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CORRECTIONAL EDUCATION FOR PRESCHOOLERS WITH SPEECH AND LANGUAGE DIFFICULTIES IN THE RUSSIAN FEDERATION

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ABSTRACT

This paper presents an investigation of special education in preschools practicing integrated education in the Krasnoyarsk region, the Russian Federation. They use the term “correctional education” instead of “special education” for special needs education. Children with speech and language difficulties have speech and language therapy by professional speech therapists and other specialists through both discrete and group lessons in the preschools practicing integrated education. Speech therapy has been an important part of correctional education for children with special needs since the Soviet era because there is a close link between speech and other higher mental functions. They have carried out correctional education based on the elaborated study of “defectology” in the Soviet era. Although the Soviet-style of special education was almost an entirely separate educational system, modern Russia has begun to embrace a new educational system, “integration”. Specialists related to special education have found some benefits of integration for children’s social development. We visited preschools which include both nondisabled children and children with special needs to observe the speech therapy and other remedial education practices. We also interviewed specialists in pediatric and special education in the city medical-psychological-social centers. One of the goals of the centers is to prepare children for integration into society. They have been influenced by “Western” special education and started to change their differentiating educational system to integration in modern Russia.

Key Words: Russia, special education, preschool, speech therapy, integration

INTRODUCTION

The theoretical legacy of the Soviet defectology, like Vygotsky’s theory, attracted Japanese psychologists and special educators in the Soviet era. They learned from the pedagogical methods underpinned by empirical study and defectological research led by Moscow’s Institute of Defectology. Defectology is an integrated scientific discipline that embraces the study and education of all disabled children and adults. They also tend to use “correctional education” instead of special education. The knowledge and ideas obtained from the Soviet Union has contributed to develop Japanese special education and educational psychology (Iino, 1967; Iwahashi, 1961). Not only Japanese educators but also other Asian and West European educators have been interested in special education in Soviet Russia. Some Chinese educators returning from academic trips to Russia established the first school in the country for children with mental retardation

(Yang, et al., 1994). Western observers recognized that the special education system in Soviet was successful because the results of scientific research and practice, which were carried out by Institute of Defectology, were disseminated through the journal *Defektologiia* [Defectology] to specialists to give them knowledge and assumptions all over the country. The special education system was distinct from Western European countries and it apparently reached much higher levels of achievement in the special schools for mild and moderate learning disabilities (Thomson, 2002).

Although many specialists of West Europe and Asia have been attracted by the educational system of the Soviet Union, there is very little English academic literature about the current state of special education in modern Russia, especially it is hard to find academic articles referring to the state of special education after 2000. In this article we propose to describe the way of correctional education to preschoolers, mainly clinical, pathological, and educational treatment for children with speech and language disabilities in today's Russia. We discuss about the continuities and changes in the special educational system between the Soviet and post-Soviet system.

The paper begins with an overview of the special education system in Russia including the systemic and theoretical legacy of Soviet special education. Grigorenko (1998) has noted that it is important to know about the legacy of the Soviet Union before learning the current state of special education in Russia.

RUSSIAN DEFECTOLOGY

The theoretical basis of defectology was developed by Vygotsky (1896-1934), who is a famous Russian psychologist. The Institute of Defectology (now called the Institute for Correctional Pedagogy of the Russian Academy of Education) was founded by Vygotsky in 1929 and it has provided a scientific research and clinical advisory center for all of Russia for more than seventy years. Vygotskian theory of developmental psychology and defectology has remained and is further developed by his students and colleagues. In the field of defectology, they still continue to use Vygotsky's ideas at a fundamental level.

Although people tend to hesitate to use the term "defective" to describe individuals with disabilities in West Europe and North America these days, Russian people have used the term since early Soviet time for academic study, education or political matters. It is likely that Vygotsky used the term in a broader sense than the use in Western countries. The specialists related to defectology were called "defectologists" (Grigorenko, 1998). The term "correctional education" is also distinct use for special education in the West. They have developed their own language to classify and explain phenomena and practices in defectology. One of the categories of defectology is a "delay in psychological development (Russian, *Задержка психического развития*)", which is not classified in ICD-10 (World health organization, 1992) or DSM-IV-TR (American Psychiatric Association, 2000). It means that learning disabilities with IQ 70-90, caused by constitutional abnormalities, somatogenic disorders, or some kind of organic disorders (Трофимова, et al., 2005). It is different concept from learning disorders or autism (Korkunov, et al., 1998). Lebedinskaya (1993) described that they have studied autism at the Institute of Defectology since 1978. Autism traditionally has been

connected with childhood schizophrenia, therefore autistic children have been treated mainly with drugs by physicians in medical treatment facilities.

During early years of Soviet times, special schools were so limited that only students with vision impairments, hearing impairments and mild intellectual disabilities could enroll in school. Vygotsky and his colleagues researched to develop a teaching method for disabled children and expanded correctional education to other disabilities gradually. In Russia, the current categories of disabilities in correctional education are hearing defects, sight defects, speech defects, defects of movement, delay in psychological development, mental defects and other anomalies (Watanabe, et al., 1991). Those classifications are still used in correctional education to categorize special schools (Trotimova, et al., 2005). Special schools have been established corresponding to each category of disabilities since the Soviet era. Table 1 indicates the categories of special schools, the number of schools and the number of students enrolled in each special school in Russia in 2005.

Table 1. Numbers of the special schools and enrollment in Russia

Category	Number of Schools	Total Number of Students	Maximum Class Size	Course Period (years)
1. Deaf and severe hearing defects	84	11,413	6	7~8
2. Mild and moderate hearing defects	75	10,963	10, 7*	12
3. Blind and severe sight defects	18	3,040	8	12
4. Mild and moderate sight defects	61	8,605	8	12
5. Speech defects	60	11,362	12	10~11
6. Mental defects	44	6,171	10	12
7. Delay in psychological development	69	12,562	12	8~10
8. Mental defects	1,461	207,836	7-8, 5-6**	8~10

*Hearing defects with mild speech defects: 10; with severe speech defects: 7.

**Mild and moderate mental defects: 7-8; severe mental defects: 5-6.

Source: Trotimova, et al. (2005)

Despite the existence of a variety of special schools and rehabilitative facilities, defectological services have been limited to a population of children with severe physical disorders and mental retardation in the Soviet era. Today these kinds of children are still not able to enroll in schools which are under the jurisdiction of the Ministry of Education and Science, but they are able to receive education in the residential or day care facilities which are under the jurisdiction of the Ministry of Health and Social Affairs.

The percentage of the children with disabilities aged 6-16 who are provided special education is about 8.7 % (Korkunov, et al., 1998). Compared to Japan, 2.1 % of aged 6-15 children are provided special education in 2007 (Ministry of education, culture, sports, science and technology-Japan, 2009) . This discrepancy is due to more Russian children being diagnosed as disabled children because there is no “delay in psychological development” category in Japan.

DIFFERENTIATION AND INTEGRATION

During the Soviet regime, they provided strict differentiated education to students with special needs. The Soviet special education system was highly centralized. There was no attempt to integrate children with disabilities with nondisabled children, or even provide special classes for children with disabilities in the regular school. There was strict social separation and isolation of children with disabilities. Nondisabled children were prohibited to play with disabled children even during holidays (Korkunov, et al., 1998). The strict differentiation was forwarded by the defectological tradition. During this time, the professionals believed that segregated correctional education was effective for many disabled children, including mild learning difficulties.

After the fall of the Soviet Union, specialists have been influenced by Western practice literature and experiences through interaction with international research. They realized that integration is an ideal education style and there are benefits for children with disabilities (Thomson, 2002). In recent years, we have seen big changes in the correctional education system in Russia. The Russian Federation has promoted integration as a new education policy. A trend is developing directed at the integration of children with disabilities into regular educational environments, along with regularly developing children. At first, they focus on identifying the weaknesses in the child's mental or physical development and providing remedial treatment at the earliest possible stage. They emphasize the importance of timely delivery of the required psychological, medical, and educational help for preschoolers to correct their disabilities and prepare for education in primary schools (The Ministry of Education and Science, 2008).

We visited some medical-psychological-social centers and preschools practicing integrated education in the Krasnoyarsk region, Russia in 2009. We observed special programs provided to children with disabilities and interviewed some specialists related to defectology.

MEDICAL-PSYCHOLOGICAL-SOCIAL CENTERS

In the region of Krasnoyarsk there are medical-psychological-social centers. The missions of these centers are providing diagnosis to children, remedial therapy, appropriate placement for school, and information of child-care for the parents. We visited two centers in the city of Krasnoyarsk, Center of Diagnosis and Correction No. 2 and Center of Medicine and Education No. 10. In both centers there are several kinds of specialists; in the Center of Diagnosis and Correction No. 2, there are 5 doctors including pediatricians and psychiatrists, 7 clinical psychologists, 5 speech therapists, and 10 special educators. The centers arrange various kinds of experts to provide help. These centers focus on identification of the delay of physical or mental development at the early developmental stage. They diagnose a child from several aspects by interview, medical check, psychological tests, gross and fine motor skill checks, speech tests, and observation of playing. If the child is diagnosed with a developmental disorder or some kind of disability, they provide remedial therapy by professional staff regularly. Each child has an individual remedial plan. It is not compulsory to visit the centers for the parents; therefore the centers do not force the parents to come.

The most common category of disabilities for school age children in Krasnoyarsk

is delay in psychological development (45.9 %), and the second-most is speech defects (29.9 %). They diagnose speech impairment in early childhood, around two years old. Their policy is that earlier is better and more effective for correction of disability.

These centers undertake many important roles. They supervise the special schools and special classes in regular schools or preschools in the local area. Another role is to take in pedagogical university students for practical training of special treatment, especially speech therapy for children with special needs. Some of the staff of these centers are faculty members of the pedagogical university. The centers promote integration through collaboration with the universities and the local education boards to develop educational programs for children with special needs. These centers have provided the service for around 20 years with a comprehensive approach since the latter part of the Soviet era.

SPEECH THERAPY IN THE PRESCHOOLS

We visited two preschools practicing integrated education and focusing on correctional education for children with speech impairments; Krasnoyarsk city preschool No. 50 and Sosnovoborsk city preschool No. 1. These two preschools are very eloquent examples of integration. A total of 156 students are divided into 15 classes in Krasnoyarsk city preschool No. 50 and 230 students into 12 classes in Sosnovoborsk city preschool No. 1. The staff consists of 2 doctors, 13 speech therapists and 1 clinical psychologist at Krasnoyarsk city preschool No. 50; 32 teachers, 2 doctors, 2 speech therapists and 1 clinical psychologist at Sosnovoborsk city preschool No. 1.

One of the goals of these preschools is to integrate disabled children into society and regular schools. Speech therapy has been considered an important part of correctional education for children with special needs since the Soviet era because there is a close link between speech and other higher mental functions. The speech therapists provide speech therapy to not only children with speech disorders but also other children with normal development. In the integrated group lesson, the speech therapist uses a therapeutic approach to all children in the class. The speech therapist mentioned that Russian language is difficult phonetically and grammatically, therefore almost all young children have some kind of speech or language problem. Most children need some kind of speech therapy, even if they have not been diagnosed as a speech impaired child.

They often use music activities in the group lessons of speech therapy. Singing is useful and effective for learning pronunciation, control of breathing, vocabulary building, and finding speech rhythm. Dancing is also an effective way for getting rhythm of speech and improving gross motor skills. They also teach English to a group of 5-year-olds. The children pick up some English words and phrases quickly. According to the speech therapist, the reason they teach foreign language is that learning foreign language is good stimulation for the language center in left hemisphere of the brain and it gives good results for learning their own language. In individual lessons, the speech therapist does more professional and technical therapy to each child with speech and/or language impairments. The therapist trains the child's abilities related to language and speech acquisition: fine motor skills, articulation, listening comprehension, discrimination

of phonetic sound, syntax, vocabulary building, segmentation, dialogue, and so on. The therapists also give massages for relieving tension and stress of the muscles in and around the mouth. Overall, speech therapy for young children in Russia is at a high level and of professional quality.

Speech therapists have key roles in correctional education, especially for young children in Russia. There are two kinds of qualifications for speech therapists in Russia; one for child therapy and the other is for adult therapy. Qualifications to be a speech therapist for children can be earned at the universities which have speech therapy training courses in their special education department. Accordingly speech therapists are much in demand in correctional education or other centers and facilities, many university students have studied speech therapy in Russia. These days severely handicapped children also have speech therapy, although these children were classified as “uneducable children” and defectological services have been limited to a population of children with severe disabilities in the Soviet era. In these preschools they treat not only enrolled children but also children who belong to other preschools or primary schools. Speech and language is very important for verbal communication and socialization. Speech therapy for young children with special needs is a preparation for school attendance. More than 97 % of children who are provided speech therapy are able to enter regular school after the preschools.

DISCUSSION

Special education in Russia is undergoing major changes after the disintegration of the Soviet Union. The centralized Soviet system has been decentralized so each region now has more control over local education. Integration and speech therapy are keys of current special education in the Russian federation. The development of integration is regarded as one of the most important areas for improving education of children with special needs in Russia (The Ministry of Education and Science, 2008). There is a new emphasis on child-centered approaches which are more democratic. For children with disabilities, learning with peers with normal development could be good stimulation and helpful for socialization. Integration also promotes family bonding because children are able to go to regular schools in their residential area instead of special boarding schools far away from their homes. Even though integration is the ideal education style, especially for children with mild disabilities, there is a problem of budget for facilities and a lack of special education teachers. The most crucial task would be training specialists for the field of special education.

In recent years, the term, social integration, has been used in West European academic literature. For social integration to occur, communication skills, especially verbal communication skills, are necessary. For remedial education, speech therapy is considered a very important treatment for children with special needs. In Japan usually we do not diagnose articulation disorders for children under 5 years old because most articulation problems in early childhood are overcome naturally by the time they become 5 years old. The lessons given by speech therapists have a very delightful atmosphere and children do not get bored. The category of speech disorder exists in a high percentage among young children. In Japan, we do not pay much attention to speech

disorders, especially functioning articulation disorders of preschoolers. In primary and secondary school, about 2.1 % of students (approximately 230,000) are treated at a resource room to have professional therapy by school teachers who are not professional speech therapists in Japan.

Although there have been big changes in Russian special education, it is still based on the framework of Vygostky. We could especially see his great legacy, the Zone of Proximal Development, remains in the special education even in today's Russian preschool education. Even though they did not have active interaction with international research during the Soviet Union era, they are influenced by Western Europe and the United States in recent years (Koukunov, 1998), yet they do not have to imitate other countries' practices. The goal of Russian special education needs to be suitable for post-Soviet Russia because Russia is a huge multi-ethnic country with many different regions. Probably the Russian special education system will change direction to create a regional system and make various options for placement and services.

REFERENCES

- American Psychiatric Association, (2000). *Diagnostic and statistical manual of mental disorders*, fourth edition. Washington, DC: Author.
- Grigorenko, E. L. (1998). Russian "Defectology" Anticipating Perestroika in the Field. *Journal of Learning Disabilities*, Vol. 31, No. 2, 193-207.
- Iino, S. (1967). *Sobieto no shougaijikyoku* (Special education in Soviet). Tokyo: Nihon bunka kagakusha. (In Japanese)
- Iwahashi, B. (1961). *Soren no kyoku mitamama* (Report of education in Soviet). Tokyo: Keiohtsushin. (In Japanese)
- Korkunov, V. V., Nigayev, L. D., Reynolds, L. D. & Lerner, J. W. (1998). Special education in Russia: History, reality, and prospects. *Journal of Learning Disabilities*, 31, 2, 186-192.
- Lebedinskaya, K. S., & Nikolskaya, O. S. (1993). Analysis of autism and its treatment in modern Russian defectology. *Journal of Autism and Developmental Disorders*, 23, 4, 675-679.
- Ministry of education, culture, sports, science and technology-Japan. (2009). Tokubetsu shien kyoiku no genjo (The current situation of special needs education). http://www.mext.go.jp/a_menu/shotou/tokubetu/002.htm (In Japanese) (Last accessed on Nov. 25, 2009)
- Nazarova, N. M. (2000). *Специальная Педагогика* (Special education). Moscow: Academia. (In Russian)
- Niwano, K., Kononenko, A., Arakawa, K., Shurdukhalov, V. N., & Kitaoka, T. (*in press*). Roshia ni okeru shugakumae no shogaiji-kyoku ni tsuite: kurasunoyarusuku-chiho ni okeru togohoku-yochien no shisatsu yori (Special education for preschoolers in Russia: Report on observation of preschools practicing integrated education in the Krasnoyarsk region). *Bulletin of Tohoku Fukushi University*, 34. (In Japanese)
- The Ministry of Education and Science. (2008). *Development of Education, National report of the Russian Federation: Inclusive education, the way of the future*. http://www.ibe.unesco.org/National_Reports/ICE_2008/russia_NR08.pdf (Last accessed on Nov. 25, 2009)
- Thomson, K. (2002). Differentiating integration: Special education in the Russian Federation. *European Journal of Special Education*, 17, 1, 33-47.
- Trotimova, N.M., Duranova, S.P., Trotimova, N.B. & Pushkina, T.F. (2005) *Основы специальной педагогики и психологии*. (Special education and psychology). SPB: St. Petersburg. (In Russian)
- World Health Organization (1992). *The ICD-10 Classification of Mental and Behavioural Disorders: Clinical descriptions and diagnostic guidelines*. Geneva: Author.
- Watanabe, K. (1996). *Roshia shougaiji-kyouikushi no kenkyu* (Studies of the Russian special education).

Tokyo: Kazama shoboh.

Watanabe, K. & Shoji, K. (1991). Sobieto (The Soviet Union). Ueno, K. (Ed.) Saishin sekai no tokushu-kyouiku (World special education). Tokyo: Nihon bunka kagakusha. (In Japanese)

Yang, H. & Wang, H. (1994). Special Education in China. *Journal of Special Education*, 28, 93-105.

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