprūpes procesā

Pētījuma empīriskās metodes
Empirical Research Methods

Lai paaugstinātu iegūto datu validitāti, nosakot vecāku vajadzības bērna hospitalizācijas laikā triangulētas datu ieguves metodes ikvienā datu analīzes ciklā.

Triangulācijas pētniecības metodes metodoloģija ir interpretatīva un konstruktīva, tai piemīt zināmas subjektivitātes pazīmes, tai pat laikā, tās sniedz plašākas iespējas pētniekam izpētīt un atklāt fenomena būtību, ietverot tajā kontekstu un dalībnieku pārdzīvojumus, kā arī alternatīvus atklājumus, panākot rezultātu saskaņotību, integrējot rezultātus, kas iegūti no dažādiem datu avotiem (VanDrie, Dekker, 2013; Oleinik, 2011; Ma, Norwich 2007; Thurmond, 2001).

Nosakot vecāku vajadzības bērna hospitalizācijas laikā triangulācijas stratēģija ietver vairāku informācijas avotu izmantošanu. Relatīvi autonomās pētījumu metodes mērķtiecīgi sniedz atbildes uz pētījuma jautājumiem.

N. Denzins (*Norman K. Denzin*) un M. Patons (*Mark Patton*) izdala četrus triangulācijas veidus:

1) *teoriju triangulācija* – ilgtspējība/ilgtspējīgas attīstības koncepcija, cilvēka attīstības ekoloģijas modelis, veselības aprūpes sistēmas modelis;

2) *pētnieku triangulācija* – promocijas darba autore, darba zinātniskais konsultants, eksperti;

3) *datu triangulācija*– kvantitatīvie un kvalitatīvie dati, kas iegūti pētījuma laikā; avoti: studenti, medicīnas māsas, docētāji;

4) *avotu triangulācija* – dažādu datu avotu konsekvences izpēte vienas metodes ietvaros:
   - dažādos laika momentos;
   - sabiedriskā un privātā vidē;
   - salīdzinot cilvēkus, kuriem ir dažādi uzskati (Denzin, 1978, 2006; Patton, 1999, 2001).

Dž. Džanks *(JulianJunk)* uzsver, ka triangulācijas metode seko pētījumu *vertikālai loģikai,* kas atbilst vecāku vajadzībām bērna hospitalizācijas laikā. Tas nozīmē, ka datu vākšana un analīze notiek vienlaicīgi, un pietuvināšanās fenomens raksturo izpēti no dažādam pusēm (Junk, 2011).

Darbības pētījumā iegūtie dati nosaka vecāku vajadzības bērna hospitalizācijas laikā unveselības aprūpes komandas spēju nodrošināt vajadzības, kas atbilst avotu un datu komplementaritātes triangulācijas veidam.

Ekspertvērtējums uzskatāms par avotu triangulācijas veidu, jo tā īstenošanāpiedalījās 10 eksperti ar atšķirīgu personīgo pieredzi, izglītības līmeni un pieredzi bērnu veselības aprūpē stacionāra vidē.

Ekspertpētījuma respondentu izvēles raksturojums
Characterization of Respondents of the Expert Evaluation

Aptaujas anketas ekspertvērtējumā piedalījās divi ārvalstu eksperti no ASV un Somijas, lai izzinātu citu valstu pieredzi vecāku vajadzību apmierināšanā stacionāra vidē un medicīnas māsu profesionālās kompetences komponentu svarīguma novērtējumā.
   - 10 eksperti vecumā no 41 līdz 70 gadiem (vidējais vecums 49 gadi);

- pieredze medicīnas māsu izglītībā un veselības aprūpē no 18 līdz 50 gadiem;
- bērnu veselības aprūpē no 10 līdz 22 gadiem.

Ekspertvērtējuma pētījuma metodoloģija
Methodology of the Expert Evaluation Research

Ekspertvērtējuma aptaujas anketa izveidota divās daļās, kurā ietverts plašs atvērtu jautājumu loks, kas izgaismo vecāku vajadzības bērna hospitalizācijas laikā.

Pirmajā daļā:
- pašpieredze atrodoties stacionārā kopā ar bērnu un tekstuāls vecāku vajadzību apraksts;
- profesionālās kompetences komponenti, kuri jānovērtē 10 ballu skalā un komentārs par komponentu svarīgumu.

Otrajā daļā – ekspertu komentārs izveidotai bērna vecāku anketai.

Ekspertu sniegtā vērtējuma par medicīnas māsu profesionālās kompetences komponentu nozīmīgumu, ievērošanu un aktualizācijas nepieciešamību analīze balstīta uz tādām statistikas metodēm kā Pīrsona korelācijas koeficients (Pearson Correlation) un sapārotu paraugkopu t-tests (Paired Sample t-test).

Ekspertu sniegtais vērtējums par medicīnas māsu profesionālās kompetences komponentu nozīmīgumu, ievērošanas pakāpi un aktualizācijas nepieciešamību, balstoties uz vidējo aritmētisko aprēķinu, apkopots 1. tabulā.

1. tabula. Medicīnas māsu profesionālās kompetences komponentu novērtējums
Table 1. Assessment of Components of Nurses' Professional Competence

Profesionālās kompetences komponenti	Nozīmība (0-10 balles)	Tiek ievērots (0-10 balles)	Jāaktualizē (0-10 balles)
attieksme	10.0	6.2	9.9
dotības/spējas	7.8	6.6	8.3
empātija	9.5	6.6	9.2
gribasspēks	8.0	6.6	8.3
inovācija	7.8	6.6	7.7
kritiskā domāšana, refleksija	10.0	7.6	8.4
motivācija	9.7	7.2	9.7
pieredze	9.5	6.4	8.3
prasmes	9.9	7.5	9.3
radošums	7.8	6.8	7.3
sadarbība	9.6	8.2	9.4
vērtības	8.3	7.2	8.3
zināšanas	10.0	8.1	9.6

Iegūtie rezultāti norāda, ka nozīmīguma skalā visaugstāk tiek vērtēti tādi komponenti kā attieksme, kritiskā domāšana un refleksija, savukārt viszemāk tiek vērtētas dotības/spējas, inovācija un radošums, ko var raksturot ar faktu, ka

veselības aprūpes process ir pamatots standartos un reglamentēts vadlīnijās atbilstoši katras valsts veselības aprūpes likumdošanai.

Ekspertu norādītie vērtējumi komponentu ievērošanas skalas ietvaros, kas ir zemāki, salīdzinot ar nozīmības un aktualizācijas skalām, norāda, ka visaugstāk tiek ievērota sadarbība un zināšanas, savukārt viszemāk - attieksme.

No minētajiem profesionālās kompetences komponentiem visvairāk aktualizēt ir nepieciešams tādus komponentus kā attieksmi, motivāciju un zināšanas.

Izvērtējot medicīnas māsu profesionālās kompetences komponentu novērtējuma skalu savstarpējās saiknes ciešumu, pielietojot Pīrsona korelācijas koeficientu, var secināt, ka pastāv cieša, lineāra, pozitīva, statistiski ticama korelācija starp **dotību** nozīmes un ievērošanas skalu (r=0,89, p=0,001), **empātijas** nozīmes un aktualizācijas skalu (r=0.80, p=0.005), **gribasspēka** nozīmes un aktualizācijas skalu (r=0,65, p=0.04), **inovācijas** nozīmes un aktualizācijas skalu (r=0,98, p=0.000), **prasmju** nozīmes un aktualizācijas skalu (r=0.76, p=0.01), **radošuma** nozīmes un aktualizācijas skalu (r=0,93, p=0.000), **sadarbības** nozīmes un aktualizācijas skalu (r=0.87, p=0.001), **vērtību** nozīmes un aktualizācijas skalu (r=0.96, p=0.000), kā arī cieša, negatīva, statistiski ticama korelācija starp **kritiskās domāšanas** ievērošanas un aktualizācijas skalu (r=-0.87, p=0.001).

Izvērtējot statistiskās ticamības rādītājus starp nozīmes un aktualizācijas skalu rādītājiem, pastāv statistiski ticama atšķirība tikai kritērijam **pieredze** (t=2.88, p=0.01), ko pamato salīdzinoši zemais aktualizācijas nepieciešamības vērtējums.

Statistiskās ticamības rādītāji starp nozīmes un ievērošanas skalu vērtējumiem apkopoti 2. tabulā.

2. tabula. Statistiskās ticamības vērtējumi nozīmes un ievērošanas skalām
Table 2. Evaluation of Statistical Credibility of Importance and Observance Scales

Profesionālās kompetences komponenti	t	p
Attieksme (nozīmība/tiek ievērots)	10,585	,000
Dotības (nozīmība/tiek ievērots)	2,882	,018
Empātija (nozīmība/tiek ievērots)	6,692	,000
Gribasspēks (nozīmība/tiek ievērots)	2,806	,021
Kritiska domāšana (nozīmība/tiek ievērots)	3,882	,004
Motivācija (nozīmība/tiek ievērots)	3,213	,011
Pieredze (nozīmība/tiek ievērots)	6,146	,000
Prasmes (nozīmība/tiek ievērots)	14,697	,000
Sadarbība (nozīmība/tiek ievērots)	2,806	,021
Zināšanas (nozīmība/tiek ievērots)	4,385	,002

Atšķirības iepriekš minētajiem kritērijiem skalu ietvaros var raksturot ar salīdzinoši zemu vērtējumu kompetences komponentu ievērošanas skalā, līdz ar to iegūtie rezultāti norāda, ka medicīnas māsām profesionālās kompetences

komponentu svarīgums stacionāra vidē būtu jāpilnveido profesionālās tālākizglītības pilnveides studiju kursos.

Ekspertu komentāri atbilstoši vecāku vajadzībām stacionāra vidē:

E1 Lai veicinātu sadarbību ar veselības aprūpes komandu svarīgi vecākiem iegūt maksimāli daudz informācijas, arī par atpūtas iespējām un klātbūtni ar bērnu, nodrošinātas elementāras higiēnas ievērošanas iespējas.

E2 Lai būtu laba komunikācija ar personālu un iespēja atrasties kopā ar bērnu.

E3 Vecāku klātbūtne jebkurā vecumā bērnam ir svarīga, lai nodrošinātu drošības sajūtu, kas savukārt palīdz aprūpes procesam norisināties veiksmīgi, tādēļ arī vecāku vajadzībām, atrodoties pie bērna stacionārā, ir ļoti svarīgi pievērst uzmanību, jo lai nodrošinātu elementāras lietas neprasa papildus finansējumu.

E4 Vissvarīgākā ir saprotama informācija un tās izskaidrojums, komunikācija – iespēja uzdot jautājumus un saņemt paskaidrojumus par bērna veselības stāvokli un tā izmaiņām, izmeklējumiem, medikamentiem, procedūrām utt.

E5 Vecāku vajadzības stacionāra vidē nosaka bērna slimības smagums, uzturēšanās ilgumu un ikdienas ieradumi mājas vidē. Neierastā stacionāra vide ir papildus emocionāls un fizisks slogs vecāku līdzdalībai bērna atveseļošanās procesā.

E6 Vecāku vajadzības ir atkarīgas no vecāku informētības un zināšanu līmeņa.Iestājoties stacionārā jābūt pietiekamai informācijas pieejamībai (iekļaujot iespējamos apmaksas izdevumus), lai mazinātu vecāku trauksmi.

E7 Vecākiem noteikti svarīga ir saprotama informācija, kas ar bērnu notiek, diagnoze, ārstēšanas iespējas, informācija par nozīmēto ārstēšanu. Ja sarežģīta ārstēšana – iespējamās alternatīvas, riski, ieguvumi, pats process – kā noritēs, kāds būs atveseļošanās periods. Kontakta iespējamība, ja ir neskaidri jautājumi, drošības un empātijas sajūta. Skaidri saprotami nodaļas iekšējie kārtības noteikumi. Komforts un atbalsts, ja bērns jāatstāj uz kādu brīdi.

E8 Jānodrošina vecākiem emocionāls atbalsts, atļaut dalīt atbildību par bērnu. Viņiem nepieciešama visa pieejamā informācija, lai iesaistītos lēmumu pieņemšanā. Nepieciešams ieklausīties vecākos un respektēt viņu viedokli. Vecākiem jānodrošina iespēja būt kopā ar bērnu.

E9 Problēma lielākoties ir tā, ka šī informācija ir nepieciešama jau pirms stāšanās nodaļā, sagatavošanās procesā vai ja stājas akūti, tad pirmajā piemērotajā brīdī. Jo stresu un nedrošības sajūtu rada tas, ka es kā vecāks nezinu, kas un kā konkrēti notiks un sekos.

E10 Ir grūti un dažreiz neiespējami visu iepriekš paredzēt, bet ja informācija pie vecākiem par plānoto notikumu secību nonāktu ātrāk nevis darba procesa gaitā, tas krietni paaugstinātu šo vajadzību apmierinātību.

Secinājumi
Conclusions

1. Apkopojot un analizējot komentārus neatkarīgi no eksperta personīgās vai profesionālās pieredzes veselības aprūpē, var secināt, ka komunikācijas un saskarsmes prasmes ir noteicošās veiksmīga veselības aprūpes procesa vadīšanā.

2. Medicīnas māsu profesionālās kompetences komponentu nozīmības, ievērošanas un aktualizācijas darbības pētījumā iegūtie rezultāti liecina, ka *zināšanas, attieksme* un *kritiskā domāšana, refleksija* ir novērtēta ar 10 ballēm, kas pēc ekspertu vērtējuma ir vieni no noteicošiem komponentiem vecāku vajadzību apmierināšanai bērna hospitalizācijas laikā.

3. *Radošums, inovācija* un *prasmes/spējas* novērtētas 10 ballu skalā ar 7 ballēm, kas norāda uz ekspertu viedokli par stingru vadlīniju un veselības aprūpes standartu ievērošanas nepieciešamību, lai gan nereti veselības aprūpes procesā ir neprognozējamas nestandarta situācijas, kurās medicīnas māsai ir svarīgi pieminētie profesionālās kompetences komponenti

4. Ekspertvērtējuma dalībnieki vienprātīgi uzsver pētījuma aktualitāti un nozīmību vecāku vajadzību apmierināšanā stacionāra vidē un izveidotās anketas atbilstību turpmākiem pētījumiem.

Summary

To increase the validity of the data obtained in determining the needs of parents during child's hospitalization data triangulation methods were used for data analysis in each cycle.

Expert evaluation can be regarded to source triangulation, because in expert evaluation participated 10 experts with different personal experience, level of education and experience in child health care in hospital setting. Two experts were from Finland and one expert from USA, with the aim to explore the experience of other countries in meeting the needs of parentsduring child's hospitalization.

Expert evaluation questionnaire consisted of 2 parts. First part included self-experience assessment during hospital stay with the child and nurses professional competency components that had to be assessed within three 10 point scales. Second part included expert commentaries for established parent's questionnaire.

After summarization and analysis of commentaries independently of expert's personal or professional experience within the fields of health care, it can be concluded that skills of communication are crucial in management of successful health care process. Results obtained during research of importance, observance and actualization of components of nurses' professional competence indicate that knowledge, attitude and critical thinking, reflection are evaluated with 10 points, according to the expert evaluation these are one of the crucial components for satisfaction of needs of parents during hospitalization of a child. Creativity, innovation, and skills/abilities are evaluated as 7 points out of 10 indicating an experts' opinion on necessity of observation of strict guidelines and health care standards, even though during health care process unpredictable non-standard situations are quite common, and then abovementioned components of professional competency are important for the nurse. Participants of the expert evaluation unanimously stress urgency and importance of the research for satisfaction of needs of parents within the hospital setting and validity of the created questionnaire for further research.

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STUDENTS EMOTIONAL STATE DURING RECREATIONAL SKIING

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Abstract. The aim of the research was to evaluate emotional state before, after and in the next day after the ski hiking. The distance was 24 km and lasted 8 hours. To assess the ski hiker's emotions the following 3 tests were conducted – before the ski hike, after the ski hike and 16 hours after the hike. Emotional state was set by the two different methods. One included assessing participant's dynamic of emotional state with subjective measurement using questioner, but other using subjective method by analyzing person's facial expressions. The results showed improved emotional state in both ways. Although, using objective method, improved positive emotions were more in the next day of the ski hike.

Keywords: ski hike, emotional state.

Introduction

Different kinds of recreation activities, which are helping to restore emotional levels, are becoming more and more popular. Running competitions in spring, summer and autumn periods, as well as skiing in winter attract more and more competitors and spectators. For example most popular mass skiing event in the world Vasaloppet (15 800 skiers allowed to take part) was sold out in only 80 seconds this year. Lot of the first rows skiers are professionals and skiing to be as fast as possible. Rest of them are recreational skiers and their main purpose is to be in the event, to finish and raise their emotional level. But in the same time it often happens that competitors underestimate their abilities and crushes in physically, but mainly psychologically.

Recreation activities as is our ski hiking are more effective recreation activity. There is no time hurdle in people's heads, which interfers to experiencing recreation feelings in skiing and mass running competitions. Skiing nowadays is mainly performed as competitions or as recreational activities (Bergh, 2000). If skiing is used as recreational activity it should fulfil the main function of recreations – improve emotional state (Grants, 2011).

Emotions (from Latin: emovere - to excite, thrill) are a humans and animals subjective responses to effect of internal and external irritant. Emotions are closely linked to the individual's current needs. Psychological basis of emotions is diverse and congenital self-regulation mechanisms of central nervous system

which stereotypically reflects individual's attitude to problem situations or a specific event (Eckman & Friesen, 2003).

English sport psychologist Lane notes, that there is not one clear definition of emotions, but agrees the theory that emotions are reaction on incentive, which is sometimes real or imagined. This definition is wide spread in field of sport psychology science (James, 1994). Definition makes connection with imagination. Human body don't separate events which are happening in real life or in imagination. Corresponding physiologic reactions takes place in both occasions Calvo & Lunqvist, 2008).

K. Izard has developed a theory of emotion differentiation and considers that there are 10 indigenous types of emotions - joy, interest, surprise, sorrow, anger, disgust, contempt, fear, shame, guilt (Schiano et. al., 2000). There are different theories of emotions, one of often used is theory of six basic emotions - happiness, surprise, anger, fear, sadness, disgust, in the same time each emotion has universal gesture, but one emotion can include a number of mimic expressions. There is conflicting data on whether contempt, interest, shame and guilt have universal facial expressions. He also does not recognize the distribution of emotions in positive and negative, because sometimes person when feeling disgust (negative emotions) actually feels comfortable and superior over others. Others in the same time cry, when watching TV with pleasure. It means that very rarely person feels one concrete emotion; often it is complex of emotions (Eckman & Friesen, 2003).

To assess the level of emotions mainly psychological tests are made and participant's emotional levels of participants are set on information of participant's subjective opinion. In the same time there is apparatus which can assess individual's emotions by reading face. Special program analyzes 500 points in persons face. This method allows making objective assessments of individual's emotional state. By connecting these two methods we set emotional level of ski hikers before, after and in next day after ski hike. Does emotional state after long recreational activity is raised right after ski hike our in the next day were main findings. And does participants subjective assessment of emotions are similar to objective method.

As well as rising up the theory of six basic emotions, Eckman is suggesting universal gestures for each emotion, but at the same time inferring that there are many forms of expressions. Eckman also studied what kind of gestures happen in people's face when experiencing different emotions unconciously. Different kinds of emotions have optimal zones for identification. For example emotions when feeling sad our scared are identified more easily in eye area if compared with lower area of face. Expression anger – calmness is easily set in area of forehead and eyebrows. Other expressions such as happiness, disgusted are set more often according to changes in lower face area. (Eckman, 2003)

The theories of Eckman studies used as base in the FaceReader 3.0 apparatus which we used in our study (FaceReaderTM, 2010).

The organisation of the research was made in three stages. In preparation stage the distance and route of ski hike was planned. In second stage – testing of emotional state and retesting of emotional state 1 hour after hike and in the next day - 16 hours after the hike. In the last stage video analyses were made to set levels of emotions using FaceReader 3.0.

The distance of the ski hike was 24 km and it was 8 hours long. The first 3.5 hours of the ski hike were skiing, then 1 hour for rest and for lunch and again 3.5 hours of skiing. The degree of difficulty was average for the hike.

Testing of emotional state

To assess the emotional level before ski hike and determine the dynamics of those indicators after ski hike, testing of emotional state were made. The procedure was carried out using FaceReader 3.0 (developed by Noldus Information technology - Netherlands) and Sport Emotion Questioner (SEQ). The basics of FaceReader 3.0 program is live analysis of facial expressions during interview. The program consists of six basics emotions (by P. Eckman) - happy, sad, angry, surprised, disgusted, scared and the state when there is no emotions in face – neutral. The testing of emotional state was made 3 times – before the ski hike, 1 hour after the ski hike and next day -16 hours after the ski hike.

Survey

After each testing of emotional state ski hikers were asked to fill in the Sport Emotion questionnaire (SEQ). This includes 22 emotions and respondent have to value them in 5 levels - not at all, a little, moderately, quite a bit, extremely. After summing up all the answers, the count of points shows the level of anxiety, dejection, excitement, anger, and happiness (Jones et. al., 2005).

Participants

Seven first year master level students from Latvian Academy of Sport Education (LASE) took part in research – 5 women and 2 men – aged diapason 24-35 years. The skiing experience among participants varied.

Data Analysis

Data analyses were made with data from the FaceReader 3.0 apparatus and from video analyses. To assess the dynamics of those data Student's criterion for related groups were used.

Results

The FaceReader 3.0 apparatus is made by principles of P. Eckman six base emotions theory. During the testing apparatus reads intensity of the six base emotions and the neutral state, when emotions are not read. The intensity of emotions during the test is given in form of numbers – results show the percents of test time when exact emotions were recorded.

Dynamics of the emotional state were set by three following tests – before the ski hike, after the ski hike and 16 hours after the ski hike in the next day. As mentioned before, recreational activities should improve individual's emotional state. When using FaceReader 3.0 apparatus one of the states given is neutral. It is the state of facial expression when five basic emotions aren't so dominant. This state shows that no positive or negative emotions are read in test participant's face. By assessing this state, we can see if person became emotional. If the results show decrease in neutral state, it means that rest of emotions are dominant. In our study this connection was observed.
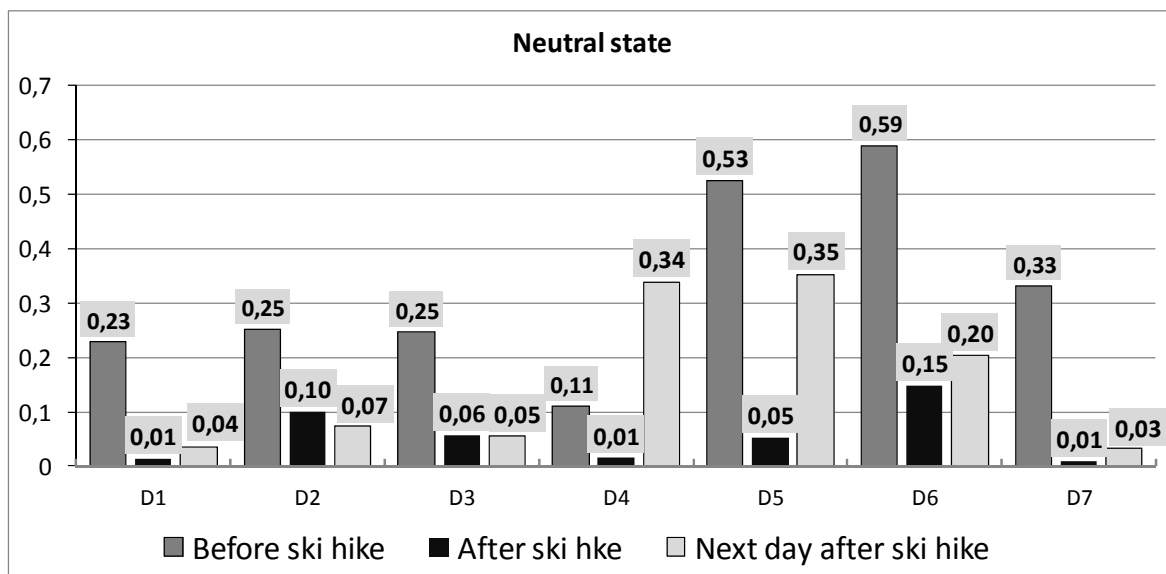

Figure 1. Dynamics of neutral state

Figure 1 shows the dynamics of emotional state – neutral. Results showed significant decrease of time when neutral state was registered. They decreased right after ski hike and were lower in testing procedure in next day after the ski hike if compared with results before hike. It is related then with effect of our ski hike as recreational activity. Participants were more emotional right after ski hike and effect maintained in next day as well. It also can be conclude that ski hike made an impact on emotional state, but from here it cannot be concluded that it was positive effect. Additional emotions are positive and negative as well so further analysis was necessary. Increased emotional state can be on negative emotions as well and that means negative effect of such kind recreational activity.

Figure 2 shows group collective average results of emotions by emotion category. Results show that before the ski hike 33% of test time participants face show neutral state – no positive or negative emotions as mentioned before. Positive emotions (happy and surprised), before the hike is 20% and 12% respectively from test time. Negative emotions (sad, angry, scared and disgusted) make 19% of the test time. In the second testing neutral state is only

6% of the test time – it means that mainly positive or negative emotions are mostly read. The level of positive emotions is down after the ski hike – 10% and 8% respectively of the test time. In the same time level of negative emotions is already 51% of the test time.

The third test time – 16 hours after the hike in the next day – was chosen not even to set the dynamics of emotions, but to confirm that positive emotions will be read mostly in the next day after the ski hike. As it seen the level of neutral state is 16% - almost two times lower than before hike. Emotional state – happy is already 16% from the test, which is higher than immediately after hike. Results in negative emotions are lower and in two cases they are even lower than before the hike.
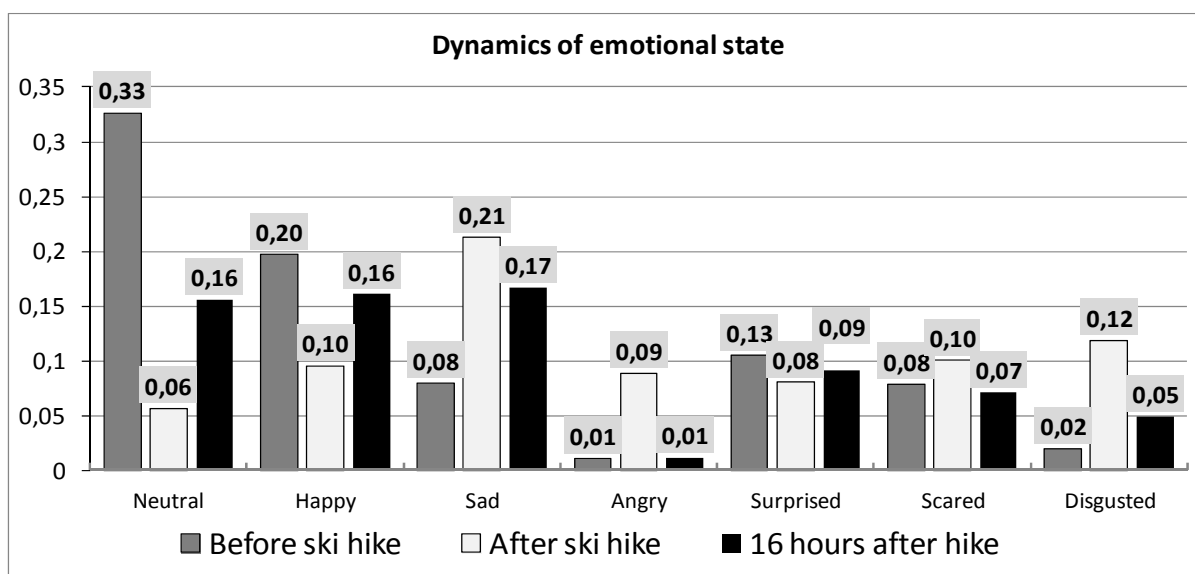

Figure 2. Dynamics of emotional state

After having sum up the results from objective emotions reading method using FaceReader 3.0, it could be concluded that right after the hike participants show more base emotions. Right after the ski hike negative emotions are in charge, but in the next day, 16 hours after the hike there is positive emotion dominance. It could be because of fatigue right after the ski hike, so in further research we suggest to test emotions during the next day. The dynamics of positive emotions show a tendency to getting higher and higher. Testing using objective method seems to prove positive effect on emotional state and positive emotions, when recreational activity is made by ski hike.

After the testing of FaceReader 3.0 participants were asked to fill in the Sport Emotion Questionnaire (SEQ), which shows the subjective assessment of emotions. The results are different from FaceReader 3.0 tests. If before the ski hike there are some signs of negative emotions, than right after the ski hike negative emotions have disappeared and the level of positive emotions are in the highest possible level. (Fig. 3)
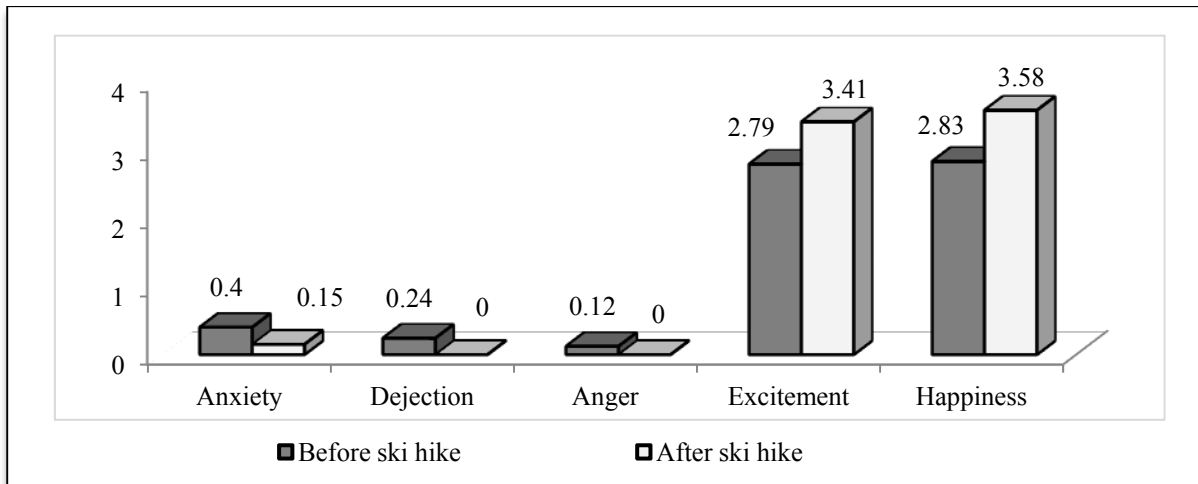
Figure 3. Subjective assessments of emotions (Sport Emotion Questionnaire)

Dynamics of emotional state shows some important things. Testing using the objective method showed an increase in level of six base emotions after hike and which means that the level of emotions increased. It happened because of increase in negative emotions although. The reason of that could be the fatigue in participants face. In the same time tests 16 hours after the ski hike showed an increase in positive emotions and decreased in negative. Subjective assessment of emotions showed positive increase of emotions right after the ski hike. So when put together both testing procedures we can conclude that such recreational activity as ski hike improved participants emotional state. Person's subjective assessment of their feeling is in our opinion the most important thing after the recreational activity. If in sport the quality criteria mainly is the result, than in recreational activities the quality criteria is improved emotional state and positive emotions.

Discussion

After summing up all the results there were few recommendations for ski hikers and ski hike organizers made. The base of recommendations is results of our research. So basically when going in ski hiking or organizing a ski hike for 6-12 people it could be helpful to take the things we recommend in mind.

After going in a prolonged ski hike (6-8 hours) positive influences on the emotional state will be seen only in next day after hike. Right after the hike, negative emotions are in dominance and to avoid this situation we recommend at the end of the hike pay greater attention to activities which could give positive effect on the emotional state. For example, 1 hour before the end of the hike includes teambuilding games, different plays our downhill ride up to situation of course.

Testing of emotional state after recreational activities isn't wide spread. One research showed similar results as our study. Research dealt with 45-55 old

people. They were asked to go on Nordic walking, skiing or biking with intensity of 50-60% of their heart rate maximum. They tested participant's emotional state and endorphin level. Like in our research emotional state were significally improved only after 60 minutes of exercise. Main finding in this research was raised endorphin level as well. As it is known higher endorphin level indicates higher happiness (Kundzina & Grants, 2014).

Conclusions

During the testing of emotional state the following dynamics were set:
Emotional state – Neutral – was 27% lower after and 17% lower 16 hours in the next day after the ski hike. Results showed that emotional levels were changed. After the ski hike there were more of 6 base emotions in ski hiker's face. One hour after the ski hike more negative emotions (sad, disgusted) were read but 16 hours afterwards these indicators are going down and more positive emotions are read. Subjective assessment of emotional state (Sport Emotions Questionnaire (SEQ)) shows positive influence on the ski hiker's emotions – negative emotions are reduced and positive emotions raised.

Our research showed positive effect on increased emotional state after ski hike. Both testing methods showed that ski hike is very appropriate recreational activity and emotional state will be improved. In the same time it is always good to remember about good planning and suitable pace.

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EXPLORING THE ASSOCIATION BETWEEN ADOLESCENTS PARTICIPATION IN SPORT AND THEIR ATTACHMENT TO PARENT AND PEER

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Abstract. *This qualitative cross-sectional design study examine the association between adolescents' participation in sports activities and their attachment with parents and peers. A total of 1348 (716 female and 632 male) aged 12 to 16 completed questionnaire assessing attachment with parent and peer (trust, communication, alienation). This study showed that adolescents not participating in sports scored significantly lower on all Parent Attachment subscales when compared to adolescent athletes. The research also revealed that participation in sports has an effect on both Trust in Peers and Alienation from them. Boys scored significantly higher than girls did on Trust and Alienation with parents, while girls scored significantly higher than boys in terms of Peer attachment. Younger adolescent scored significantly higher on the Parent Attachment scale whereas senior adolescents scored higher on Trust with Peer.*

Keywords: *adolescent attachment with parents, attachment with peer, participation in sport, positive youth development in sports.*

Introduction

One of the most important and significant theories in psychology that explores human behavior and emotion development is the *Attachment Theory*. Bowlby (1969) and Ainsworth, Blehar, Waters and Wall (1978) Attachment Theory claims that the psychological and behavioral effects of early parent-child relationship will affect the development of close relationships with other people in the future. According to the data of various researches, secure attachment develops in a child when parents take care of the child with affection and are psychologically and physically accessible to him or her. Consequently, the child feels accepted, understood, valued, and he or she is able to maintain affectionate relationships both within and beyond the family (Zbarauskaitė, 2011). These children are can also be identified by their ability to control negative emotions (Gentzler et al., 2014), to interact with parents (Cai et al., 2013), and to interact with peers (Dykas et al., 2008). Children develop an insecure type of attachment when parents do not accept the child's emotions and needs, are insensitive, or are trying to over-control the child. In cases such as these, a child learns to disregard emotions and, in an attempt to avoid upsetting his or her parents, the child seeks to communicate less with them. In adolescence, these children underestimate the importance of emotions and feelings in a relationship

(Zbarauskaitė, 2011). Insecurely attached children often have communication and behavioral problems (Van Petegem et al., 2013. The importance of secure attachments becomes prominent in adolescence when psychological and social changes due to the transfer from childhood to adulthood are taking place (Nawaz, 2011).

As adolescents spend increasing amounts of time away from their parents, the development of their personality is substantially impacted not only by their family life but also by peers (Arnon et al., 2008). For adolescents, it is essential to establish new or to strengthen the already existing relationships with peers (Nawaz, 2011). The environment of peers provides not only emotional support but also recognition, which is essential for the development of identity (Abraham & Kerns, 2013).

In terms of leisure activity, researchers emphasize that sports activities are one of the most common forms of extracurricular activity among adolescents (Tomik et al., 2012). Previous research has revealed a range of positive effects that sports activities have on personality development in children. For instance, one study demonstrated that students' involvement in sports is negatively associated with student smoking (Fredricks & Eccles, 2010). Additionally, more than other types of extra-curricular activities, sports contribute to better relations with peers (Malinuevo et al., 2010) and social competency (Carreres-Ponsoda et al., 2012).

Although the choice of sports activities can be based on a variety of reasons (Bailey, Cope& Pearce, 2013), the family also plays an important role (Clarke & Harwood, 2014). Children's engagement in sports can change their parents' attitudes towards sports activities, encourage them to be interested in sports, change family communication, allow parents to get acquainted with the new friends of their children, and may affect family leisure activities (Dorsch et al., 2009).

Considering the fact that there is a lack of research dealing with the attachment of adolescents to their parents and peers, especially in relationship with involvement in leisure sports activities, the aim of this study was to examine the links between adolescents' participation in sports activities and their attachment to parents and peers. The study also sought to establish adolescents' attachment with parent and peer considering the aspects of gender and age. We hypothesized that the attachment to parents and peers differs if adolescents who are involved in sports are compared to those who do not practice any sports. i.e., expression of relationship with parents and peers would be more prominent for adolescent athletes comparing with those adolescents who do not participate in sports. We also hypothesized that the attachment to parents and peers varies depending on the age and gender of an adolescent subject.

Methods

Participants. A random sample of school students aged 12 to 16 residing in Kaunas District (one of the largest in the country) was produced. Seven schools of general education within the Kaunas District were selected to participate. As a result, data from 1348 questionnaires was gathered. The student data collected in terms of gender are as follows: $N_{females}$=716; N_{males}=632) and age (N_{aged12}= 243; N_{aged13}= 219; N_{aged14}= 238; N_{aged15}= 277; N_{aged16}= 371. In examining the data, the research subjects were divided into two age groups: early adolescent aged 12 to 14 (n=700) and middle adolescent aged 15 to 16 (n=648).

Measures

Children attachment to their parents and peers was researched on the basis of the modified Inventory of Parent and Peer Attachment (IPPA) – *Inventory of Parent and Peer Attachment - Revised* (IPPA-R) (Gullone & Robinson, 2005).

The questions included in the inventory assess the positive, negative and cognitive effects dimensions of adolescents' relationships with their parents and close friends. The positive effects are clearly expressed in the questions, such as: *"My parents respect my feelings", "My friends accept me as I am"*. The negative results of relationships are revealed in such questions, for example: *"I feel angry with my parents", "I wish I had different friends"*. The cognitive ones are conveyed with the ideas: *"My parents help me understand myself better", "I can count on my friends to listen when something is bothering me"*.

For each of the twenty-eight items assessing parent attachment and the twenty-five items assessing peer attachment, respondents are required to rate the degree to which each item is true for them on a three-point scale ranging from "Almost always or always true" to "Almost never or never true." The items in each of the scales (i.e. parent, peer) were divided into three factors (trust; communication; anger and alienation). The total score for each of the IPPA-R Parent and Peer Attachment scales was calculated by obtaining a sum of the Trust and Communication subscales and then subtracting the Alienation subscale score (Gullone & Robinson, 2005). Alpha coefficients showed good levels of internal consistency and ranged from .72 to .86 for the Parent Attachment scales, and from .71 to .86 for the Peer Attachment scales.

Student involvement in sport was established by posing the question "Do you practice sports?" The research subjects had the following three choices: (a) "Yes, I actively practice sports, attend training practices and participate in competitions"; (b) "Yes, I practice sports in my free time so that to keep fit, but I do not attend regular sports practices and do not go for the highest sports results"; and (c) "I do sports activities only during physical education classes; I do no sports in my free time."

Data analysis. Descriptive statistics analyses and internal consistency of the IPPA-R was examined by conducting Cronbach's alpha analyses on each of the subscales. T test and ANOVA were computed to compare group differences.

Correlational analyses were conducted to examine the interrelations among IPPA-R subscales. Hierarchical regression analyses were applied to examine the effects of independent study variables on attachment to parent and peer.

Results

It was established that Trust is the most prominently expressed subscale in children. When evaluating the attachment with peers, it was established that children scored higher on the Trust subscale, lower on the Communication, and the lowest on the Alienation scale. The overall Peer Attachment was higher than Parent Attachment.

Boys scored significantly higher than girls did on two scales of the Parent Attachment domain: Trust (t= -2.12; $p < .05$) and Alienation (t= -3.42; $p < .001$) (Table 1). Girls scored significantly higher than boys on Trust (t=7.00; $p < .001$), Communication (t=13.23; $p < .001$), and Alienation ($t = 3.42$; $p < .001$) as well as overall Peer Attachment (t=10.68; $p < .001$).

The age group differences were as follows: the early adolescent scored significantly higher on the Trust ($t = 7.19$; $p < .001$), Communication (t=9.00; $p < .001$), and Alienation (t=3.55; $p < .001$) subscales as well as on the overall Parent Attachment scale (t=8.48; $p < .001$) when compared with the senior adolescent sample. In contrast, senior adolescents scored higher on one subscale of the Peer Attachment scale, Trust (t=-2.13; $p < .05$).

The research revealed that 36.3% adolescents aged 12 to 16 attend sports practices and take part in competitions while 35.6% adolescents exercise in their free time. The remaining 28.1% do sports only during physical education classes. Furthermore, we investigated differences between adolescent participation in sports activities and their attachment with parents and peers (Table 2). We observed an association of participation in sports with the Trust (F=13.27; $p < .001$), Communication (F=11.85; $p<0.001$), and Alienation (F=7.10; $p < .01$) subscales as well as overall Parent Attachment (F=9.79; $p < .001$). The study also determined that participation in sports was associated with two issues covered in the Peer Attachment scale: Trust ($F = 3.60$; $p < .05$) and Alienation (F=5.67; $p < .01$).

Additionally, the researchers conducted a multiple regression analysis to examine the effects of gender, age, and participation in sport on attachment to parent and peer. In each analysis, variables of gender, age, and participation in sport were included as independent variables, with attachment with parent and peer as dependent variables. Analyses showed that for adolescents Trust to parent is significantly impacted by age ($\beta = .18$, $p < .001$) and participation in sport ($\beta = .12$, $p < .001$) ($F = 24.70$, $p < .001$, Adjusted $R^2 = .06$). For the Communication with parents age ($\beta = .23$, $p < .001$) and participation in sport ($\beta = .10$, $p < .001$) were significant predictors ($F = 32.01$, $p < .001$, Adjusted $R^2 = .07$). All independent study variables of gender ($\beta = .08$, $p < .01$), age

(β = .09, p < .01), and participation in sport (β = .08, p < .01) were significant predictors for Alienation with parents (F = 10.80, p< .01, Adjusted R^2 = .02). For the overall adolescents' attachment with parents, significant predictors wereage (β = .21, p < .001) and participation in sport (β = .10, p < .001, F = 28.64, p< .001, Adjusted R^2 = .06).

Table 1. Means and Standard deviations for the IPPA-R by gender and age (N = 1348)

Measure	Gender				Age			
	Girls (n=716)		Boys (n=632)		12-14 years (n=700)		15-16 years (n=648)	
	M	SD	M	SD	M	SD	M	SD
IPPA-R-Parents								
Trust	23.83	3.35	24.21	3.02*	24.62	2.91	23.38	3.38***
Communication	16.69	3.11	16.60	2.85 ns	17.33	2.81	15.90	3.01***
Alienation	16.38	2.58	16.86	2.55***	16.85	2.55	16.35	2.58***
Total score	24.15	4.92	23.95	4.66 ns	25.09	4.58	22.94	4.78***
IPPA-R-Peers								
Trust	26.08	3.80	24.61	3.90***	25.17	4.03	25.63	3.78*
Communication	19.27	3.33	16.85	3.35***	18.05	3.50	18.24	3.60 ns
Alienation	9.62	1.43	9.35	1.48***	9.42	1.47	9.57	1.45 ns
Total score	35.73	6.05	32.12	6.35***	33.80	6.56	34.29	6.32 ns

Note. *- p<0.05; *** - p<0.001; ns = not significant.

Table 2. Means and Standard deviations for the IPPA-R in terms of participation in sports activities (N = 1348)

	Attend regular practices of some sports (n=489)		Exercise in their leisure time (n=480)		Exercise only during classes of physical education (n=379)	
	M	SD	M	SD	M	SD
IPPA-R-Parents						
Trust	24.44	3.00	24.08	3.06	23.33	3.58 [ab]***
Communication	16.97	2.94	16.78	2.90	16.02	3.13 [ab]***
Alienation	16.85	2.52	*16.67*	2.45	16.20	2.75 [a]***[b]*
Total score	24.57	4.82	24.19	4.50	23.15	5.12 [ab]***
IPPA-R-Peers						
Trust	25.61	3.7 8	25.56	3.72	24.95	4.29 [a]*
Communication	18.14	3.34	18.37	3.51	17.87	3.85 ns
Alienation	9.56	1.44	9.60	1.42	9.29	1.52 [a]*[b]**
Total score	34.19	6.21	34.32	6.23	33.53	6.99 ns

Note. *- p<0.05; **- p<0.01; *** - p<0.001; ns = not significant.
a = significant differences comparing individuals not participating in sport with athletes. b = significant differences comparing individuals not participating in sport with individuals leading the active leisure lifestyle. c = significant differences comparing athletes with individuals leading the active leisure lifestyle

Analyses showed that all study variables of gender (β = .20, p < .001), age (β = .07, p < .01) and sport participation (β = .10, p < .001) were significant

predictors for adolescents Trust to peers (F = 22.46, p< .001, Adjusted R^2 = .06). Gender (β = .35, p < .001) and sport participation (β = .08, p < .01) was also a significant predictor for adolescents Communication with peers (F = 61.94, p< .001, Adjusted R^2 = .12). A significant impact of gender (β = .11, p < .001), age (β = .06, p < .05), and sport participation (β = .08, p < .09) was established (F = 8.81, p< .001, Adjusted R^2 = .02) for the Alienation with peers. Our results demonstrate that gender (β = .29, p < .001) and participation in sport (β = .08, p < .01) had significant relations with adolescents overall attachment with peers (F = 42.09, p< .001, Adjusted R^2 = .09).

Discussion

In this study we aimed to determine the link between the involvement of adolescents in sports activity and their attachment to their parents and peers. We also aimed to establish adolescents' attachment with parent and peer considering the aspects of gender and age. While investigating the development of attachment to parents and peers in dependence with the adolescents' age, we discovered that Trust, Communication, and Alienation from parents are more prominent in junior adolescents in comparison to senior adolescents. Scholars (Arnon et al., 2008, Dykas et al., 2008) highlight that adolescents' attachment to parents undergoes development as children become increasingly less dependent on their parents. Hence, attachment to their parents may be less important for senior adolescents. Our research demonstrates that senior adolescents aged 15 to 16 exhibits a more intensive manifestation of Trust as well as Alienation with Peer in comparison with junior adolescents. The findings shows that adolescent and peer attachment influence a wide array of psychosocial phenomena, including interpersonal relationships. The expression of Trust are important for children's success in peer relationships. At the same time Alienation lead them to become less committed, unsatisfied, and more adverse within their relationships. Our results highlight how attachment between senior adolescence and peers can contribute to understanding how close personal relationships vary in quality.

Furthermore, we sought to discover the dependence of adolescent Attachment to their parents and peers regarding the criterion of gender. The results showed that boys manifest both Trust and Alienation from parents more intensively than girls do. However, the intensity of Communication with parents was found to be of equal value for both genders. It should be observed that research conducted in other countries (Nawaz, 2011, Imtiaz & Naqvi, 2012) yielded totally different results; statistically significant gender-based differences observed illustrated that girls appeared to be far more attached to their parents than boys. It is likely that the difference in results may have been caused by the cultural differences of the research countries; this issue has been noted by a number of scholars dealing with attachment (Imitiaz & Naqvi, 2012).

In terms of the impact of gender on adolescent relationship with peers, our research revealed that the relationship of girls with peers on all scales – Trust, Communication, and Alienation – was expressed more prominently than in boys. In this way, the relevant hypothesis set at the beginning of this research was proven positive; girls find the environment of peers to be much more important than that of parents. Most likely, it is much more important for girls to express themselves in the environment of friends at the age of adolescence.

The data of the research conducted by Engels, Dekovic and Meeus (2002) showed that the quality and intensity of the attachment of adolescents to their peers depends on the importance of the relationship in the family and the attachment to their parents. The research of the aforementioned scholars shows that for adolescents, insecure attachment to parents is related with the increased strife to express themselves among peers. However, other research (Dykas et al., 2008) show that adolescent who are insecurely attached to their parents find it much harder to gain recognition among their peers.

We further explored whether the attachment to parents and peers is dependent on whether adolescents practice sports intensively, leisurely, or not at all. We discovered that the expression of the relationship with parents on all scales – Trust, Communication, and Alienation – is much more intense in the adolescents who attend sports practices and go for results in competitions than in those adolescents who do not attend practices and do not exercise. A more intensive expression of relationships on all scales is more prominent not only in those adolescents who go for results in sports but also in those who prefer active leisure activities related to sports. Research by Carr (2009) also proved that secure relationship among adolescents and their parents prominently depend on the positive interaction of the parents and adolescents in the sports environment. Among adolescents attending sports practices and seeking results, the expression of relationship with peers was more prominent on the scales of Trust and Alienation in comparison with those adolescents who do not participate in sports. The manifestation of Alienation is the least prominent in those adolescents who only do sports in their leisure time or do not do any sports at all. Thus, our hypothesis that the attachment to parents and peers differs depending on the adolescents being involved or not being involved in sports was proven correct.

When discussing the obtained results, attention should be paid to findings of other scholars discussing the role of parents in the sports activities of their children. It has been found that adolescents' approach to sports activities is related to their parents' point of view (LaVoi & Stellino, 2008). Furthermore, other research has revealed that parents influence their children's motivation to participate in sports (Sánchez-Miguel et al., 2013) and their choice of sports activities (Dorsch et al., 2009). On one hand, this finding is not surprising since children's participation in sports often involves their parents (Dorsch et al., 2009). This may explain higher trust and communication with parents in relation

to adolescents who do or do not participate in sports. On the other hand, parents may demotivate their children's sports activity by demanding that they participate and seek results in sports. In this case, the opposite result is likely to be found when assessing the attachment between parents and children.

In considering the interaction of children involved in sports and their parents, attention must also be paid to differences in the roles of mothers and fathers in promoting sports activities (Palomo-Nieto et al., 2011). Hence, future research should investigate not only the attachment of adolescents to parents in general but also separately in relation to fathers and mothers.

Conclusion

This study determined that boys scored higher than girls did on Trust and Alienation with parents, while girls scored higher than boys in terms of Peer attachment. Younger children scored statistically significantly higher on the Parent Attachment scale whereas senior adolescents scored higher on Trust with Peers. The research revealed the effect of participation in sports on Attachment to Parents. The research also revealed that participation in sports has an effect on both Trust in Peers and Alienation from them.

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NORDIC WALKING OR TRADITIONAL WALKING IN PATIENTS WITH INTERMITTENT CLAUDICATION: A CRITICAL REVIEW

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Abstract. *Regular exercises can improve walking distance and reduce physical impairment in patients with intermittent claudication. The objective of the research is to summarise and analyse the existing proof about the comparative effectiveness of Nordic walking and traditional walking in the improvement of health indicators in patients with intermittent claudication. Methods: The following online databases were used as sources for data collection: Ebsco, Sience Direct, Clinical Key, ProQuest, Scopus. The selection of works of research was performed on the basis of key words "Nordic walking", "intermittent claudication", "walking with poles", "Nordic walking and walking and intermittent claudication" and the year of publishing (that is, from 2005 till 2015). Inclusion criteria met four works of research that were included in the critical analysis. Results and conclusions: There is no proof about the superiority of the Nordic walking programme over traditional walking (and there exist indications about the superiority of the traditional walking programme) in the improvement of helath indicators, but patients with intermittent claudication feel less discomfort during Nordic walking and they can cover a longer distance by using poles.*

Keywords: *intermittent claudication, Nordic walking, traditional walking.*

Introduction

The narrowing of peripheral blood vessels in legs, caused by atherosclerotic changes, significantly limits blood circulation in muscles during walking and leads to cramping pain in muscles of calf during walking (intermittent claudication). It is proven that regular home-based exercising can improve walking distance and reduce physical impairment in these patients (Li et al., 2014). Unfortunately, the compliance of this group of patients in training programmes is very low due to fear of provoking pain, as well as due to the age and other lifestyle factors. Therefore, it is essential to identify such physical activities that would be popular in society and that would cause less painful symptoms, thus motivating the enrolment of patients. One of such activities is Nordic walking that has gained popularity in many countries (including Latvia) among various age groups.

The objective of the research is to summarise and analyse the existing proof about the comparative effectiveness of Nordic walking and traditional

walking in the improvement of health indicators in patients with intermittent claudication.

Material and Methods

The following online databases were used as sources for data collection: Ebsco, Sience Direct, Clinical Key, ProQuest, Scopus. The selection of works of research was performed on the basis of key words "Nordic walking", "intermittent claudication", "walking with poles", "Nordic walking and walking and intermittent claudication" and the year of publishing (that is, from 2005 till 2015). The next step was the review of research titles with an aim to select the ones that corresponded to the theme, and duplicates, systematic or critical reviews and incomplete texts were excluded; researches that were not in English, were not chosen, too. The next step was a review of research summaries with an aim to select the ones that correspond to the set inclusion criteria: the analysis of patients with intermittent claudication (peripheral arterial disease was confirmed using the ankle-brachial index (ABI) (≤ 0.90) or vascular laboratory doppler evaluation), objective tests were carried out with an aim to assess and perform a comparative analysis about the effectiveness of Nordic walking and traditional walking.

Data about the training methods applied in Nordic walking and traditional walking have been summarised and analysed (the length of training sessions, their frequency and intensity, the total length of the training programme, as well as supervision and the compliance of patients), as well as the methodology of traditional walking used in the comparative analysis. The measurements (tests) of objective and subjective results, used in the works of research, were also summed up, as well as the described results about exercise testing (absolute walking time, initial claudication time), indices of cardiopulmonary work (as peak oxygen consumption), ABI, gastrocnemius muscle tissue oxygenation (StO_2), pain and perceived physical impairment.

The assessment available in PEDro database was used for the quality assessment of the analysed works of research. This assessment relates to two aspects of quality: reliability and the interpretation possibilities of the research. Credibility is evaluated according to random and hidden selection, the initial comparability, unknown participants, therapists and evaluators, adequate examination and the analysis of "intention to treat". The question whether the research can be interpreted is assessed according to the comparativeness of groups, the report on points and the changeability of calculations. The assessment is performed by independent experts. One point is given for the correspondence with each criterion, but the correspondence of the research itself is not assessed according to the points; therefore the maximum number is 10 on the 11-points scale.

Results

During the selection 7 works of research were chosen on the basis of the titles (the first step), after the analysis of their summaries, 3 works of research were excluded (two of them did not include a comparative analysis between Nordic walking and traditional walking, and one research was an overview of bibliographical sources). As a result, four works of research were included in the critical analysis: two of them was performed by a group of researchers in the USA (Collins et al. (2012)[1] and Collins et al. (2012)[2]) and two of them were works of two groups of researchers in the United Kingdom (Oakley et al. (2008) and Sparfford et al. (2014)).

For three works of research included in the analysis quality was assessed in the PEDro database; this proves that both researches of Collins et al quality can be assessed as medium and high (that is, Collins et al. (2012)[1] 5 (10) points), but Collins et al. (2012)[2] 6 (10)), whereas research of Sparfford et al. (2014) is valued as medium (4 (10) points). It should be noted that the lack of unknown participants, therapists and evaluators lowered the quality for all three works of research.

The number of participants and general characteristics

In total 85 patients were included in the research of Collins et al. (2012)[1] (n=45 in the Nordic walking group, n=40 in the traditional walking group; 93% were men and the average age of patients was 69.4±9.1 years (in the Nordic walking group the average age was higher 71.7±9.2, p=0.012)). Whereas, in the second research of this group of researchers 103 patients were included at the beginning, but in the final analysis data was summarised about n=34 patients of the Nordic walking group and n=43 patients of the traditional walking group (94% were men and the average age of patients was 69.7±8.9 years (the average age was higher in the Nordic walking group, p<0.05)).

The number of participants in both works of research carried out in the United Kingdom was comparatively lower: initially 52 patients were included in the research of Spafford et al. (2014), but only 38 patients were involved in the final analysis (n=19 in each group; the average age 65±2 years; there is no data about the gender proportion for the analysed group). 21 patients were analysed in the research of Oakley et al. (2008) (men, the average age 70 years (from 57 to 79)).

On average about 30-35 % of patients (in 3 works of research and 17% of patients(in 1 research) were smokers (active) and the average weight index of patients in various works of research ranged from 27.8 to 29.0, ABI in a peaceful position indicated on average from 0.61 to 0.63 (±0,11).

Training methodology for Nordic walking and traditional walking

In the research of Collins et al. (2012)[1] Nordic walking was organised 3 times a week for 12 weeks. At the beginning patients were trained how to apply the techniques of Nordic walking, during the training process the techniques

were supervised and corrected. The interval method was applied in the training programme, by using low to medium intensity load at the beginning of the programme and by progressing to medium and high intensity load at the end of the programme. The training intensity was dosed according to the heartbeat frequency that was measured during the treadmill test by determining the maximum usage of oxygen. The training length and intensitywere adjusted every three weeks: at the beginning 30 minutes (20% low, 60% medium, and 20% high intensity), and in the 10th-12th weeks: 55 minutes(10% low, 45% medium, and 45% high intensity). The training programmes were organised as follows: 2 times a week on the treadmill and once a week outdoors or in the corridor.

In the research of Collins et al. (2012)[2] Nordic walking was organised 3 times a week for 24 weeks. The interval method was applied in the training programme: at the beginning 30 minutes (20% low, 60% medium, and 20% high intensity) and gradually till the 24th week the timing reached 60 minutes (10% low, 35% medium, 50% high, and 5% very high intensity). The training programmes were organised on the treadmill or outdoors in case of favourable weather conditions.

In both researches of Collins et al. the supervised training regime was applied. In the research of Spafford et al (2014) patients were trained and instructions were provided to perform individual training at home at least 30 minutes 3 times per week for 12 weeks (the execution was controlled with a pedometer and a diary), the patients were motivated and supported by telephone calls of the physiotherapist once a week, as well as the patients were controlled every 4 weeks.

In the research of Oakley et al. (2008) the immediate effect of Nordic walking was examined in comparison with traditional walking, so patients were trained how to apply the Nordic walking techniques, did some exercising and performed Nordic walking on the treadmill with the speed of 3.2 km h^{-1} and inclination of 4%.

In all works of research the traditional walking was dosed and applied identically to Nordic walking, but without the use of the Nordic walking equipment and techniques. In the research of Oakley et al. (2008) that examined the immediate effects, 15 minutes of rest was given between the both tasks (Nordic walking and traditional walking).

Changes in health indicators as a result of the comparison of Nordic walking and traditional walking

When analysing the changes of health indicators by comparing the influence of Nordic walking and traditional walking, the research of Oakley et al. (2008) was reviewed in particular, as it explored the immediate effects of both activities, whereas other three works of research analysed the long-term training programmes.

The research of Oakley et al. (2008) demonstrates that during Nordic walking, in comparison with traditional walking, the distance walked before the onset of claudication pain (p<0.001) and the maximum walking distance (p<0.001) increased, as well as the pain intensity is comparatively lower at the maximum walking distance. Significant differences can be identified in several indices of cardiopulmonary work, that is, during Nordic walking oxygen consumption and the minute volume of expired air was comparatively higher, however the assessment of effort at the maximum load did not differ. No credible difference was noted in the ABI decrease after both types of activities.

The main results of the effectiveness of the long-term Nordic walking and traditional walking programmes in patients with intermittent claudication are summarised in Table 1.

Table 1. The comparative effectiveness of the long-term Nordic walking (NW) and traditional walking (TW) programmes

	Collins et al. (2012)[1]	Collins et al. (2012)[2]	Spafford et al. (2014)
Training programmes	12 weeks Supervised	24 weeks Supervised	12 weeks Home-based
Absolute walking time	Greater ↑ in TW (p=0,002)	Greater ↑ in TW (p=0,037)	-
Initial claudication time	No difference	No difference	-
Maximal walking distance	-	-	No difference
Claudication distance	-	-	No difference
ABI	No difference	-	No difference
Peak oxygen consumption	No difference	-	-
Time walked to nadir StO$_2$ *	Greater ↑ in TW (p=0,002)	No difference	-
Physical impairment**	-	No difference	-

the percentage of hemoglobine oxygen saturation in gastrocnemius muscle tissue measured by near-infrared spectroscopy
**perceived physical function measured by SF-36 scale and Walking Impairment Questionnaire*

In the research of Collins et al. (2012)[2] the characteristic measurements (such as step length, forward velocity, cadence, and ground reaction force) were analysed for part of patients, but no differences among the groups were identified after six weeks.

All three works of research confirmed high compliance of patients in both types of groups (in Nordic walking and traditional walking).

Discussion

All examined works of research confirm the positive influence of regular, long-term physical activities in patients with intermittent claudication, as the results demonstrate and validate that both programmes (Nordic walking and traditional walking) significantly increase the covered distance until the moment of occurrence of pain, as well as the total walked distance. These improved results are explained by the increase in the number of capillaries in calf muscle (Wang et al., 2009) and, as the results of Collins et al. (2012)[1] research suggest, the walking exercise improves muscle tissue oxygenation, as well as a notable role is played by the increase of general cardiovascular endurance.

Both works of research carried out in the USA (medium and high quality, randomised works of research), in which 12 and 24 weeks supervised training programmed were applied, confirmed that better results in respect of the absolute walking time on the treadmill test (and one research also showed longer time till reaching nadir oxygenation values) were obtained by applying traditional walking. The authors note that it should be taken into account that the training load was dosed according to the heartbeat frequency, however it is possible that the upper extremities were used in the Nordic walking group and leg muscles were involved less actively, thus reaching the load intensity. Also, during the training on the treadmill, using the walking poles, patients could not hold on to arm supports; this increased fear of falling down thus augmenting the heartbeat frequency and providing false information about the load intensity. The authors also noted that the results could be influenced by comparatively older age of patients in the Nordic walking group, although this factor was taken into account during the statistical processing of data.

In the research of Spafford et al. (2014) (medium quality, randomised works of research) that examined independent training sessions, no significant differences between the groups were identified. However, both in this research and the work of Oakley et al. (2008), when analysing the immediate effects of Nordic walking and traditional walking, it is confirmed that by walking with the poles patients with intermittent claudication can cover a longer distance and pain in legs appear comparatively later.

Conclusions

Although there is no proof about the superiority of the Nordic walking programme over traditional walking (and there exist indications about the superiority of the traditional walking programme), it should be taken into account that Nordic walking is becoming more and more popular, thus patients can be motivated to join this activity, as well as patients with intermittent claudication feel less discomfort during Nordic walking and they can cover a longer distance: these factors could promote compliance and the experience of positive activities.

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