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Results of Monitoring the Development of Children's Tolerance in a Family Club

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Objective: develop tolerance of healthy children to children with disabilities within a family club and evaluate the monitoring results. The authors assume that the results of the research carried out in 2012-2014 on a limited territory (Severo-Yeniseysky District of the Krasnoyarsk Territory (Krai)) demonstrate the general peculiarities of an environment of the children's development influencing the formation of public opinion and inadequate social attitude of teachers, over-five pre-schoolers, their parents, and, probably, the local residents to children with disabilities.

Research participants: children attending the senior group of the children's preschool education centre and children with disabilities, attending a family club together with their parents.

Methods: monitoring of children's tolerance development in a family club is based on the method by Uruntaeva G.A., Afon'kina Iu.A., modified by Bocharova Iu.Iu., Bektashkina E.D. for tracing certain moral mindset and empathy with the calculation of toleration levels; significance of difference for dependent samples is calculated with Student's t-test.

Monitoring results: tolerance level has significantly increased ($p < 0.05$, Student's t-test for linked samples, $t_{ex} = 2.72$ and 2.55 correspondingly under $t_{cr} = 2.20$) in different situations and in summary ($p < 0.01$, $t_{ex} = 6.37$, $t_{cr} = 3.11$); the most distinctive result: by the end of the research there were no children with unacceptable level of tolerance left. The family club for healthy children, children with disabilities and their parents is successful in tolerance development and improvement of a multistage system of inclusive education. In the scope of a single social organization this objective would hardly be realistic, as a family club on its own may hardly create a social environment tolerant to children with disabilities. However, on a small territory this task was fulfilled, provided that all resources of the district were involved.

Keywords: tolerance development, healthy preschool children aged over five, children with disabilities, family club, inclusive education.

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Research area: culture studies.

Creation of optimal conditions for the successful social development and social adaptation of children, regardless of their health and abilities, is provided by the law on education in the Russian Federation. Nevertheless, a part of children with disabilities still experience some difficulties during their integration into the society (Amonashvili, Sh., 2015; Masharova, T.V., et al., 2014; Dorokhova, T.S., Kudryavtseva, E.O., 2013; Ahsan, M. T., et al., 2014; Morris, J., 2014; Gasser, L., et al., 2014; et al). In Russia it is caused by several reasons, the main of which is the unpreparedness for tolerance towards children with disabilities of the environment and the society members including teachers and parents (Alekhina, S.V., 2012; 54 Kulagina, E.V., 2009; Stepanova, O.A., Iusupov, R.G., 2013; Kelly, A., Barnes-Holmes, D., 2013; Chiner, E., Cardona, M. C., 2013; et al.).

The objective of the research is to develop tolerant attitude of healthy children to children with disabilities within a family club and evaluate the monitoring results.

Hypothesis. For the successful development of tolerance towards children with disabilities, the society needs to meet the following conditions: begin working on changing the attitude towards children with disabilities through organized groups of children attending -pre-school education facilities (PEF); organize some clubs at PEFs for the joint creative activity of teachers, children and their parents, following the legislation and using Russian and foreign experience of integrating children with disabilities into the society; build a pattern of social partnership to facilitate the integration of children with disabilities into the society.

Materials and methods

The present research was carried out from 2012 till 2014 on the basis of a PEF in Severo-Yeniseysky district and a weekend family

club created there to organize joint creative activity and facilitate integration of children with disabilities into the society. Events at the club involved the resources available in the district and help of the children's parents. The participants of the research are children of the senior group of the PEF and a heterogenic group of children with disabilities attending the family club with their parents. The level of tolerance of healthy children to children with disabilities was evaluated with the diagnostic method of "Story pictures" by Uruntaeva G.N. and Afon'kina Iu.V. modified by Bocharova Iu.Iu., Bektishkina E.D. and given a score. The maximum score on each scale is 6, the maximum total score is 24. The more score a respondent gets, the higher is his/her level of tolerance; the score ranging from 24 to 17 is favourable level, from 16 to 9 is relatively acceptable level, and from 8 to 0 is unacceptable level.

Used statistic methods: determination of difference significance for linked samples with Student's t-test.

Research results

A procedure for monitoring integration and socialization processes of preschool over-fives and children with disabilities was developed. The monitoring procedure included observation of the children's creative activities in games, study of photographs and video records of interaction between the children; criteria for such moral representations as care – indifference, generosity – greediness, industriousness – laziness, truthfulness – untruthfulness and the system for evaluation in score were developed. Table 1 presents the results of the tolerance level monitoring of the healthy children.

As we see in Table 1, the tolerance level in the situations of care – indifference, generosity – greediness significantly increased ($p < 0.05$; Student's criterion for linked samples, $t_{ex} = 2.72$

Table 1. Results of the tolerance level monitoring of the healthy children (started in 2012, finished in 2014)

Respondent No.	Tolerance levels in different situations, score				Total score
	1 Care - indifference	2 Generosity - greediness	3 Industriousness - laziness	4 Truthfulness - untruthfulness	
No. 1	4/5	6/6	4/5	3/5	17/21
No. 2	4/6	4/5	6/5	3/6	17/22
No. 3	4/4	3/5	4/5	4/6	15/20
No. 4	3/6	6/6	4/6	6/6	19/24
No. 5	6/6	3/4	3/3	3/4	15/17
No. 6	1/5	4/4	3/3	3/3	11/15
No. 7	3/5	3/3	2/4	2/4	10/14
No. 8	4/4	4/4	2/2	6/6	16/16
No. 9	2/2	2/2	2/2	2/3	8/10
No. 10	3/3	2/2	3/4	2/2	10/11
No. 11	3/4	0/2	3/1	2/3	8/10
No. 12	6/6	4/5	4/5	5/6	19/22

and 2.55 correspondingly with $t_{cr}= 2.20$), in the situations of truthfulness – untruthfulness the tolerance level significantly increased ($p<0.01$, $t_{ex}=3.76$, $t_{cr}=3.11$). The indicators for industriousness – laziness did not show any significant dynamics, which may be explained with its low communicative dependence. The total level of tolerance significantly increased ($p<0.01$, $t_{ex}=6.37$, $t_{cr}=3.11$). Positive change of tolerance shown by the pre-schoolers is demonstrated in Figure 1.

Monitoring results of the tolerance level of the healthy children expressed with a three-score scale are presented in Table 2.

Comparing the shares of children with the favourable tolerance level in the monitoring process, we may state that the situation has significantly changed: the proportion has grown from 33 to 58 per cent. Undoubtedly, a principally positive result is the absence of children with an unacceptable tolerance level in the club at the end of the research.

Similar results demonstrating the influence of the joint creative activity on the growth of tolerance in monitoring research were obtained by

some other authors (Maller, A.R., 2015; Sirotiuk, A.S., 2014; Shipitsyna, L.M., 2015).

Club activities efficiently shape up and develop interpersonal relations due to lively communication between both healthy children and children with disabilities (Fetisova, A.V., 2014). The activity of family clubs in the Krasnoyarsk Territory (Krai) shows that efficient interaction in the system of “a family with a healthy child – teachers – a family with a child with disabilities” facilitates development of tolerant attitude of all participants of such interaction and fits our experiment.

The research promotes the idea that development of a tolerant attitude of healthy children to children with disabilities leads to the development of tolerance in the local society. It becomes possible because parents attending the club at the PEF also work on their level of tolerance together with their children (Bektiashkina, E.D. et al., 2015). Due to the limitedness of the territory, these people and their immediate environment tightly interact with different structures of the districts, or represent the administration, social security

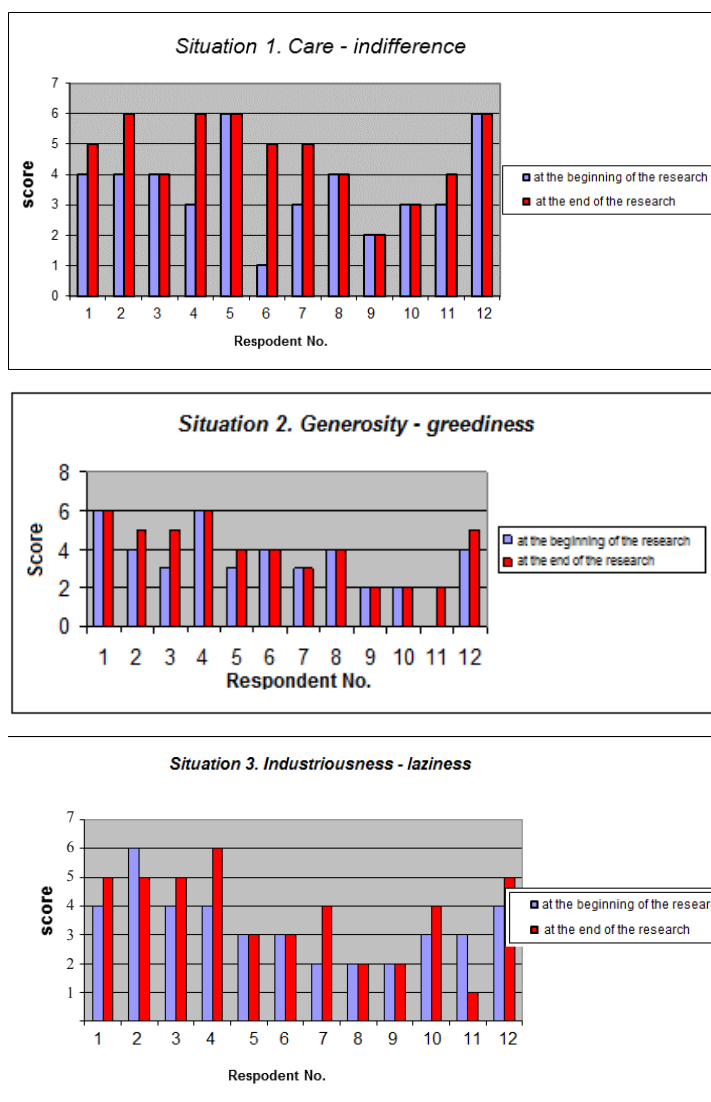


Fig. 1. Change of tolerance of preschool-aged children in the situations of care – indifference, generosity – greediness, industriousness – laziness, truthfulness – untruthfulness, total development level (score)

bodies, the bodies of public health, culture, social and religious organizations etc. The interaction grew into a consistent sustainable pattern of social partnership in the district.

Conclusions

1. It is proved that children of pre-school age attending pre-school education facilities and a family club develop tolerant attitude to children with disabilities more successfully than others. The data of the three years'

monitoring shows, that the level of tolerance of such children significantly increased ($p < 0.05$, Student's t -test for linked samples, $t_{ex} = 2.72$ and 2.55 correspondingly with $t_{cr} = 2.20$) in different situations and in total ($p < 0.01$, $t_{ex} = 6.37$, $t_{cr} = 3.11$), by the end of the research there were no children with unacceptable level of tolerance left.

2. It has been proved that the family club was the key point in the development of tolerance by creating conditions for changing

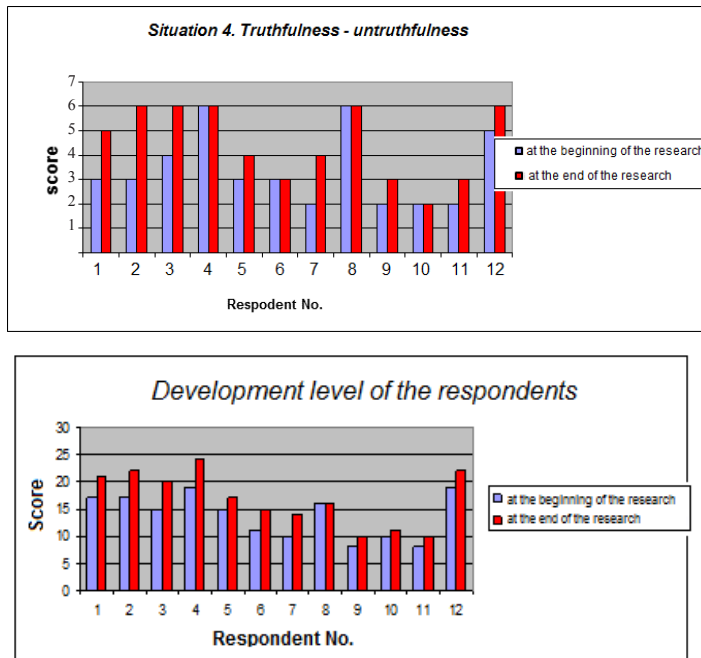


Fig. 1. Continue

Table 2. Monitoring results of the tolerance level of the healthy children expressed with a three-score scale

Tolerance level of the healthy children	Number of children, per cent	
	At the beginning of the research	At the end of the research
Unacceptable	17	0
Relatively acceptable	50	42
Favourable	33	58

the attitude of people living in a small territory towards children with disabilities. The club involved children and their parents into joint creative facilities, expanded the range of social partnership events using the resources available in the district, drawing the attention of the

community to the problems of families bringing up children with disabilities.

3. The developed pattern of social partnership for integration of children with disabilities into the community may be recommended for other small territories.

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Итоги мониторинга формирования толерантности у детей в условиях семейного клуба

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Цель: сформировать толерантное отношение здоровых детей к детям с ограниченными возможностями здоровья (ОВЗ) в условиях семейного клуба и оценить итоги мониторинга. Предполагалось, что результаты исследования, проведенного в 2012-2014 годах в малой территории (Северо-Енисейский район Красноярского края), отражают особенности организации развивающей среды, способствующей изменению общественного мнения и неадекватных социальных проявлений у педагогов, детей старшего дошкольного возраста и их родителей и, возможно, жителей района к детям с ОВЗ.

Участники исследования: дети старшей группы детского образовательного учреждения и дети с ОВЗ, вместе посещающие семейный клуб со своими родителями.

Методы: мониторинг формирования толерантности у детей в условиях семейного клуба на основе методики Г.А. Урунтаевой, Ю.А. Афонькиной, в модификации Ю.Ю. Бочаровой, Е.Д. Бектяшкиной для отслеживания определенных нравственных установок и эмпатии с расчетом уровней толерантности; достоверность различий для зависимых выборок по t-критерию Стьюдента.

Итоги мониторинга: уровень толерантности значимо возрос ($p < 0,05$, t-критерий Стьюдента для связанных выборок, $t_{01} = 2,72$ и $2,55$ соответственно при $t_{кр} = 2,20$) по различным ситуациям и суммарно ($p < 0,01$, $t_{01} = 6,37$, $t_{кр} = 3,11$); наиболее выраженный результат: на конец исследования среди детей не осталось испытуемых с недопустимым уровнем толерантного поведения. Семейный клуб для здоровых детей, детей с ОВЗ и их родителей успешно формирует толерантность и способствует совершенствованию многоступенчатой системы инклюзивного образования. В масштабе отдельно взятой общественной организации данная задача была бы невыполнима, поскольку самостоятельно семейный клуб едва ли в силах сформировать социальную среду, толерантную к детям с ОВЗ. Однако в малой территории при привлечении всех ресурсов района эта задача была решена.

Ключевые слова: формирование толерантности, здоровые дети старшего дошкольного возраста, дети с ограниченными возможностями здоровья, семейный клуб, инклюзивное образование.

Научная специальность: 24.00.00 – культурология.
