выработать общую стратегию коррекционной работы с детьми, имеющими нарушения поведения.

Education of disabled people in Poland- changes in statistics and the approach to "the Other"

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The fact that educational and caring systems in special pedagogy change and evolve is a very important element correlated with the changes happening in social, cultural and economic spheres. This symbiotic and elementary characteristics oriented on taking actions in a given pedagogic system allows not only to join the current changes but also to initiate the changes – as in the case of changes of integration and social acceptance of the disabled. Political, economic and social systems have shaped a new look at placing such people – so far separated and margined –into building an open society that is polarised and personified. The changes in questions are of great importance in discussions concerning globalisation and alternative approaches –frequently extreme ones.

These crucial phenomena are both based on and caused by the social options that keep changing as far as the approach to an individual, to a group and to the whole humankind is concerned.

1. Education of disabled people in Poland

Polish education system underwent major transformations in the 90's when the process of conformation with the requirements and postulates of the EU was initiated. These changes have triggered a series of further modifications in 2010, when the Ministry of Education began to modify the system of special education by introducing "inclusion". I have described the initial changes in a book edited by Czesław Kosakowski (Błeszyński, 2001). I have analyzed the changes in special pedagogy, in particular, in the field of educating people with special educational need,. I attempted to enumerate the factors influencing pedagogy that would

transform the requirements of the educational market and influence the change of the whole system. It was essential to present the priorities connected with the system changes, a place and tasks of non-segregation / integration teaching in the system of special education.

2. Changes in statistics

Among the changes in the situation of the disabled one encounters in the new geopolitical situation of Poland are the following:

1. Referring to the previously presented direction of changes in education (educating individuals with special needs) and to the data provided by Central Statistical Office, it can be stated that much of the actual transformation has been foreseen.

2. The number of children and youth learning in resocialisation institutions (institutions for the socially maladjusted and individuals with conduct disorder) and rehabilitation institutions (institutions for mentally disabled, individuals with combined disability and physically disabled) has risen. These developmental changes in the education system highlight the problem of social dysfunction.

3. The number of individuals with visual and hearing impairment using the state help has neither risen nor fallen – no crucial changes in educating sensory impaired persons have been observed.

4. The number of students (and at the same time educational institutions for them)with physical disability and combined disability, lingering diseases (the Rabka Institution was closed in 2005), autistic children (autism has been treated as combined disability since 2002), and mentally disabled is decreasing.

5. Children with mild disability have been incorporated by mass-education. Additionally, a number of private institutions offering help and tuition for disabled individuals has been set up (subsidies for institutions helping autistic children is the highest).

6. Mass-education offers integration classes for both disabled and healthy children, especially in primary education. Individuals with mild mental and physical disability, who are presently learning in mass-education will require increased specialist help in further education.

Present tendencies are undoubtedly connected with the lowering number of students attending gimnazjum (lower secondary school). This tendency can also be observed in special education system.

As foreseen, these preferences were shaped by social difficulties. These difficulties, on one hand, caused the introduction of integration classes (mainstreaming) in mass-education (which encourages transfer of dysfunctional children from special education to mainstream classes and mass classes) and on the other hand, the establishment of special educational institutions connected with resocialisation pedagogy, as a result of social pathology escalation. This phenomena is undoubtedly, the result of behavior problems reported by mass education teachers and counselors working in dormitories and similar welfare institutions, usually catering for the needs of children and teenagers without developmental disorders. Troublesome charges of these educators are frequently sent do special education institutions for individuals with mild mental disability, whilst they should actually be called individuals with intellectual disability. (Błeszyński, 2006).

Today, it can easily be stated that after years of non-segregation system in special education for mentally (and otherwise) disabled children and youth some alarming phenomena appeared. These problems are mostly connected with late admission of students to special education system. Unsuccessful stimulation attempts of intellectually disabled children in mass-education result in education failure and antisocial behavior (especially negativism and social maladjustment). Another drawback is an escalating threat of addictions to which younger and younger children are prone. Additionally, family environment is often unable to cater for the special needs of their children and therefore shifts the responsibility of upbringing onto educational institutions and church.

It is of ten the case that students who finally find themselves in a special education institution, are faced with adaptation difficulties resulting from an actual lack of ability to acquire the necessary knowledge and master essential skills at school. Intensification of deficiencies, negative school experience (before especial education institution) determine the measures taken in special education.

Unfounded delay of placing a child in a special education institution may primarily be caused by the society's negative attitude towards such schools (segregating) and inability to understand the actual role of these institutions in the education system. Special education system should not be seen as rejecting (stigmatizing, condemning, branding) but rather as supporting, providing a chance for functioning in society and minimizing the differences connected with impairments.

The tendency of leaving special education among chronically ill children and youth may result from the change in terminology, as well as from a massive closure of special education institution for the benefit of welfare centres in the actual place of residence. It is connected with the reform conducted by the Ministry of Health and Welfare, which aimed at limiting the cost of treatment and increasing the role of outpatient treatment. In most cases, chronically ill children attend mass schools in the vicinity of their place of residence, frequently undertaking compulsory education in a form of individual tuition accounting for the special education needs of an individual.

Support delay is a problem that mostly concerns children with mild disabilities. Their dysfunctions expand and accumulate in mass-education system. Distance from a special institution, lack of development possibility (especially in rural areas- villages and small towns) are major factors delaying intervention and rendering the prevention of developmental disorders impossible. The number of children placed in special needs kindergartens has been increasing which may be the evidence of a factual need for the existence of special needs kindergarten as such. Furthermore, it may demonstrate the necessity of welfare and tuition for disabled pre-school children.

The necessity of establishing a larger number resocialization and rehabilitation institutions has been acknowledged. We can observe a growing inefficiency of mass-welfare and education. Aggression, violence and addictions are more frequent among children and teens. The problems of self-inflicted injuries, suicidal attempts, under-age prostitution have not been solved. The aforementioned problems increase the risk of spreading infectious diseases (including AIDS), which, in turn, may affect health condition of the whole society.

The described dangers have an obvious influence on special education and they may become more serious and frequent. This is strictly connected with the rise in the number of crimes committed by the disabled. This may well be a result of the inefficiency of family environment, its pathology and lack of sufficient support for the parents, environment of disabled. The help and support should not only be limited to the financial matters but also intervene with the sphere of upbringing and culture. It would be advisable for social institutions and societies to provide means of spending free time, offering opportunities for counseling, supporting and building up childcare skills, in general, helping families with problems. In particular, parental guidance could help parents of a disabled child requiring special care and need of constant support.

Such approach is an outcome of a series of actions promoting tolerance, acceptance and normalization. The actions should be taken on a larger scale than up to now as Stanisław Kowalik suggests (2005; compare with Tøssebro, 2003, p. 19). According to him the activity should be directed at deinstitutionalization (giving the disabled and opportunity for real life experience instead of placing them in institutions), integration (enabling the disabled, including intellectually disabled, to perform everyday actions such as learning, working, spending free time just as it is done by other members of society), normalization (providing the disabled with the developmental chances offered to the other citizens). For the aforesaid to be successful, society needs to provide support. Non-segregation / integration activity is visible, and more widely appreciated despite encountering obstacles and limitations. It can be said that this activity is systematically organized and has legal

grounding. Nevertheless, there is a compulsive need of going beyond the system. Integration should be aided by informal proceedings, which would help to verify the usability of undertaken measures in reality. It can be determined whether the society accepts and absorbs the activity. Disability commences to be perceived not as a limitation but possibility of non-stereotypical interaction.

Discussion

The attempts of organizing postgraduate oligophrenopedagogy courses show the actual lack of broader understanding of the MR (which undoubtedly has influence on their education) and wrong focus point. The problem of mental retardation is seen in isolation, forgetting about the possibility of complex disability and the newest educational achievements in the field of special education. The term "inclusion" does not solely relate to the problem of disability and special needs education . It is more of a direction of change in the field of human functioning in the modern world. This concerns groups, categories taken into account in analyses (for instance: disability and attitude towards disabled individuals), social groups, which are considered unacceptable and are excluded from, or barely tolerated in the society. The people entering human interaction in unusual ways, are perceived ambiguously by the environment. Attitudes towards " the Other", which category the disabled were often placed in , are extremely varied.

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Нарушения полоролевой идентификации, как фактор девиантного поведения воспитанников детского дома

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Среди многочисленных проблем воспитания и обучения детей-сирот красной строкой можно выделить проблему девиантного поведения во всех формах его проявления: противоправные действия, табакокурение, употребление алкоголя и ПАВ, проституция, сексуальные девиации, т.е. поведения, отклоняющегося от морально-нравственных норм человеческого общежития. Особое внимание мы хотим обратить на девиации, связанные с нарушениями в полоролевой сфере воспитанников интернатных учреждений, имеющие как биологическую (наличие явной или скрытой психопатологии), так и социальную природу (А.А. Аладьин, И.А. Фурманов, Н.В. Фурманова) [7]. Решение данной проблемы требует серьезного пересмотра как в рамках профилактики отклоняющегося поведения воспитанников, так и в области полового воспитания и просвещения.

Проблема социального сиротства с каждым годом приобретает катастрофические масштабы, являясь одной из негативных тенденций современного общества. Детерминантами данного явления выступают не только меняющаяся социально-экономическая ситуация в стране, но и, прежде всего, падение морально-нравственных устоев, ценностей семьи и