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**PECULIARITIES OF DEVELOPING THE SOCIAL COMPETENCY  
OF AUTISTIC PRIMARY LEARNERS  
UNDER THE CONDITIONS OF UNCLUSIVE EDUCATION**

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*The article is aimed at the analysis of the peculiarities of the development of the social competency of autistic primary school learners under the conditions of inclusive education. The methods of the research include the analysis of the scientific literature, synthesis, systematization and generalization of the scholars' opinions. The conducted research gives grounds for the analysis of the evolution of social views on joint education of the disabled children. The author also analyses the extent to which the problem of inclusive education in Ukraine has been researched; defines the peculiarities of the social competency development taking into account the peculiarities of autistic children development. Inner and outer indicators of the social competency development have been singled out. Further researches can be devoted to involving children into social inclusion.*

*Key words: inclusive education, social inclusion, integration, social competency, disabled children, autistic children, inner indicators of the social competency development, outer indicators of the social competency development.*

*Гладун Т. О. Особливості розвитку соціальної компетентності дітей молодшого шкільного віку з аутизмом в умовах інклюзивної освіти. / Комунальний заклад «Харківська гуманітарно- педагогічна академія» Харківської обласної ради, Харків, Україна*

*За мету статті взято аналіз особливостей розвитку соціальної*

компетентності дітей молодшого шкільного віку з аутизмом в умовах інклюзивної освіти. Методами дослідження виступили аналіз наукової літератури, синтез, систематизація та узагальнення поглядів учених. Проведене дослідження дало підстави для аналізу динаміки розвитку суспільних поглядів на спільне навчання дітей з інвалідністю; проаналізовано стан наукової розробки проблеми інклюзивного навчання в Україні. Визначено особливості розвитку соціальної компетентності, з урахуванням особливостей розвитку дитини з аутизмом. Також визначено внутрішні та зовнішні ознаки розвитку соціальної компетентності. Перспективами подальших наукових розвідок є включення дітей у соціальну інклюзію.

Ключові слова: інклюзивна освіта, соціальна інклюзія, інтеграція, соціальна компетентність, діти з інвалідністю, діти з аутизмом, внутрішні ознаки розвитку соціальної компетентності, зовнішні ознаки розвитку соціальної компетентності.

Гладун Т. А. Особенности развития социальной компетентности детей младшего школьного возраста с аутизмом в условиях инклюзивного образования. / Комунальное заведение «Харьковская гуманитарно-педагогическая академия» Харьковского областного совета, Харьков, Украина.

Целью статьи взят анализ особенностей развития социальной компетентности детей младшего школьного возраста с аутизмом в условиях инклюзивного образования. Методами исследования выступили анализ научной литературы, синтез, систематизация и обобщение взглядов ученых. Проведенное исследование дало основания для анализа динамики развития общественных взглядов на совместное обучение детей с инвалидностью; проанализировано состояние научной разработки проблемы инклюзивного обучения в Украине. Определены особенности развития социальной

компетентности, с учетом особенностей развития ребенка с аутизмом. Также определены внутренние и внешние признаки развития социальной компетентности. Перспективами дальнейших научных исследований является включение детей в социальную инклюзию.

*Ключевые Солова:* инклюзивное образование, социальная инклюзия, интеграция, социальная компетентность, дети с инвалидностью, дети с аутизмом, внутренние признаки развития социальной компетентности, внешние признаки развития социальной компетентности.

**Introduction.** *Against the background of European integration processes in the Ukrainian society widespread public support is given for the opinion that not only parents and educators but also the public at large should care to solve the problem of rehabilitation of children with developmental disorders, with autism in particular. Children with disabilities must not be isolated from the society, vice versa, they should live and be brought up at home, attend general educational institutions, actively socialize with peers, members of their families, get every possible help and support from the public, businesses, institutions, organizations, etc. We stress that the most effective way to solve the problem of social integration of the disabled children and youth in the area of education is inclusion, and in the social dimension – development of the inclusive society.*

Social and pedagogical aspect of the development of the disabled in the learning environment has been researched by the modern scientists – social care teachers: M. Andrieieva, Yu. Bohinska, O. Rasskazova, S. Kharchenko, M. Chaikovskiy and others.

One of the largest and the most vulnerable category of the disabled children involves autistic children. Public and educators are often

prejudiced against them, which prevents their successful social integration.

Scientists stress that nowadays negative tendencies, which hinder the integration of the abovementioned category of children into the society, can be overcome by educating the society as well as by developing autistic children's social competency. Researching the problem of autistic children's social competency development is closely connected to the research of the peculiarities of the development of primary school children with autism. Developing autistic children's social competency is a highly urgent problem because their social formation and functioning in the society are different due to «various mental disorders and distortions of the structural elements of psyche», - H. Khvorova.

The question of the autistic children's social competency development has been researched by Yu. Deineha, T. Skrypnyk, K. Ostrovska, A. Chuprykov, H. Khvorova, D. Shulzhenko. The scholars mention that the development of the social competency of children with ASD occurs against the background of the development of the psychophysiological defect of their personality. Social competency of such children develop in a more complicated way, as two processes appear to be in constant contradiction: quantitative lack or insufficient quality of child's interaction with the environment (which results in the development of emotional impoverishment, limited social experience) and insensitiveness, or hypersensitivity, which results in excessively expressed reaction to any stimuli – it is reflected in children's misbehavior, unsociability, full or partial social disability.

The aim of the article is to analyze the peculiarities of developing the social competency of autistic primary learners under the conditions of inclusive education.

To solve this task it is necessary to outline the period of the primary

school age. It is worth mentioning that there are various age periodizations in the psychological and pedagogical literature (N. Andrieienkova, L. Bozhovych, L. Dolynska, E. Erikson, V. Koliutskyi, O. Skrypchenko, N. Tkachova), but in terms of our research we will treat the primary school age as the years that coincide with the period of studying at the primary school from 6-7 to 9-11 years old (D. Elkonina, L. Vygotsky).

Taking into consideration the aforesaid, we can claim that the social competency of children with autism is defined as the basic integral characteristic of a personality that reflects achievements in establishing relations with other people, which results in acquiring social emotions, responding to social stimuli, skills formation, that is mastering social reality, which enables a child to develop effectively their social behaviour in accordance with the situation and appropriately to the socially accepted standards and values.

Summarizing analysis of scholars' opinions allows us to specify the above-defined structure of the social competency, as it gives grounds to claim that the development of social competency involves formation of socially significant and social qualities of a personality, acquiring social emotions and reactions, child's perception of their own identity as a member of the society and own social positions; is realized in different forms of personal social behaviour in the society, particular social actions. The abovementioned allows us to state that the development of human sociality can take place only in a particular social situation and depends on particular conditions characteristic for the society, on particular inborn inclinations and qualities, abilities and peculiarities of their morphological and functional advancement in life: development of the organism, severity level of the diagnosis and its clinical course, establishing contacts with the environment.

Taking into account that from the point of view of social pedagogy

autism is first of all a social developmental disorder, not a mental disease, we stress that autistic children's social competency does not differ from the competency of children with normal neural development. However, inner and outer indicators of social competency development are quite specific, consequently, there are some **peculiarities of the development of the social competency**, which is explained by the specificity of the children belonging to the abovementioned category. Furthermore, due to the peculiar state of consciousness, methods and duration of the formation of the social competency will significantly differ.

In terms of autistic children's social competency we defined the indicators of the social competency, and divided them into inner and outer.

Inner indicators of the development of autistic children's social competency include those closely connected to psychophysiological development of children with autism, structure of their personality; to the outer ones belong those that demonstrate the connection between personal advancement and sociocultural circumstances.

**From our point of view inner indicators of social competency development include:** widening fields of social knowledge, skills and habits. Peculiarities of forming this feature are connected with serious problems in acquiring social skills and habits, problems in forming this feature can be caused by hyperactivity, inability to focus or listen for long, rapid fatigability, peculiarities of brain structure and functioning, inability or unwillingness to ask for help, or inappropriate manner of addressing. At the same time neurotypical children develop the ability to work individually according to the given algorithm, evaluate their actions, address questions to more experienced people or find other sources of information; working skills and other social habits get involved into children's psychological space as long-lasting elements that organize it. Taking into consideration this peculiarity it is necessary to provide more time and individual approach

to every child.

Another inner indicator of the social competency is acquiring certain way of thinking and socially accepted ideas about the world. It is worth mentioning that neurotypical children develop eye-mindedness with elements of abstraction, which results in theoretical treatment of reality, arbitrariness of mental processes, inner action plan, whereas autistic children are characterized by mental immaturity, fatigability, oversaturation, irritability or vice versa sluggishness. Their thinking is of concrete, „fixed”, „photographic” character. Thinking flexibility is limited, which explains quite concrete understanding of things. We also should bear in mind that autistic children have some sensory system disorders. One of the reasons why autistic children get reality distortion from the sensory system is the fact that one or several of the input canals (sight, hearing, taste, smell, touch, etc.) is deficit to some extent. Diagnosing which canal exactly malfunctions is difficult because of close interrelation within the sensory system and lesion of one canal causes malfunctioning of others. There is one more opinion that when one canal works the other automatically turns off, that is if a healthy child sees a visual stimulus, they can also hear, analyze and process the information simultaneously. On the other hand, when an autistic child sees and hears, they are not able to quickly process information and pattern their behaviour at the same time. Thus, forming this feature we have to take into consideration that autistic children are hypersensitive or hyposensitive, moreover one and the same child can be hypo – for sight and taste, but hyper – for hearing (Donna Williams).

In the process of social competency formation this peculiarity should be taken into account, alternate rest with work, not to overload children and help them relax.

The third inner indicator we defined as the peculiarity of **forming the system of individual social values**. Neurotypical children acquire socially

valuable qualities through mutual relations, interaction with adults as bearers of socially significant ideals and indeed moral relations; they acquire and comprehend such values as „family”, „nature”, „friendship”; importance of friendship in our life, develop such qualities as kind-heartedness, communicability, friendliness. Autistic children experience certain problems with interaction, distorted interpretation of social relations and their manifestation. They are often incapable or unable to express emotions. Khvorova believes that the abovementioned children are not capable of empathy, tolerance (which refers to the ability to endure the world or themselves). However, we share F. Appe’s opinion that autistic children are not emotionally deaf, are capable of empathy and tolerance, but due to the peculiarities of their development they manifest these socially positive qualities in a quite specific way, behind time because of the peculiarities of their sensory system, which is treated as emotional indifference by the society.

**The fourth inner indicator of the social competency is acquiring action-practical properties that indicate subjectivity of the personality.** The peculiarity of this quality formation with autistic children is caused by their inclination to follow settled life patterns (fixed routes, steady daily routine, repetitive games and conversations, etc.). The less severe ASD is, the more children are capable of assessing their actions. Neurotypical children of the same age demonstrate flexible behaviour, they can control own mental processes, are able to develop inner action plan.

The next inner indicator, which we single out, is development of social emotions. The peculiarities of this quality development is best of all illustrated by comparing with neurotypical children. This age category is characterized by acquiring social sensitivity, dependence of emotions on external factors; manifesting different degrees of shyness when interacting with a person whose opinion is important to the child; developing dignity,

which is expressed by heightened sensitivity to social evaluation. In contrast, autistic children experience problems with control (which refers to the ability to react appropriately to the world and themselves): uncontrolled actions, obsession, excessive infatuation with something, restlessness, acute anxiety, fear (Donna Williams).

In the course of our research we also singled out ***outer indicators of the social competency development***.

To our mind, the first indicator of the social competency is social interaction (social activity). According to L. Vygotsky's developmental theory social environment is the source for developing new formations, since interaction of children with their social environment cultivates and defines the development of age new formations. During this period the personality of the child is developed by inclusion into different social institutions (class, out-of-school organizations).

Peculiarities of this feature development for autistic children depends on the degree of impairments in social interaction. L. Wing (1996) singled out the following four groups: - detached group does not initiate or respond to social interaction; - passive group does not initiate social interaction, but respond to it; - active, but strange group gets into contact with people, but this contact lacks interaction and can be described as unilateral interaction; - unnatural, stylized group initiates and maintain communication, but it is often of formal and rigid character. So, the analysis of the literature proves that children with autism have special developmental peculiarities according to which they establish their social relations in a different way, it results in social rejection and partial or complete isolation of autistic children. In the view of the fact that the society itself is a source of new formations, autistic children face certain difficulties with the social situation of development. The statement can be proved by the attachment children with autism demonstrate to their caregivers, and it does not differ much

from other children's attachment. The abovementioned category of children is capable of identification – they can identify their reflection in the mirror (Dawson and McKissick 1984). Children with autism can recognize other people and communicate it verbally, if they can speak (Ozonoff and others 1990; Smalley and Asarnow 1990). Individuals with autism can differently treat other people and various ways of interaction. Most autistic people are not fully indifferent, they can seek for close relations and try to attract attention (Sigman and others 1986; Sigman and Mundy 1989). We can assume that inability to control other people's attention and trace independently the thing that attracted someone's attention; lack of skills in emotion recognition and classifying; inability to speak, or not enough natural speech to meet their communication needs (it is proved by preserving grammar in writing and phonetics) prevent from establishing effective social relations. As a result, we have sluggishness of the social competency development of the autistic children.

No less important indicator is social communication. Autistic children are characterized by impairments or arrested development in speech which is not compensated by using gestures; not responding to other people's speech (for example, children do not react to their names); stereotypical use of language; using reverse pronouns (the child says «you» instead of «I»); using ordinary words in non-typical meaning (idiosyncratic language), as well as neologisms; inability to initiate and keep up the dialogue; prosody disorders (tone, stresses, intonation); difficulties with understanding the meaning and using terms; unawareness of the language as means of communication and absence of satisfaction from using language for communication. It concerns even those who can speak. Children with autism are often unaware of the fact that language is the means of transferring information to other people. They demonstrate lack of understanding the information implied by gestures, mimicry, facial

expression, intonation of voice, etc., unable to use gestures, mimicry, facial expression, intonation of voice, posture for information transfer. Some autistic children can use gestures, but they appear to be atypical and unrelated to the situation. Those individuals who have good command of vocabulary understand and use words punctiliously, in their direct meaning, demonstrate idiosyncrasy and pomposity in the choice of words and phrases, limited content of the speech. Some verbal autistic individuals are fascinated by words, though they do not use them for social interaction and communication. Children with autism lack eye contact with their interlocutors. However, not all language aspects can be equally impaired by autistic disorders, just like in the case with social interaction.

In contrast, neurotypical primary learners demonstrate need in communication with adults and peers, joint activities with them. They get satisfaction from communication, able to use gestures, mimicry, facial expression, intonation of voice, posture appropriate to the situation.

Another outer indicator is leading activity. At this age stage learning becomes the leading activity (that is purposeful activity of students, which results in the development of personality, intellect, abilities, acquiring knowledge and skills). The peculiarity of this feature formation lies in the fact that neurotypical children want to play a new role – a role of a student – and consequently, perform all the functions of the role; it is explained by their need in a socially significant activity (in our case it is learning in school). At the same time they need playing, because in a game children of this age strive for positions, which they cannot cope with in reality. Role play provides acquiring social knowledge by imitating adults' activities. Playing ceases being the leading activity at the primary school age, but it is still an important constituent of the process of mastering social standards and rules.

Children with autism avoid any new social roles, including the role of

student. Some scholars believe that autistic individuals are not interested in symbolic and role play. We hold a different view and claim that autistic children have a distorted imitating ability, as a result they may misunderstand the concept of the game. They demonstrate lack of interest in playing and in the activity in the whole, concentrate not on the toys, but on some of their parts. Consequently, autistic children have difficulties in following the rules and understanding the course of the game, which in its turn prevents transferring social experience and as a result retarding new formations.

The next outer indicator of the social competency development is social status. The peculiarity of this quality formation lies in the fact that getting a new social status – „schoolchild” is accompanied by the crisis stage in development (7-year-crisis).

We agree with L. Vygotsky’s opinion that it is natural to have crises in the development and the child who has not really overcome the crisis will not be able to fully develop further. It should be stressed that crises do not last long, for about a few months. However, under unfavorable circumstances they can prolong for a year or even two. We think that this period is the most effective time for pedagogical interference in the development of neurotypical children, and the most appropriate for autistic children, since despite quite short duration, stages go by tumultuously and are accompanied by significant progress in the children’s development.

During the crisis period the main contradictions of primary school learners are sharpened: on the one hand, children’s needs have increased whereas their possibilities are still limited; on the other hand – children have new needs which do not sometimes correspond to the earlier formed relations with adults. The abovementioned causes heightening of emotions, which slightly goes down by the third year at school. Children demonstrate impulsivity, undue fatigability, hyperexcitability. During this period of time

children are not motivated, pretentious, quarrelsome (L. Vygotsky, L. Bozhovych). We can claim that the transition stage is connected with the appearance of a new system formation – inner position that expresses a new level of self-consciousness. This inner position contradicts the social situation of development.

Closer to the beginning of the next period children can already realize and control their emotional states, for example, anxiety, anger, etc. (of course, it is not complete, but partial control). At primary school age quite distinctive differentiation of feelings is observed (aesthetic, moral, intellectual and others). Children of this age group are characterized by vulnerability and suggestiveness. Children's volitional qualities are developing: arbitrariness of self-control (for example, children can obey the timetable), persistence. Close to the third year of studying the stable period begins, which is characterized by smooth development, without dramatic shifts and changes in the personality of the child. Minor changes that happen during a long period of time are usually unnoticed by people around. But they are accumulated and cause a qualitative leap in the development: new age formations appear. Only comparing the beginning and the end of the stable period it is possible to imagine the enormous way that children have covered in their development. The age new formations that have been developed so slowly and long appear to be lasting and are fixed in the structure of the personality.

Children with autism demonstrate acute anxiety; inability to adapt to changes in their life without specialists' and parents' help. New social situations and conditions provoke inadequate reactions and panic attacks, aggressiveness, tantrums, etc. We believe that the situation gets worse due to the fact that this period is the most difficult for children's relatives and parents. Adults, who realize the diagnosis and their child singularity, try persistently to interfere in the child's world, spend all possible resources to

define the reason, which often causes children's aggressiveness and parents' depression. Consequently, therapy takes longer time.

The last outer indicator of the social competency development concerns the main social and psychological mechanisms of socialization. Neurotypical children tend to imitate adults' behaviour; have habits of certain social situations, their inner uncritical perception – real belief in the existing ideals, rules, standards. Children with autism lack representation of inner conceptions or information read-out. They are not able to imitate other people's behaviour and as a result experience troubles with getting social experience.

In the process of forming outer and inner indicators of the social competency of children with autism it is worth taking into account not only the peculiarities of the social competency development, but also the individuality of every child. There cannot be any «typical» behaviour for people affected by autism, so it is impossible to generalize and create an integrated image of a patient for every case. Autistic individuals can act differently, their behaviour depends on the type of autism spectrum disorder and its manifestation in every particular case.

**Conclusion.** The generalization of all the mentioned above gives us grounds to claim that formation of the social competency of autistic children is an essential condition for the development of human and healthy society, as it is the acquiring of the social competency that ensures children's attraction into the society. However, forming the social competency of children with autism we should take into consideration the peculiarities of the development and rely on the outer and inner indicators of their social competency development.

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