ORIGINAL ARTICLE

RESULTS OF COMPETENCE FORMATION IN PARENTS OF CHILDREN WITH MODERATE INTELLECTUAL DISABILITIES

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ABSTRACT

The aim: To analyze the levels of competence formation in parents of senior preschoolers with moderate ID and to substantiate the obtained indicators for practical use.

Materials and methods: The sample of the study was 162 persons: experimental group (EG) – parents (or persons substituting them) of 53 preschoolers with moderate ID – 96 persons (out of the total number, 12 children are brought up by mothers without fathers); control group (CG) – parents (or persons substituting them) of 41 preschoolers with MID – 66 persons (out of the total number, 16 children are brought up by mothers without fathers).

Results: The use of Fisher's φ-criterion allowed to draw the following conclusions: first, at the ascertaining stage of the experiment the characteristics of the EG and CG according to certain indicators of parental competence were homogeneous (α=0.05). At the control stage – significantly different indicators of the experimental group (α=0.01). Secondly, positive changes in the identified characteristics in the EG and absence of such changes in the CG, gives grounds to argue about the effectiveness of implementation of the developed and presented in the experimental model forms, methods and conditions for the development of parental competence.

Conclusions: Thus, despite almost identical indicators of competence levels in parents of the EG and CG at the ascertaining stage of the experiment, the molding stage testified to the specific advantage of representatives of the experimental group over representatives of the control group on levels of development of motivational-personal, gnostic, communicative-activity criteria of competence of parents of children with moderate ID.

KEY WORDS: parental competence, children of senior preschool age, moderate intellectual disability, mental health

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INTRODUCTION

The current stage of development of Ukraine as a democratic state is marked by increasing societal tolerance for individuals with intellectual disabilities (ID), which leads to increased public demand for psychological science in terms of finding effective ways of social adaptation of such children in accordance with society requirements. The most difficult in this regard is transition from preschool to school, because on the formation of the child's school readiness depends the quality of his/her education in general. In this sense the category of senior preschoolers with moderate intellectual disabilities (MID) is extremely vulnerable, as their disability makes it impossible for them to naturally develop patterns of behavior that ensure their effective adaptation to school conditions as a new social development situation. In turn, development of adaptability to changes in the surrounding reality is formed from childhood and is carried out in the process of primary socialization, the main subjects of which are parents. It is common knowledge that as the child grows, there are corresponding significant changes in the system of relationships "parents – children with normative development" and the child's autonomy increases. However, Ukrainian researcher A. Dushka emphasizes the mostly stable nature of the relationship between children with ID and their parents at different stages of ontogenesis, in contrast to the system of relationships "parents – child with normative development" [1]. Important for our study is Brian D. Johnson's (USA, 2014) research. The scientist analyzed interdependence between the developed parental competence and its positive impact on the emotional, cognitive and behavioral development of children [2]. The author team C. Ruiz–Zaldibar, I. Serrano–Monzó, A. Mujika (Spain, 2018), studying the competence of parents during 2003-2016, tried to prove the effectiveness of early intervention in the relationships between parents and their 2-5-year-old children, in order to follow the latest positive patterns of parental behavior, in particular on the formation of a healthy lifestyle [3]. Despite some contradictions, revealed by the authors, we agree with their position on the children's ability to imitate patterns of parental behavior from childhood. Related to the topic of our study are the scientific and practical positions of L. Lee McIntyre (USA, 2013) on the development of a series of educational activities (11 programs) aimed at improving the competence of parents of children with ID aimed

Table I. Data of self-assessment of competence formation in parents of senior preschool children with MID according to motivational-personal criterion before and after the molding experiment (in %)

Stage of experiment	Group	Low level		Medium level		High level		φ
		persons	%	persons	%	persons	%	
Ascertaining	CG	35	53,1	26	39,3	5	7,6	φ*emp = 0.088
	EG	53	55,3	35	36,4	8	8,3	
Molding	CG	30	45,4	31	47	5	7,6	φ*emp = 5.332
	EG	7	7,3	67	69,8	22	22,9	

Table II. Data on competence formation in parents of senior preschool children with MID according to the gnostic criterion before and after the molding experiment (in %)

Stage of experiment	Group	Low level		Medium level		High level		φ
		persons	%	persons	%	persons	%	
Ascertaining	CG	50	75,7	16	24,3	–	–	φ*emp = 0.513
	EG	76	79	20	21	–	–	
Molding	CG	42	63,6	24	36,4	–	–	φ*emp = 6.421
	EG	15	15,6	68	70,9	13	13,5	

Table III. Data on the structure of value orientations of parents of senior preschool children with MID before and after the molding experiment

№	List of values	Before the experiment		After the experiment	
		CG (rank)	EG (rank)	CG (rank)	EG (rank)
	List A (terminal values)				
1.	Active way of life	9	6	7	5
2.	Life wisdom	15	7	11	14
3.	Health (physical and mental)	3	2	4	2
4.	Interesting work	5	9	6	11
5.	Beauty of nature and art	18	18	18	18
6.	Love	4	3	3	6
7.	Financially secure life	1	4	1	3
8.	Good and loyal friends	7	10	10	12
9.	Public recognition	8	11	9	17
10.	Cognition	10	13	13	16
11.	Productive life	12	12	8	15
12.	Development	14	14	12	4
13.	Entertainments	11	15	17	8
14.	Freedom	13	8	5	9
15.	Happy family life	2	1	2	1
16.	Happiness of others	17	16	16	13
17.	Creativity	16	17	14	10
18.	Self-confidence	6	5	11	7
	List B (instrumental values)				
1.	Neatness	7	7	7	11
2.	Good manners	1	1	2	10
3.	High requests	17	18	18	17
4.	Cheerfulness (sense of humor)	6	5	6	3
5.	Discipline	10	11	10	13
6.	Independence	9	8	8	12

7.	Intolerance of drawbacks in oneself and others	18	17	17	18
8.	Education	13	14	15	5
9.	Responsibility	4	3	3	2
10.	Rationalism	14	12	13	8
11.	Self-control	12	10	11	7
12.	Courage in defending one's own opinion and view	16	15	14	15
13.	Firm will	11	13	12	16
14.	Tolerance	8	9	8	4
15.	Liberality	15	16	16	14
16.	Honesty	2	2	1	1
17.	Efficiency in business	5	6	5	9
18.	Sensitiveness	3	4	4	6

Table IV. Data on competence formation in parents of children with MID according to the communicative-activity criterion before and after the molding experiment (in %)

Stage of experiment	Group	Low level		Medium level		High level		φ
		person	%	person	%	осіб	%	
Ascertaining	CG	33	50	27	41	6	9	φ*emp = 0.676
	EG	58	60,4	31	32,2	7	7,2	
Molding	CG	22	33,3	38	57,5	6	9	φ*emp = 2.32
	EG	19	19,8	59	54,1	18	18,7	

Table V. Data from the study of the types of parental attitudes to senior preschool children with MID before and after the molding experiment on the test questionnaire of A. Varg and V. Stolin (in points)

№	Scales	Before the experiment		After the experiment			
		indicator		indicator			
		CG	EG	CG	+ -	EG	+ -
1.	Acceptance – rejection	2,1	2,04	2,44	+0,33	4,02	+1,98
2.	Cooperation	3,1	3,14	3,57	+ 0,47	4,61	+1,47
3.	Symbiosis	1,94	1,89	1,97	+ 0,03	3,85	+1,96
4.	Control	2,16	2,08	2,67	+ 0,51	4,01	+1,93
5.	Infantilization	1,96	1,98	2,11	+0,15	3,56	+1,58

Table VI. Data on the development levels of the structural components of the competence of parents of senior preschool children with MID before and after the molding experiment (in %)

Levels	Before the experiment						After the experiment					
	Distribution of parents by criteria						Distribution of parents by criteria					
	CG			EG			CG			EG		
	MP	G	CA	MP	G	CA	MP	G	CA	MP	G	CA
High	7,6	0	9	8,3	0	7,2	7,6	0	9	22,9	13,5	18,7
Medium	49,3	24,3	41	36,4	21	32,2	47	36,4	57,5	69,8	60,9	54,1
Low	53,1	79	50	55,3	79	60,4	45,4	63,6	33,3	7,3	15,6	19,8

at leveling children's problem behavior [4]. Hence arises the need to develop and implement an effective system that will ensure the competence development in parents of children with MID.

THE AIM

The aim of the study is to analyze the levels of competence formation in parents of senior preschool children with MID and to substantiate the obtained indicators for practical use.

Criterion	Levels of competence development in parents of children of senior preschool age with moderate intellectual disabilities		
	Low level	Medium level	High level
Motivational personal-	– lack of awareness of the importance of personal contribution to the process of forming the readiness of a child of SPA with MID for school; – inability to manage one's emotional manifestations and control them in any educational situation with children of SPA with MID; – lack of ability to analyze emotional and rational components of the process of upbringing/developmental activity/unformed need to achieve an effective result of upbringing/developmental activity	– partial acceptance of responsibility for the process of forming social readiness for school in children of SPA with MID; – psychological positions (empathy, self-regulation, self-control) in relation to a child of SPA with MID; – lack of regularity in the acquisition of knowledge, skills, abilities for the successful formation of social readiness for school; parents have an unstable desire for effective upbringing/developmental activities	– humanistic attitude (humanism and sociability as key personality traits) to the process of forming the readiness for school in a child of SPA with MID, recognition of the priority of family values in the process of social development of children with MID; – presence and structure of their own value orientations, which provide effective upbringing/developmental activities; – formation of stable manifestations of the desire to succeed in upbringing/developmental activities as a holistic phenomenon 3
Gnostic	– predominance of elementary ideas about the prospects of development of children with intellectual disabilities; – prevalence of superficial knowledge about the essence of the process of forming readiness for school; – inability to use effective methods of raising children (methods of copying, imitation, stimulating behavior, methods of organizing activities and formation of experience of social behavior and activities); – superficial knowledge about the specifics of acquisition of communicative and social experience by children of SPA with MID	– understanding the prospects for the development of children with MID; – adequacy of ideas about peculiarities of the process of forming readiness for school; – application of effective methods of raising children (methods of copying, imitation, stimulating behavior, methods of organizing activity and formation of experience of social behavior and activities); – a sufficient level of knowledge about the specifics of acquisition of communicative and social experience by children of SPA with MID	– demonstration of stable knowledge about the prospects of development of children with MID; – awareness and understanding of the essence of the process of forming readiness for school; – systematic application of effective methods of raising children (methods of copying, imitation, stimulating behavior, methods of organizing activity and formation of experience of social behavior and activities); – mastering a set of knowledge on the specifics of acquisition of communicative and social experience by children of SPA with MID; having a clear idea of its goals and final results 4
Communicative activity	– application of the authoritarian style of communication in the vast majority of upbringing situations; – inability to effectively plan and implement their upbringing/developmental activities, inability to analyze compliance of the results of educational activities with the goals and objectives; – application of forms and methods of upbringing/developmental activities that do not correspond to the age and ID of children; – situationality and inadequacy of the conditions of communicative skills manifestations; – lack of own initiative and low readiness to interact on a systematic basis with specialists	– tendency to stability of organizational skills manifestation; – formation of most of the necessary skills for upbringing/developmental activities; - ability to apply communication skills productively and adequately to interaction situations; – unsystematic search/analysis of the effectiveness of certain methods, techniques, tools and influences used in upbringing/developmental activities; - frequency of adjustment to interaction with specialists in the field of special/inclusive education	– integrity of upbringing/developmental activities, effective use of tools, forms and methods of work with children of SPA with MID, appropriate to the age, intellectual development of children; – full scope in mastering all the necessary cognitive skills for upbringing/developmental activities; – formation of a full set of communicative skills of upbringing/developmental activity; – willingness to interact with specialists in the field of special/inclusive education on a regular basis; – demonstration of a high level of development of communication culture

Fig. 1. Criteria for the effectiveness of the process of developing the competence of parents of senior preschool children with moderate intellectual disabilities

MATERIALS AND METHODS

In order to ensure reliability of provisions, conclusions and solutions of the outlined objectives of the study a set of complementary methods was used:

theoretical: comparison and systematization of the research material – to determine the levels of competence in parents of children with MID; deductive – for a systematic description of the phenomenon under study; inductive – to establish patterns, systematize the results of empirical research; modeling – to design an experimental research model;

empirical: a test methodology of self-analysis of parental competence has been developed for the diagnostics of personal-motivational, gnostic and communicative-activity criteria of competence formation in parents of children of this category;

mathematical-statistical: Fisher's angular transformation criterion to establish the reliability of differences between the indicators of experimental groups.

Within the framework of creating a criterion base, we apply the traditional approach in the distribution of the levels of the described indicators for each of the criteria of competence formation in parents of children with MID, namely: I level – high, II level – medium and III level – low. Detailed characteristics of the indicators of criteria and their level differential are presented in Fig. 1.

RESULTS

A molding experiment was conducted during four stages

1. Theoretical-organizational stage was aimed at determining the socio-psychological difficulties of parents of senior preschool children with MID, associated with underdeveloped competence.
2. At the preparatory stage, a diagnostic complex was used to identify the levels of competence formation in parents of children with MID.
3. Approbation stage of the molding experiment was aimed at testing a set of corrective and developmental measures appropriate to the individual characteristics and requests of parents of senior preschool children with MID.
4. Final stage envisaged recording indicators of the effectiveness of the use of a set of correctional and developmental measures for parents and analyzing results of the molding experiment.

The first object of analysis in our research was the empirical data obtained in the study of motivational and personal criteria of competence of parents of children with MID. To determine the level of development of this criterion, we formed a diagnostic toolkit, which included: methods of self-assessment of parents of senior preschool children with MID, as well as M. Rokych's method "Value Orientations".

With the help of the specified tools, diagnostics of indicators of parental competence according to motivational-personal criterion is carried out in control and experimental groups.

Analysis of the experimental data presented in Table I shows that at the beginning of the experiment the numerical values of self-esteem of parents of senior preschool children with MID in CG and EG on all indicators of motivational-personal criterion of parental competence do not differ significantly.

When studying the relevant experimental data at the molding stage of the experiment (see Table II), we concluded that the numerical values of self-esteem of parents of senior preschool children with MID in EG and CG on all indicators of motivational-personal criterion had significant differences. Thus, the parents of EG were affected by the growing dynamics of changes in the indicators of motivational-personal criteria of competence of parents of senior preschool children with MID (from +14.6 % at high and up to +33.4 % at medium levels).

Analysis of the data from Table III shows that at the ascertaining stage of the experiment significant differences in the preference for certain values between the studied parents of the experimental and control groups were not detected. Thus, parents of both CG and EG referred to important terminal values a happy family life, love, financially secure life, self-confidence, health, active life; to indifferent – life wisdom, interesting work, good and loyal friends, public recognition, knowledge, productive life; and to rejected – high demands, intolerance of drawbacks in oneself and others, education, rationalism, courage in defending one's own opinion/view, breadth of views. Thus, for both groups of respondents at the beginning of the experiment the most characteristic were the so-called values of personal life.

Diagnostics of the gnostic criterion of parental competence was carried out by using self-assessment methods, test tasks. First of all, we used the data of self-assessment of parents of CG and EG, obtained using a specially designed comprehensive methodology. The results of the survey are presented below in the form of a summary Table II.

According to the data, presented in Table III, it can be concluded that at the ascertaining stage of the experiment values of the indicators of the gnostic criterion of parental competence in CG and EG did not have significant differences. The highest value was found on such an indicator of the gnostic criterion as "knowledge of peculiarities of functioning of families with children with ID". The lowest value for parents of CG and EG had such an indicator as "knowledge of the nature, prospects of development and the process of raising children with intellectual disabilities". In general, we can summarize that at the ascertaining stage of the experiment, rather low scores were recorded for all indicators of this criterion in both groups of parents, which indicates a rather superficial special knowledge of the respondents.

Analysis of the obtained diagnostic information we began with the study of self-assessment data according to the communicative-activity criterion of competence, provided by parents of the CG and the EG at the ascertaining and molding stages of the experiment. The results of self-assessment are presented below in the form of a summary table IV.

As we can see, at the ascertaining stage of the experiment there were practically no discrepancies between results of self-assessment by parents of the control and experimental groups of the complex of upbringing activity skills. The highest values of parents of both groups corresponded to such an indicator of communicative-activity criterion of

parental competence as "communicative skills". The lowest value in the representatives of EG and CG was found on such an indicator as "organizational skills".

If we compare obtained scores of parents' self-esteem for each of the indicators of the communicative-activity criterion of parental competence at the molding stage of the experiment, then, as it can be seen from Table V, changes between CG and EG are noticeable. Summarizing the above mentioned, we can state that at the molding stage of the experiment there is an increase in the values of the communicative-activity component of parental competence in the EG, which indicates a positive effect of experimental work.

Analysis of the empirical data provided in Table VI, which characterize results of the diagnostics at the ascertaining stage of the experiment allows us to draw the following conclusions: first, the types of parental attitudes on 5 scales of parents of both groups did not differ significantly (difference ranges from 0.02 to 0.3 points); second, parents of CG and EG received low scores on the scale "control" (2.16 and 2.08 points, respectively), which reflects the form of control over the child's behavior. Low scores on this scale mean that respondents demand excessive obedience and discipline from the child, show authoritarianism in communication with them, they try to impose their own point of view on the child, despite the fact that the child does not understand/realize it; third, parents' scores of both groups on the scale of "infantilization", which characterizes the child's cooperation with parents, are close to low (1.96 and 1.98 points). Low scores on this scale indicate parents' attitude to the child as one who will not succeed in life due to low abilities, low intellectual development. Most of these parents feel anger, irritation, annoyance and resentment towards the child. They do not trust their child, they blame him/her for failure; fourth, respondents showed rather low scores on the scales of "acceptance-rejection" and "symbiosis", which indicates parents' inability at the ascertaining stage of the experiment to fully accept the child's condition as it is, to overprotect him/her.

The data obtained at the control stage of the experiment (Table V) shows that as a result of implementation of the developed and justified organizational-psychological conditions, we were able to achieve significant positive changes in the types of parental attitudes to children with MID. Thus, there was a significant increase in scores on all scales: "Acceptance – rejection" by +1.98; "Cooperation" by +1.47; "Symbiosis" by +1.96; "Control" by +1.93; "Infantilization" by +1.58. These results allow us to conclude that the types of parental attitude to children with MID in the EG at the end of the experiment were characterized by the desire of respondents to a symbiotic relationship with the child, his/her acceptance and respect for him/her.

In the process of conducting an experiment aimed at assessing the quality of parental competence development on the basis of generalized results, we obtained a distribution of parents of the experimental and control groups according to the levels of development of their competence for each of the indicators. The results of this distribution at the ascertaining and control stages of the experiment are presented in Table VI.

The obtained data on the positive dynamics of competence development in parents of senior preschool children with MID generally affect formation of social readiness for school of children of the studied category.

We consider it necessary to note that all statistical data obtained during the experiment were processed to determine reliability of the differences using the multifunctional statistical criterion φ* – Fisher's angular transformation.

The use of Fisher's φ-criterion allowed to draw the following conclusions: first, at the ascertaining stage of the experiment the characteristics of the EG and CG according to certain indicators of parental competence were homogeneous (α=0.05): on the motivational-personal criterion (low level of parents of children with moderate ID =55.3 % against parents of children with mild ID =53.1 %, φ*emp=0.088), on the gnostic criterion (low level of parents of children with moderate ID = 79 % against parents of children with mild ID = 75.7 %, φ*emp=0.513) and on the communicative-activity criterion (low level of parents of children with moderate ID = 60 % against parents of children with mild ID =50 %, φ*emp=0.676). At the control stage – significantly different indicators of the experimental group (α=0.01) due to the growth of respondents with medium and high levels and, accordingly, a decrease in low levels, namely: on the motivational-personal criterion (low level of parents of children with moderate ID = 7.3 % against parents of children with mild ID = 45.4 %, φ*emp=5,332), on the gnostic criterion (low level of parents of children with moderate ID = 15.6 % against parents of children with mild ID = 63.6 %, φ*emp=6,421) and on the communicative activity criterion (low level of parents of children with moderate ID = 19.8 % against parents of children with mild ID = 33.3 %, φ*emp=2.32). Secondly, positive changes in the identified characteristics in the EG and absence of such changes in the CG, gives grounds to argue about the effectiveness of implementation of the developed and presented in the experimental model forms, methods and conditions for the development of parental competence.

It should be noted that the development of mental health [5] against the background of intellectual disabilities of preschool children due to low levels of awareness of the child as a member of a social group, immature ability to perceive and produce information about themselves, their preferences, important adults, inability to behavioral values, high levels of anxiety, aggressive tendencies, lack of independence and helplessness in helping others, expectation of help from adults, inadequacy of emotionally violent reactions, accompanied by frequent mood swings, desire for solitude [6]. In this aspect, it is important to increase the competence of parents according to certain criteria for the formation / development of mental health of children with ID.

DISCUSSION

Our study confirms and complements the data on the importance of developing the competence of parents of children with MID. Therefore, during the study, the obtained

experimental data are consistent with the main provisions of scientists involved in the research problems, namely:
– development of parental competence has a positive effect on the formation of social skills and abilities of children [5];
– parents' awareness of themselves as educators of the child increases the ability to acquire special psychological and pedagogical knowledge, using reliable sources of information (scientific literature, scientific articles, blogs of specialists in medicine/pedagogy/psychology, attending consultations of specialists) [5], [6], [7];
– developing competence in parents of children with ID increases parents' desire to succeed in upbringing [7];
– development of parental competence significantly increases the ability to take specific actions and measures in terms of organizing the lives of children with ID [7], [8].

CONCLUSIONS

The conducted experimental work makes it possible to make certain generalizations. At the ascertaining stage of the experiment, a significant percentage of parents of the EG and CG (in the range from 50 % to 79 %) by motivational-personal, gnostic, communicative-activity criteria of development of their competence were at a low level, and after the molding stage of experimental research the percentage of EG respondents with a low level on all criteria decreased to 7.3 % – 19.8 %, while the relevant CG criteria were recorded in the range from 33.3 % to 63.6 %. Thus, at the control stage of the experiment, a high level was diagnosed in parents of the EG in the range from 7.2 % to 19.8 % (depending on the indicator). Thus, despite almost identical indicators of competence levels in parents of the EG and CG at the ascertaining stage of the experiment, the molding stage testified to the specific advantage of representatives of the experimental group over representatives of the control group on levels of development of motivational-personal, gnostic, communicative-activity criteria of competence of parents of children with moderate ID.

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