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## DEVELOPMENT TENDENCIES OF THE INCLUSIVE EDUCATION SYSTEM AT HIGHER MEDICAL SCHOOL: ADAPTATION, MAINTENANCE, PROFESSIONAL READINESS

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This article considers the issues of adaptation and organization of the educational process, barrier-free environment and readiness for professional activity of students with disabilities in inclusive education in conditions of inclusive education in a medical university. The relevance of this work is determined by one of the priority areas of state policy in the field of higher education – access to higher education for people with disabilities in inclusive education. Inclusive education at the university is designed to ensure not only the realization of the right of students with disabilities in inclusive education to higher education, but also to solve the problems of socialization and professional demand for such people. In order to improve the process of introducing inclusive education at the Ryazan State Medical University named after Academician I.P. Pavlov, a study was conducted, the main problems and ways of solving them were identified, related to the organization of the educational process, the conditions of the barrier-free environment and the readiness for professional activity of students with disabilities



in inclusive education. An increase in the proportion of university teachers who have undergone advanced training in inclusive education also contributes to solving problems. Adaptation of educational programs and educational and methodological support for persons with disabilities includes psychological, pedagogical and tutor support etc. The organization of the educational process using distance education technologies is one of the priority conditions for teaching students with disabilities and/or HIA. The use of this technology makes it possible to significantly expand and modify some educational standards for students with disabilities in inclusive education, namely, to create an individual way for each student with disabilities in inclusive education in a medical university. It is proposed to use training techniques such as: online consultation of teachers; VR technologies; availability of training materials 24/7; online webinars that facilitate the inclusion of such students in the educational and research activities of the university. The professionally organized educational space and educational process of the university provide not only a high level of mastery of professional competencies, but also contribute to the formation of personal qualities of students with disabilities in inclusive education, necessary for their successful socialization, life and activity in society.

Key words: inclusive education, adaptation, support, professional readiness, a person with a disability or limited health.

# ТЕНДЕНЦИИ РАЗВИТИЯ СИСТЕМЫ ИНКЛЮЗИВНОГО ОБРАЗОВАНИЯ В ВЫСШЕЙ МЕДИЦИНСКОЙ ШКОЛЕ: АДАПТАЦИЯ, СОПРОВОЖДЕНИЕ, ПРОФЕССИОНАЛЬНАЯ ГОТОВНОСТЬ

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В данной статье рассматриваются вопросы адаптации и организации образовательного процесса, условиях безбарьерной среды и готовности к профессиональной деятельности студентов с инвалидностью и/или ОВЗ в условиях инклюзивного образования в медицинском вузе. Актуальность данной работы определена одним из приоритетных направлений государственной политики в сфере высшего образования – доступность высшего образования для людей с инвалидностью и/или ограниченными возможностями здоровья. Инклюзивное образование в вузе призвано обеспечить не только реализацию права лиц с инвалидностью и/или ОВЗ на получение высшего образование, но и решить проблемы социализации и профессиональной востребованности таких людей. В целях совершенствования процесса внедрения инклюзивного образования в Рязанском государственном медицинском университете имени академика И.П. Павлова было проведенного исследование, обозначены основные проблемы и пути их решения, связанные с организацией образовательного процесса, условиями безбарьерной среды и готовностью к профессиональной деятельности студентов с инвалидностью и/или ОВЗ. Решению проблем способствуют также увеличение доли преподавателей вуза, прошедших повышение квалификации в сфере инклюзивного образования; адаптация образовательных программ и учебнометодического обеспечения образовательного процесса для инвалидов и/или лиц с ограниченными возможностями здоровья; психолого-педагогическое и тьюторское сопровождение и др. Организация образовательного процесса с использованием дистанционных образовательных технологий является одним из приоритетных условий обучения студентов с инвалидностью и/или ОВЗ. Использование данной технологии позволяет в значительной мере расширить и видоизменить некоторые стандарты образования для студентов с инвалидностью и/или OB3, а именно создать каждому студенту с инвалидностью и/или OB3 индивидуальную траекторию развития в медицинском вузе. Предлагается использовать такие техники обучения, как: online-консультация преподавателей; VR-технологии; доступность учебных материалов 24/7; online-вебинары, которые способствуют включению таких обучающихся в учебную и научно-исследовательскую деятельность вуза. Профессионально организованные образовательное пространство и учебный процесс вуза обеспечивают не только высокий уровень овладения профессиональными компетенциями, но и способствуют формированию личностных качеств студентов с инвалидностью и/или ОВЗ, необходимых для их успешной социализации, жизни и деятельности в обществе.

*Ключевые слова:* инклюзивное образование, адаптация, сопровождение, профессиональная готовность, лицо с инвалидностью или ограниченными возможностями здоровья.

**Relevance.** More recently, the status of "disabled" or "person with disabilities" was associated in the public consciousness with the cacogenesis (inability)

of such subjects to make independent decisions. To date, the situation has fundamentally changed and attitudes towards people with disabilities have begun





to change. This is primarily due to the fact that in connection with the demographic crisis, it became necessary to attract additional labor resources in the public sphere.

The possibility of obtaining vocational education for people with disabilities is laid down in the State's current educational policy, which is aimed at expanding the opportunities of this category of persons and creating conditions for their successful socialization. However, when obtaining vocational education at a higher educational institution, state educational standards are mandatory not only for conditionally healthy students, but also for students with disabilities.

There is a contradiction between the declared accessibility of vocational education and the different possibilities for obtaining it. Therefore, the problem of adapting to the conditions of study at a university, accompanying, vocational guidance and mentoring in the process of employing students with disabilities and disabilities becomes important.

In the context of inclusive education, the university, in the process of reform, mainly pays attention to the educational and educational side, the material and technical support of the educational process, the recruitment of students as a source of funding. At the same time, issues of emotional and psychological well-being of students with disabilities and HIA, adaptation and motivation of them to educational and intellectual, professional and social activities remain not completely resolved.

**Purpose.** The purpose of this study is to study the problems of adaptation, organization of the educational process, conditions of barrier-free environment and readiness for professional activity of students with disabilities and HIA in conditions of inclusive education in a medical university.

**Materials and methods.** To analyze the state of the problem related to adaptation, the organization of the educational process at the university, the conditions of a barrier-free environment and readiness for professional activity in an inclusive education, 54 students with disabilities and HIA 1-6 courses of the medical faculty of the Ryazan State Medical University named after Academician I.P. Pavlov were interviewed and tested. The following methods were used as research methods:

- Adaptation Study Methodology - Adaptation Test;

- methodology for the diagnosis of readiness for professional activity "Professional readiness" (A.P. Chernyavskaya);

- questionnaire.

**Results and discussion.** Students with disabilities and HIA of the first year of the Faculty of Medicine were investigated using the Adaptation test, consisting of 16 judgments, in relation to which students had to express their degree of consent. The methodology contained two scales: adaptations to the training group and to training activities.

On the first scale -64 % of students with disabilities and/or HIA are adapted to the study group, 36 % of students have difficulties due to the fact that these students are fixated on their diagnosis, it is difficult for them to seek help from fellow students, and they also try to stay away, showing restraint in relationships, as they can be misunderstood.

## Adaptation to the study group



On the second scale -44 % of students with HIA and/or disability have not yet been adapted to the educational process. The main difficulties of these

students are the fact that in the classroom it is difficult for them to express their thoughts, ask a question and contact the teacher.

Adaptation to learning activities



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Most of them need additional guidance from teachers.

Based on the results of the survey of students with disabilities and HIA 2–4 courses of the Faculty of Medicine, the following can be noted:

- 85 % of students are satisfied with the comfort of the interior, university premises (audiences, corridors, lobbies, toilets, computer and laboratory equipment);

- 91 % of respondents are satisfied with the schedule of classes, the schedule of the educational process, the work of the dean's office, the opportunity to receive advice;

- 67 % respondents are satisfied with the work of tutors and curators responsible for individual professional trajectory and educational work;

- 75 % of respondents are satisfied with the accessibility of the educational environment for students with disabilities, the presence of ramps, elevators, etc., as well as assistive (assisting, special) equipment;

- 90 % of respondents note a favorable climate (friendly atmosphere) in their student group, but 51% indicate rare conflict situations;

- 46 % of students usually go to university and study in a group with a light and positive mood, but sometimes they have problems, 38 % – with a light and positive, they want to go to university, work in a group, 16 % – most often with a heavy and negative, but there is a positive attitude;

- 8 % of respondents need the support of a psychologist, 30 % – sometimes feel the need for the help of a psychologist;

- 69 % of respondents are generally satisfied with their student life;

- 54 % of students indicate minor health problems (in general, they feel good) when assessing the level of their physical condition, 30 % indicate their poor health and serious health problems; - 92,5 % of students have the opportunity to prove themselves in classes (seminars, lectures, laboratory, project activities, etc.);

- 54 % of respondents receive assistance and support in their training group in difficult situations, 38 % – sometimes and 8 % – never;

- 92,5 % of respondents say that in their group there is no negative attitude towards students with disabilities;

- 92,5 % of students do not need assistive equipment;

- 58 % of students have no problems with academic performance, 42 % have problems in biochemistry, physiology, histology and hygiene;

- 85 % of respondents were satisfied with the organization of the educational process, 62 % with the organization of free time, 62 % with the organization of food;

- 69 % of students did not encounter problems in relations with teachers, 31 % – encountered;

- 62 % of students do not seek help from the teacher due to the reduced confidence threshold, 31 % due to their hesitation, 7 % due to the presence of phobia against teachers;

- 50 % of respondents are uncertain when assessing their prospects in the labor market and consider their chances of employment not very high, 33 % look to the future with optimism, 17 % are ready to work where they can earn more, regardless of specialty;

- 50 % of students would choose the same profession again in the same educational institution, 50 % would choose another profession and another educational institution;

- degree of self-realization of students with HIA and/or disability in the fields of science, design, social activities, culture and sports:





Satisfaction with the material base of the university:

Students of 5 and 6 years were invited to undergo testing for readiness for professional activity. The goal is to determine the level of readiness to make adequate professional choices. Professional readiness is considered by us according to the following criteria: autonomy, awareness, decision-making, planning and emotional attitude.

1. Autonomy is the ability to self-study, to independently set the goals and objectives of their activities, the ability to self-evaluate and evaluate activities.



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As a result of testing, we obtained the following results: 39% of senior students with a disability or HIA did not have such a criterion as autonomy.

The development of autonomy is a continuous, gradual process with different levels, in which the teacher has an important role. With the development of this ability, it is proposed to move from teaching activities managed by the teacher to teaching activities, which are carried out independently, that is, through the use of personally oriented technologies.

2. Awareness of the world of professions is the ability to relate information to one's own characteristics.



In our study, testing showed that this criterion was formed in only 54 % of students.

The question of the sources of professional information was important. It is with ignorance of the sources of information that the main difficulties and errors in choosing a profession are associated.

3. The ability to make decisions is the presence of several possible ways of solving, leading to the fact that a person perceives the situation as requiring an independent decision.

Making decisions



The results of our study show that 31 % of senior students with disabilities and HIA are afraid or do not know how to make independent decisions. This is a big problem, since graduate courses should fully form clinical thinking.

It is important to note that the main condition for the ability to make a decision is the autonomy and independence of a person, that is, the level of decisionmaking skills is inextricably connected with the level of maturity of the person. In addition, it is important to know the decision algorithm.



4. The ability to plan your professional life is a continuous process: even without changing your workplace, a person always develops – receives additional qualifications, learns new working methods, changes his role. In other words, a person, being at one of the points of the professional path, is the result of his development in the past and assumes a certain development in the future.

5. Emotional attitude to the situation of choosing a profession is an emotional component of professional maturity, manifested in a person's general mood and closely related to the emotional component of the maturity of the personality as a whole, which manifests itself in a positive emotional mood, life optimism, emotional balance and tolerability of failures.

Emotional treatment to the situation of profession choice



Thus, the psychological readiness of a medical student for professional activity is some kind of mental state that arises as a result of an informed or unconscious reflection of the psychological structure of professional activity and is characterized by certain personality properties. It is possible to develop this mental state in future doctors, including within the framework of a systematic approach in preparation for professional activity, where special attention should be paid to the formation of adequate professional motivation, increasing the level of socio-perceptual and communicative competence, as well as the formation of a culture of reflection.

So, the results of the study indicate the relevance of the problem, which is related to the adaptation and organization of the educational process, to the conditions of a barrier-free environment and the readiness for professional medical activity of students with disabilities and/or HIA in the context of the introduction



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of inclusive education in higher medical school and confirm the need:

- Improve vocational-oriented work with applicants from persons with disabilities and/or HIA, explaining to them all the difficulties and possible problems that may arise in the process of studying at a medical university;

- Accelerate and accompany the process of adaptation of first-year students with disabilities and/or HIA, in particular, to form a special educational environment (introduce adapted educational programs, didactic means, methodological support taking into account various nosologies);

- Create additional motivation for students with disabilities and/or HIA to successfully develop the disciplines taught at the university and ensure their integration into the professional community (development of the mentoring system);

- To rely on a practical-oriented approach in teaching for students with disabilities and/or HIA in organizing the educational process;

- Continue to organize barrier-free environment at the university;

- To form in students with disabilities and/or HIA an internal readiness to independently and consciously plan, correct and implement the individual trajectory of professional development.

Based on the research carried out and above, it can be concluded that the effectiveness of the process of adaptation, education and vocational training of students with disabilities and/or HIA in a medical university can largely be determined by the presence of certain psychological and pedagogical conditions [1]:

- Creation and maintenance of a favourable psychological microclimate in educational groups and educational institutions in general;

- Acquisition by teachers of knowledge in special pedagogy and psychology in order to study the psychophysiological characteristics of a student's personality with disabilities and/or disabilities;

- regular improvement of teaching skills of university teachers, improvement of organizational forms, working methods taking into account methodological recommendations [2].

Programes for the training and adaptation of students with disabilities and/or HIA within the framework of educational disciplines should include the preparation of graduates with disabilities and/or HIA for employment, applying in practice the professional competencies obtained. The purpose of training students with disabilities and/or HIA in terms of promoting employment should also be to inculcate skills of selfpresentation, competent compilation of summaries, social and psychological adaptation in the team. An important part of this work should be the activities of the psychological service of the university, namely: conducting communication trainings, playing professional situations, analyzing them and working out the algorithm for acting in problematic situations that a graduate may encounter in the process of employment.

**Conclusions.** As part of the introduction and implementation of inclusive education in medical universities, it is necessary to create an educational environment that will ensure the accessibility of quality education for all students, including those with disabilities and/or HIA. In this regard, it is necessary to continue the extensive work initiated to adapt and train students with disabilities and/or HIA for more successful learning, education and development.

The necessary conditions must also include:

- the system of psychological, pedagogical, medical, tutor support and inclusive volunteerism (volunteering from among conditionally healthy students);

- development of individual educational trajectory of students (taking into account the peculiarities of nosologies and life conditions);

- adapted educational technologies, electronic educational systems, which are supplemented by a set of traditional and innovative teaching methods;

- special training of teachers involved in the education process in groups in which disabled students and/or HIA students are integrated.

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