

PSYCHOCORRECTION OF PERSONAL FACTORS THAT IMPEDE THE SOCIALIZATION OF PERSONS WITH VISUAL IMPAIRMENTS

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ABSTRACT	KEY WORDS
<p>The article examines the problem of visual impairment as a complex biopsychosocial problem associated with changes in living conditions and the functioning of a person’s mental organization. A visual defect increases psycho-emotional stress, makes it difficult to overcome difficult situations, causes intrapsychic conflict, social maladjustment and behavioral disorders. The article also discusses life difficulties associated with spatial orientation, social integration, everyday life and self-care, as well as professional and personal self-realization for people with visual impairments. The main approaches to overcoming these difficulties include psychological correction, rehabilitation and compensation. Compensation is based on internal compensation of visual function and includes intrasystem and intersystem compensation. The article offers an overview of the main types of compensation and the levels at which compensatory processes occur.</p>	<p>psychophysiological reactions, visual defect, difficulties in spatial orientation, compensation processes, rehabilitation, internal compensation of visual function</p>

Introduction

Visual impairment is a complex biopsychosocial problem caused by a sharp change in a person’s living conditions and changes in the functioning of all levels of his mental organization: psychophysiological reactions, emotional states, personality characteristics, interaction systems, etc.

In conditions of a visual defect, psycho-emotional stress increases, the individual’s perception of difficult life situations becomes more acute, the choice of adequate means of overcoming them is complicated, a state of intrapsychic conflict, social maladjustment, behavioural disorders, etc. arise. Moreover, these aspects correlate with the degree of severity of the defect and the time of its occurrence. Specific life difficulties for people with visual impairments include:

- difficulties in spatial orientation (inability to use independent walking techniques without vision, psychological barriers that prevent the use of a cane, etc.);
- difficulties in social integration: high social frustration, problems in communicating with normally sighted people (formation of negative communication attitudes and complexes);
- difficulties in everyday life and self-care - lack of development of basic everyday skills and abilities, which is most typical for children born blind who are brought up in conditions of overprotection, as well as for persons who have lost their sight and are adapting to living conditions that have changed as a result;

- difficulties in professional and personal self-realization, which is largely determined by negative social stereotypes and attitudes towards people with visual impairments; organization of work that does not correspond to psychophysiological characteristics and capabilities; low wages, monotony of work, etc.; satisfaction of needs associated with communication (recognition, self-affirmation, self-realization, establishing friendships, etc.).

LITERATURE REVIEW

Overcoming the consequences of the frustrating effects of life's difficulties is carried out on the basis of the processes of compensation, correction and rehabilitation, their intersection and interpenetration. At the same time, psychological correction and rehabilitation is a system of external measures in relation to a person with impaired vision, and compensation is based on internal compensation for impaired/lost visual function.

Overcoming primary deficiencies in visual perception is based on compensation processes. Compensation for visual impairment and its consequences associated with imbalance with the social environment is carried out on the basis of a synthesis of biological and social factors with the leading role of the latter.

The main types of compensation are [1,2]:

- intrasystemic - through the use of residual vision or with the help of typhlotechnical means;
- intersystem - based on a complex restructuring of activity with the inclusion of intact functional systems (tactile, auditory, olfactory, etc.).

Compensatory processes occur at four levels [3, 4]:

- Biological (bodily) - automatic and unconscious restructuring of impaired functions.
- Psychological - focused on restoring impaired functions by creating a sense of internal stability, a positive attitude towards oneself, an adequate assessment of capabilities, etc. This level is central for persons with visual impairments.
- Socio-psychological - inclusion of interpsychic mechanisms, the sphere of interpersonal relationships of persons with visual impairments. In modern conditions, the socio-psychological aspect of compensation for a visual defect is given leading importance, which is due to the role of emotional support from others, social experience acquired in the process of verbal communication, joint activities, active and adequate actions in overcoming a visual defect.
- Social - determined by society's attitude towards persons with visual impairments.
- Psychocorrective influences are most effective in relation to secondary developmental deficiencies in visual defects and involve the creation of optimal conditions for emotional, personal and intellectual development; prevention of negative trends in personal and intellectual development, its optimization using potential opportunities.

Modern technologies of psychological correction are based on fundamental theoretical and methodological principles [5]:

- "replacement" development as the basis of integrative correctional work, which involves a transition to the next ontogenetic stage of the program only after consolidating the results of the previous one;
- the sequence of passing through the stages and timing of the child's normative psychomotor, speech and emotional development;
- the determining role of the basic prerequisites of mental activity, including spatiotemporal ones;
- use of laws and patterns of development and improvement of motor, including voluntary acts;

- taking into account the current level of psycho-speech and emotional-volitional development of the child in an integrative understanding;
- taking into account the leading type of motivation for activity and the formation of basal levels of emotional regulation of the child's activity;
- gradualism in the formation of new types of activities.

In relation to persons with visual impairments, this presupposes the solution of practical problems during correctional work [6]:

- formation of arbitrary components of activity;
- formation of a diagram of one's own body and somatognosis;
- formation of spatial representations;
- development of verbal analysis and verbal-logical thinking;
- expanding the child's vocabulary and general awareness, overcoming verbalism;
- development of independent creative work skills;
- formation of adequate mechanisms of emotional regulation of activities and processes of interpersonal communication in accordance with the current level structure of the emotional-affective sphere.

Correction programs are implemented in two main versions [7]:

- Developmental work - adequate and timely formation of prerequisites for activity in accordance with the leading type of motivation and activity (in preparation for studying at school in the form of thematic tasks-games).
- Correctional and developmental work involves supplementing developmental work with propaedeutic activities.

Types of psychological correction used in working with persons with visual impairments [8]

METHODOLOGY & EMPIRICAL ANALYSIS

Criterion types of psychocorrection

Form of work - Individual: achieving goals is carried out through direct influence on a person with a visual impairment. - Group: influence on a specific person is carried out through organizing the process of interaction between group participants

Reasons for choice - Intrapersonal problems: the individual nature of personality problems (not interpersonal); refusal to work in a group (for example, due to insufficient social experience, etc.); pronounced affective problems (anxiety, fears, etc.). - Interpersonal problems: difficulties/reduction in communication with peers and adults, communication difficulties due to undeveloped communication skills; social infantilism; difficulties in voluntary regulation of activity and behavior (inability to act in accordance with a given pattern, rule) and other disorders of the communicative, emotional and personal spheres

Nature of focus - Symptomatic - short-term exposure to relieve acute symptoms of deviations in the development of communicative, emotional and personal spheres. - Causal - eliminating the sources and causes of deviations in the development of communicative, emotional and personal spheres.

Contents of psychocorrectional measures - Correction of the cognitive sphere: impoverishment of ideas and images of objects, a decrease in the level of sensory experience that determines the poverty of ways of thinking, speech and memory, a slowdown in the development of all cognitive processes. - Correction of the affective-volitional sphere: uncertainty, stiffness, helplessness in various activities and social interaction, decreased desires for self-expression and the emergence of greater dependence on the help

and guidance of others. - Correction of behavioral aspects: correction of unconstructive forms of child behavior.

Availability of psychocorrection programs - Programmed - setting clear goals and building a psychocorrection program. - Improvised - spontaneous, without a pre-thought-out correction program

Duration - Ultra-short (ultra-fast) - solving current and isolated problems and conflicts (several minutes - several hours). - Short (fast) - activation of the change process to solve an actual problem (several hours - several days). - Long-term - aimed at the personal content of the problem by working through many details (several months). - Extra-long-term - a type of psychocorrection aimed at achieving an understanding of the essence of experiences affecting the spheres of the unconscious and conscious (several years).

In general, it has been established that timely and adequate correctional assistance, carried out from the first days of a child's life, allows one to get as close as possible to the level of a normally seeing child by the age of 4-6 years.

Psychological rehabilitation of persons with visual impairments is a system of measures aimed at restoring, correcting or compensating for a visual defect, a process aimed at adapting the individual to certain social conditions. In rehabilitation, we are talking about a system of early intervention in the child's development process in order to achieve his maximum adaptability to the external conditions of existence, taking into account the individual characteristics of existing disorders [9].

RESULTS

The main goal of psychorehabilitation work with people with visual impairments [10, 11] is to optimize the process of including people with visual impairments into society, based on their individual characteristics, strategies for adaptation and overcoming problems, external and internal resources. The main categories in need of psychological rehabilitation include: late-blind people, lonely people, as well as elderly and senile people.

Objectives of psychorehabilitation work with persons with visual impairments [12]:

- social, everyday and personal adaptation, harmonization of attitudes towards oneself, others and the world as a whole;
- professional self-realization, self-improvement in various fields (education, health, personal growth, etc.);
- overcoming difficulties in socio-psychological adaptation;
- optimization of relationships with normally sighted people;
- increasing psychological resources and adaptive capabilities.

Principles of psychorehabilitation work [13]:

- targeting;
- differentiation;
- taking into account gender, age, severity, nature and time of occurrence of the defect, individual psychological characteristics.

Within the framework of the psychorehabilitation process, the following areas of psychological assistance to persons with visual impairments are identified [14]:

- Psychological diagnostics of individual psychological characteristics; assistance in understanding internal resources.

- Psychological consultation.
- Psychoprophylaxis of maladaptive states, formation of skills and abilities of self-regulation, relaxation, assistance in full professional and personal development.
- Psychological support and assistance in overcoming the psychological consequences of vision loss, developing a positive attitude towards oneself and others; increasing self-acceptance and self-confidence.

Forms of effective psychological assistance to persons with visual impairments in the process of psychorehabilitation [15]: individual psychological consultations, communication groups and psychological trainings (self-regulation, optimization of mood and well-being), group classes on effective self-presentation, anonymous psychological counseling by telephone helpline, individual psychological counseling on home, lectures on problems of practical psychology.

In modern research, special attention is paid to the personal determinants of rehabilitation, since, simultaneously with the experience of acute negative reactions, a visual defect contributes to the activation of internal potential and resources, the mobilization of vital activity and, in general, the achievement of an active life and social position. The basis of the positive socialization of a person with visual impairment, which consists in returning to society, to the rules of life of a small group, a normal social environment, are: vitality, flexibility, ideological attitudes and value orientations, psychological sovereignty, self-concept, etc. [18-20]

CONCLUSIONS

The effectiveness of psychorehabilitation measures for people with visual impairments also requires taking into account the readiness of society to accept them. The main vector of development of this problem is aimed at developing socio-psychological ways of forming a positive image of a person with visual impairment (social advertising, informing society about the individual characteristics of persons with visual impairment; psychological preparation of a person with visual impairment to realize their potential in various spheres of society) [21].

Currently, the substantive foundations of psychological and pedagogical support for the mental and personal development of persons with disabilities in the education system are being actively developed [22, 23]. Technologies for the successful socialization of persons with visual impairments also include psychological and pedagogical support for victimization in educational institutions, which contributes to their self-knowledge, mobilization of personal resources, and overcoming

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