

Selected Aspects of Psychosocial Functioning of Persons with Disabilities



Edited by:
Kinga Krawiecka
Emilia Śmiechowska-Petrovskij
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Table of contents

Introduction	7
Jan Niewęglowski	
Disability as Suffering in the Teaching of John Paul II	15
Barbara Baraniak	
Valuable Aspects of Work as a Subject of Interest of Disfavoured Groups, Especially Including Persons with Disabilities	31
Barbara Kałdon	
Chosen Aspects of Functioning Physically Disabled People	47
Żaneta Ewa Tempczyk-Nagórka	
Pilgrimages of Disabled Persons to Jasna Góra as an Example of Activities which Foster Social Inclusion	57
Kinga Krawiecka	
Person with Intellectual Disability in the Creative Space of Symbols	71
Marzena Dycht	
The Child with Cortical Visual Impairment – the Problems of Functioning	83
Emilia Śmiechowska-Petrovskij	
Teaching L. Braille System – New Challenges and Strategies	105



Introduction

We are presenting a book *Selected Aspects of Functioning of Persons with Disabilities* which is devoted to different aspects of disability. The individual chapters contain threads of broad understanding of functioning of people with intellectual or physical disabilities or people with visual impairments, which are connected with pedagogical, medical, cultural, religious and social issues.

Nowadays these problems are undisputedly important because of the scale of phenomenon of disability (the increase of the population with disabilities) and the possibility of occurring this (disability as a health condition can be everyone's experience). In the result scientists are more interested in the problem. They are mostly interested in details connected with the phenomenon of disability and people who are touched by it in the aspect of functioning as well as supporting individuals with the special development needs.

Different types and levels of disability cause different problems with functioning. Expressiveness of dysfunction, on the one hand, can cause positive reactions like help or empathy, on the other hand – it may bring on the fear, which can cause rejection. Visibility of disability makes it easier to distinguish “friend” from “stranger”, and can justify the distance or even aversion. Both, the disability and the reluctance to the disabled person can be the reason of suffering.

The intention of authors of the monograph was to discuss the issues from this problem listed above and to describe increasing social understanding of disability through confronting it with common knowledge (causing often negative attitudes towards disabled people), scientific knowledge and results of practical experiences. In the same time, because it was

- 8 impossible to involve all of the issues related to that topic, selection was made and issues were put in order with the following criteria:
- from existential to praxeological issues;
 - from subject (disability as a subject of exploration and reflection) to entity matter (disability and disabled people as objects of interest) – including representation of different types of impairments, which are nowadays considered to be the cause of disability (dysfunction of locomotor system, reduced intellectual efficiency, visual impairments).

Although it seems that in 21st century the concept of disability is clearly defined as negative effect of synergy, affected efficiency of the human body (physical, psychological, intellectual or connected to senses) and external conditions – physical and social barriers, which make it difficult for an individual to participate, fully and effectively, in the lives of other humans, as equal, it is a personal perspective connected to experiencing disability, which shows a high degree of complexity and subjectivity of this phenomenon for some people in their personal experiences.

That is why it is necessary to undertake actions of reducing barriers nowadays, which makes it difficult for disabled with various disorders to function in different areas of life, as well as reflective, regarding to still valid questions concerning the relation of disability with the emotional experience, with suffering. These questions not only require answers, but also reflection, who is looking for them? Disabled people? Their relatives, who are sharing everyday lives with them and support them? To find answers to these questions, which concern disability, physical and emotional suffer, it is necessary to include a perspective of human's spirituality and religiousness.

It is also important to analyze dynamic social interactions between disabled and non-disabled people and also create better conditions for the maximum autonomy of individuals experiencing functioning difficulties. The problem to be analysed is the issue of employment and work of people with disability, which is perceived nowadays as the final accent of the process of education and rehabilitation. Projecting flexible forms of employment and realizing model of supported employment help this purpose. Although economic arguments are especially highlighted as most

effective factors stimulating disabled people to undertake occupational activity and specialists supporting them to implement new solutions, which increase the employment rate of this group, there is no doubt, that axiological conditions are significant for shaping personal attitude of people with disabilities to undertake work and preferred areas of it. That is why it is so reasonable to discuss the issue of vocational rehabilitation and employment of disabled people considering values such as freedom, dignity, goodness, sense, useless, safety, social recognition.

The immanent area of functioning of human is an artistic activity of individual, which is not reduced despite disability. The reception of art and creating it, participating in symbolic actions enable more complete realization of individuals, when is not limited to rehabilitation and educational actions only.

Supporting disabled people requires continuous specialization and professionalization by people working with persons with development difficulties. That is why it is so important to recognize the specificity of groups of people needing rehabilitation and also recognize modern educational, therapeutic and research trends, which may translate into work with disabled people. In the chapters of this publication issues mentioned above are discussed.

Suffering as unpleasant feeling lowers living standard, has disintegrating effect on every area of life: cognitive, emotional, social and spiritual. Reflections concerning suffering and the meaning of it in the spiritual dimension undertake rev. Jan Niewęłowski in the first chapter *Disability as Suffering in the Teaching of John Paul II*. Author underlines multidimensional character of suffering. He distinguishes: suffering in supernatural, pro-existential, expiation and moral aspects. The awareness of existential pain, learning from experiences acquired from emphatic participation in the suffering of the sick and their families has special meaning. Disabled person suffers, feels hopeless because of the loss and bitterness about his unfilled life. Relieving suffering, mentions rev. Jan Niewęłowski, both in the personal and social areas, depends on abilities and willingness to understand its nature.

10 In the face of suffering – illness and disability we often think about the value of life and health, how to take care of it and what to do not to perceive it as personal drama.

In the second chapter: *Valuable Aspects of Work as a Subject of Interest of Disfavoured Groups, Especially Including Persons with Disabilities* Barbara Baraniak discusses an important phenomenon of a modern job market and difficulties in finding work by groups of people described as disfavoured. The author characterizes these groups; they include disabled people, former prisoners, women over the age of 50 and these ones returning to the job market from parental leave, graduates and people who are unemployed for a long time. The perspective from which she makes the diagnosis is the relation; individual – work, Barbara Baraniak makes from it the axiological sphere presenting an original concept of human and the process of work in the values constellation, which can be regarded as an extension of current analysis oscillating close to economic and elastic forms of employment of people with disability and others threatened by marginalization and social exclusion.

In the third chapter *Chosen Aspects of Functioning Physically Disabled People*, Barbara Kałdon presents the situation of people with physical disability, classifies different types of it and diverse aetiology. The preliminary considerations are the background for showing the situation of physically disabled people in everyday, existential, financial and social life, what reflects, among others, in negative self-image, reduced activity, fear of rejection, impediments in satisfying basic needs. The author underlines also the meaning of integration of disabled persons with the society as an important element of rehabilitation. This kind of action should take place from the earliest years of life by shaping the right attitudes towards disabled in school and later in work, which are one of the most important forms of human activity. Architectural barriers, reluctant attitude towards disabled people, lack of awareness how to behave towards them and physical deficits are the reasons of stigmatization. The author draws attention to the fact, that all the forms of help and the granted support should be multidimensional and comprehensive, embrace disabled and non-disabled people to create society based on unity and openness to otherness.

The fourth chapter, *Pilgrimages of Disabled Persons to Jasna Góra as an Example of Activities which Foster Social Inclusion*, written by Żaneta E. Tempczyk-Nagórka concentrates on indicating complex inclusive actions, which are necessary because of the social model of disability. In the beginning there are presented different limitations and difficulties which disabled face and are the cause of marginalization and exclusion. It shows the way how disabled people function, taking into account everyday obstacles and problems, they often do not realize that exist. According to the author it is the best to build a model of main areas of actions, which supports social inclusion of disabled people. There are included four social circles which need inclusive actions (disabled person, the closest surrounding, people who are not close, but have direct contact with that person and the general public) and four areas of social life (infrastructure, law, education, work and media). That model is used to present an inclusive character of Warsaw pilgrimages of disabled people to Jasna Góra, which are the best proof, that disability does not have to be perceived as deficit or limitation.

The fifth chapter by Kinga Krawiecka titled *Person with Intellectual Disability in the Creative Space of Symbols* confirms this conclusion showing, that human with disability, especially with intellectual disability, expresses humanity as best as possible by artistic work. The author presents pedagogical space for people with intellectual disability and specific for it theatrical and drawing symbolic creativity. The theatrical practice makes intellectually disabled actors to find the truth about themselves, the purpose of existence, mission and the surrounding world, and in the same time being open to growing up to the full humanity. The drawing practice is gaining, according to the author, moral purpose, which expands sensitivity of receivers on the mystery of symbolic space of a drawing and analyzing its formal and representational content gives it sense and meaning.

Both, theatre and drawing, are a space of target activity of a person with disability, which fascinates and moves, moreover, is a space of a person with intellectual disability, who perceive reality not as final structure, but as field of opportunities, which can be filled and developed.

In the sixth chapter *The Child with Cortical Visual Impairment – The Problems of Functioning*, Marzena Dycht undertake up-to-date issue

of functioning of children with visual impairment caused by brain damage, which is nowadays one of the most common cause of eyesight dysfunction among infants and children. The elaboration have complex character and includes issues concerning terminology and aetiology of CVI, as well as results of functional consequences of CVI, which is very characteristic, different from other visual impairments. Presentation of specificity of functioning of children with CVI is a starting point for discussing the strategy of therapeutic work with special consideration given to the vision therapy and educational work.

The issue of blind people, using non-visual or touching-hearing-seeing techniques is the topic of the seventh chapter: *Teaching L. Braille System – New Challenges and Strategies* written by Emilia Śmiechowska-Petrovskij. The author presents modern scientific and practical research in the area of Braille education of people with visual impairment. She determines variable (on the ground of age, the degree of vision impairment and the moment of losing it) needs of people, who use Braille. Characterises modern materials and tools – technologies supporting the learning process and new methods and forms of teaching, quoting many practical examples and results of studies currently carried out in this field.

The third millennium is the time of development, changes and challenges facing humanity and also the time of questions about the nature and the essence of human nature. In the appearing ideological-axiological confusion, resulting from increasing individualism and relativistic view on the world of modern human and the growing importance of, widely reported by mass media, canon of beauty, justice, freedom, wealth and also intellect, so important in the information society. These values have more and more meaning and, considering this, we have to give our attention to people, disabled intellectually, physically and visually. They cannot, because of their dysfunctions and limitations, with the same easiness as non-disabled people, reach for currently highly appreciated values. That issue is very important because of the rapid development of civilisation, technique and also medicine, which makes it possible to save lives of very ill people or following a major accident, what, unfortunately, can reduce the quality of life and the consequence can be disability (inherited or acquired). As a result of that, we cannot allow this group of people to live

at the margins of social life without the possibility of self-realization and fulfilling.

This elaboration is to raise the problem of functioning of disabled people in our social reality, with attention paid, on the one hand, to their problems, difficulties and concerns and on the other hand to possibilities, abilities, predispositions to self-realization, also through appropriate social support, new rehabilitation and compensation possibilities and involving the newest technology in the improvement of functioning.

The monograph is the result of the cooperation among six scientists of different generations. From different points of view they present latest issues concerning functioning and supporting people with disabilities. Therefore, considering size and diversity of issues, it is not possible to present everything what is important, editors hope that this attempt presents some the most relevant aspects will be an impulse for Readers for further explorations.

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Editors



Disability as Suffering in the Teaching of John Paul II

„Suffering is not a punishment for sins
or God’s response to the evil
in human. It can be understood purely and
simply in the light of God’s love, which
is the ultimate sense of everything, that
exists in the world”.

John Paul II, *Autobiography*

In the modern world we are often exposed on suffering – physical, psychological or spiritual. We can also easily notice, that it does not omit anyone. Suffering as widely understood disability takes different forms and there is more and more of it. That is why the question which Jesus was asked by his listeners is understandable and still actual: “Rabbi, who sinned, this man or his parents, that he was born blind?” Jesus answered, “It was not that this man sinned, or his parents, but that the works of God might be displayed in him” (John 9, 2-3). Suffering is reality in the face of which lots of people become powerless. That is why they ask if: is God our Father? Is He good? Why does He allow for suffering? Why does He not respond to disasters, children dying of hunger, their early death of AIDS? Why does God let on involuntary suffering (Skobel 2012)? The present world, in which we live, is often lost. There is lack of understanding, patience, goodness and love for the other person. More and more often we notice lack of peace in families and countries, which also leads to conflicts and suffering. That is why modern humans, deeply in the heart, accuse God of lack of love. They make Him excuses, accuse Him of lack of interest in the world and permitting evil. This leads to breakdowns, disappointments, despairs (Ślipko 1988).

16 Looking for answers on the previous questions is very difficult and complicated process. The answer for them, modern human, can find in faith. Every form of suffering and illness, especially involuntary, is the same thing Jesus' suffering was. Jesus did not suffer for his own sins, but suffered for sins of people, to help them, in that way. Although he was not guilty, he suffered a lot. The conclusion is paradoxical: God loves and accepts suffering of innocent people. It comes directly to Him. Suffering can be an act of love and every act like this is bringing human closed to God. The issue of suffering, rejected human was taken up by John Paul II (Perzyński 2012). These issues were very often presented in his teaching and life. He always gave lots of time and attention to sick people. To that group he wrote Ecclesiastical Letter "Salvificidoloris", in which suffering is described as man's vocation. It is able to transform him into sacrifice to God.

Suffering in the Biblical Tradition

The word: suffering has Greek origin – „pascho”. From that word the others come: passion, grief, sorrow, pain. For Greeks it meant also sickness, disability, misfortune, loneliness. Ancient people were certain, that there is no escape from suffering or way to liberate from it. They distinguished two kinds of suffering: physical and spiritual (e.g. death of a close person) (Skobel 2004).

For Jews suffering was the result of their broken covenant with Yahweh. However, liberation from it was proceeding by obeying the Decalogue. Classic example of suffering man in Old Testament is Job. Though he was just, he suffered. He had lost his fortune, sons and daughters. At the end he had suffered from incurable, horrible disease called leprosy. Friends, who have visited him, said, that sins had to be the reason of his suffering. "According to what I have seen, those who plow iniquity and those who sow trouble harvest it" (Job 4, 8). Meanwhile, Job firmly rejects that thesis. He knows, that he made in his life lots of good things. At the end of their discussion, biblical author presents the position of God. Job suffers innocently, but has to accept that and the will of God. In Job's history there is a conclusion, that not every suffering is caused by sin and guilt. Biblical

Job was tested by suffering a lot. God consented to that. He wanted to show his justice. In the New Testament Job is a symbol of the Messiah. Despite the fact that the Son of God is justice, he suffers from rejection, tortures and then is killed by crucifixion (John Paul II 1984; Bortkiewicz 2000).

The problem of suffering can be noticed in religions in the Middle East. It is explained as the result of sin, disobedience of man towards gods. For Egyptians suffering meant interfering in human plans, social degradation, punishment for exalting themselves above gods. Suffering occupies lots of place also in Hinduism and Buddhism. It was the consequence of bad lives in their past incarnations. The Quran also teaches about suffering. It says that the follower of Mahomet has to bear with suffering with patience and trusting Allah. Only He knows the source and the meaning of suffering.

According to Christian theology suffering was not present in paradise. It appeared with Original Sin. Consequence of it is death and physical evil. Christianity says that suffering is also positive, is a part of the History of Salvation. It is because of Jesus, who changed understanding of it – suffering people will be blessed and in return will receive happiness. Christ showed it in so-called blessings, in which he expressed all forms of pain bothering humanity: the poor, crying, despised, laughed, hungry, persecuted. “Blessed are the poor in spirit, for theirs is the kingdom of heaven. Blessed are those who mourn, for they will be comforted. Blessed are the meek, for they will inherit the earth. Blessed are those who hunger and thirst for righteousness, for they will be filled. Blessed are the merciful, for they will be shown mercy. Blessed are the pure in heart, for they will see God. Blessed are the peacemakers, for they will be called children of God. Blessed are those who are persecuted because of righteousness, for theirs is the kingdom of heaven. Blessed are you when people insult you, persecute you and falsely say all kinds of evil against you because of me. Rejoice and be glad, because great is your reward in heaven, for in the same way they persecuted the prophets who were before you” (Matthew 5, 3 – 12). As seen above, suffering connects human with the Passion and death of Jesus. According to Christian theology, suffering cannot be the purpose by itself, but it can be a reality, which we can give new value. For believer suffering, on the one hand, is imitation of suffering Lord (Luke 21, 12). On the other

18 hand it is an occasion to help suffering human. We can easily notice some crisis of modern society in this area. Hurry, occupational work, consumerism, laziness changed our attitude to sick, woeful, disabled and old people. The solution of that problem is seen, among others, in abortion of children with genetic diseases or euthanasia of old people. A proper understanding of suffering and a proper attitude to suffering human is a base of Christian faith (Skobel 2004).

In the Old Testament, suffering was considered as a punishment of God, is a result of sin of human, after which came death and physical suffering. Christianity treats suffering as the consequence of the Original Sin. The Creator at the beginning did not want human to be affected by suffering and death. According to Christian theology, suffering is a part of the Salvation History, which was realized by the crucifixion of Jesus Christ. Christians were convinced from the beginning, that present suffering is imitating Christ and through that to giving him a favour. The more the person is sensitive, the more he suffers and shares the cross with Jesus (Langkammer 1987).

The suffering subject is present in epistles of Peter. He says about different forms of suffering such as: hatred, repressions, calumnies. In the same time he consoles his recipients by writing: "The world is undergoing the same kind of sufferings" (1 Peter 5, 9). Author goes further in his deliberations. Encourages to suffering, because it is "commendable before God" (1 Peter 2, 20). Saint Peter presents to his recipients letters of suffering servant of Yahweh (Isaiah 53). That servant is Jesus, the Good Shepherd, who cares about every sheep in his herd. However, Saint Paul connects suffering with a journey of faith. Humans in their lives have various situations. Mostly of them are difficult, painful and not easy to accept. Faith is for them a condition to understand suffering and accepting it. Physical and spiritual suffering evokes fear. Lack of faith is deepening that condition, make them feel guilty for mistakes and sins. For Saint Paul suffering is contrary to human nature. The Creator does not create human, underlined Paul, to make him suffer. However, Christ is present in life and death of every human being. That presence is the highest grace for man. His message is very clear. Suffering, understanding the sense of suffering and bearing suffering is a particular grace. Especially it is, when it means

enduring suffering with Jesus. Connecting own pain with Christ's cross gives our suffering a salvific character. However suffering without connection with the Cross of Christ and his resurrection becomes a tragedy, nonsense and emptiness. From such a perspective life of human would be vain and purposeless. Suffering should make other man compassionate and respectful. According to Saint Paul human suffers in lots of ways. Suffering is something more than only illness. Human knows physical and moral pain. Presence of these underline in human physical and spiritual element. In conclusion, Saint Paul underlines the role of faith in suffering. Only faith lets human to agree on suffering (John Paul II 1984).

The issue of suffering was also taken into account by the Second Vatican Council trying to give an answer on this. In documents (KK 9, DA 3, DK 9) speaking about the charisma of suffering is calculating various forms of it – big and small: illnesses, misfortunes, failures, humiliations, disabilities, everyday ailments. Some of them may be an expression of God's will regarding human. If they have such character, they can be called a gift from God to human. Often are accompanied by suffering connected with performing occupational work. According to Council they are charisma to the spiritual good. Suffering, as any other gift, is human. First of all, it makes him particularly sensitive on another man's suffering, release from selfish behaviours, encourage empathy, is mobilising to help people in difficult life situations (Konstytucja Dogmatyczna o Kościele 2002; KKK 1994).

The Sense of Suffering

John Paul II called suffering and disease “an invitation to suffer like Christ did, to follow Him”, and in the same time to enrich ourselves (Ryn 1988). Sick person often uses the statement: God touched me. Pope says that statement is right. In the first phase human rejects it and opposes the evil, the sickness is. However later man should accept it and deal with it. There are situations in which the reason of suffering is human imprudence and it is not coincident with God's will. John Paul II often underlined in his speeches, that any government cannot prevent us from suffering. Every

kind of disease is a person's failure. To understand and accept it, human has to be in alliance and connection with the Creator. God is able to transform our diseases and through them can improve human. All kinds of suffering have always accompanied human. Also today there is a lot of it in our surrounding. John Paul II requests for a keen spiritual sight, which lets us to see suffering and pain in others. In every country and city there are people, who are carrying their own crosses. Everyday we have to learn how to show empathy for people in difficult situation (John Paul II 1996). The Christian faith accepts the thesis about goodness of God. Suffering, disability, sickness is keeping human away from goodness. So Suffering, which is bad, has to be related to goodness, while suffering individual is connecting to the world suffering.

John Paul II suffering calls one of the Gospels. He sees in it particular grace, which is God's care about his creation. History shows lots of outstanding individuals, which, thanks to suffering, converted to Christianity. Through suffering person becomes a new creation and new human. In suffering greatness of soul exceeds the weakness of body (John Paul II 1984). Sickness and disability can be overcome by love. The expression of it is the love of Jesus, who revealed himself on the cross. Suffering without cross would be for human personal tragedy and emptiness. Suffering person in unity with cross becomes a power not only for oneself, but also for world and church. "We ask precisely, writes pope, who are weak to become a source of strength for the Church and humanity. In the terrible battle between the forces of good and evil, revealed to our eyes by our modern world, may your suffering in union with the Cross of Christ be victorious!" (Langkammer 1987, p. 160). For John Paul II suffering meant invitation and challenge directed by God to human, who is supposed to take part in Christ's redemption. The Story of Mankind confirm, that in suffering there is particular grace, which brings us closer to the God. Who keeps trying to follow the cross, knows, that is not alone on this path. Is accompanied by God and His help. That presence is a grace, often misunderstood and shrouded in mystery (John Paul II 1997).

In the case of John Paul II we were witnesses of his suffering and illnesses, because he was suffering a lot. His suffering was not only physical, but it was also concern about world peace, justice or solidarity with

the poor. In his case it may be said that everywhere, during everyday work or pilgrimages or hospital stay he completed Christ's afflictions. People present at his path felt, what he suffers with them and for them. He called his hospital stays "suffering stops". During them it was easier for him to trust in God, to commend him the concerns of the world, church and individuals. For him hospital meant place of suffering and hope, place of service to the sick and place of life (John Paul II 1997).

Suffering in John Paul II Teaching

In his various publications and speeches about suffering, the pope was taking up the reflection about the meaning and sense of suffering. He did not stop only on its human dimension, but he also underlined its supernatural character. Sick and disabled people were asked by him to look at Christ to see in Him themselves. He constantly reminded, that the death of Jesus was not senseless and useless. As in the case of the death of the Son of God, also in the life of an individual, suffering leads to a triumph. That is why, towards sick person he had menial attitude. During every audience, travel or pilgrimage there was a time to meet sick people. He was often present among ill, paralysed, disabled, homeless people. Talked to them, cheered up, hugged and kissed people with AIDS. He was supporting with a good word, promised to pray, sympathized with them. However, it seems that the most important thing he have done for sick and disabled was attracting attention of mass media on them. Thanks to them sick people live a normal life. In that way he brings suffering man closed to the loving God. At the suggestion of John Paul II, 11 February was established The World Day of the Sick (Graczyk 2012).

In his teaching he underlined that suffering is not a God's punishment by God. In experiencing disease he had seen pro-existential and expiatory character. It means that human can suffer for another human to obtain salvation for him. Pope often invoked on the words of the prophet Isaiah, who showed the way to suffer in silence and humble before the Lord. Suffering is for human evil, but God cannot be blamed for it. "He was oppressed and afflicted, yet he did not open his mouth; he was led like

a lamb to the slaughter, and as a sheep before its shearers is silent, so he did not open his mouth.” (Isaiah 53, 7). New Testament redefined suffering in the new way. It is necessary for salvation. The same prophet compare suffering to the birth of the child. There is also a lot of pain, but after a while they convert for mother into joy. God chooses just human and that person, through voluntary suffering, is making expiatory sacrifice for sins of others. Sickness makes human to speak for or against Creator, and behind the sickness is God. Suffering can be penance and cleansing from the sins (Langkammer 1987). John Paul II perceived the issue of suffering and its sense in so-called Key to God’s economy. In that point of view suffering is good. It sanctifies the one, who suffers and also these people for which that person suffers for. Suffering has the power to change human. Suffering man “is the same Christ, who suffers, Christ from Gethsemane, Christ whipped, Christ crowned with thorns, Christ on the cross. (...) Is the same Christ, who drank the cup of suffering. (...) Is the same Christ, who took all human sinfulness upon himself (...), to extract from human goodness: salvific goodness” (John Paul II 1985, p. 26).

In his meeting with sick people, John Paul II often reminded, that suffering of the believer is building moral good in human and in the universal dimension, it contributes to salvation. Tears of sick human, suffering and disabled, are not vain, they became saving for neighbours. Every kind of suffering is a mystery, which in the same time is becoming a bridge between human and Christ. It can lead to friendship and happiness. The person, who considers oneself for God’s friend willingly accepts every kind of disease believing, that this suffering will turn out precious and fruitful. Pope clearly perceived close relation between suffering Christ and human. It is why, addressing to sick people, he was saying: “You do not suffer and you did not suffer for nothing. Pain makes you to grow spiritually, to clean your heart, to conceive true meaning of world and life, your goodness, patience and generosity arise (...) It means, that you can give Christian value to your suffering” (John Paul 1985, p. 29). It is worth to underline, that pope said also some things about difficulty with understanding suffering. Some answer to that question human can find in Jesus. The suffering of human cannot be understood without the sacrifice of Christ, which is embodied everyday by the Eucharist. It is why, at the meeting with sick

people in 1982, he said them to bear with suffering with patience and peace, giving it to God during mass, and while receiving communion to connect their pain with the pain of Jesus Christ. The suffering of human connected to the cross of the Saviour has special meaning and sense. Towards world and neighbour it has the role of saving mission (John Paul II 1985).

In the presence of suffering in human, John Paul II saw a particular meaning, what it can be for man. It does not only has great spiritual meaning, but also shows the truth about existence of the supernatural. Human has a body and an immortal soul. In that point of view also cross has special sense as a symbol of suffering, God's love for human. On the meeting with sick people in psychiatric hospital in Cracow in 1991 pope said: "What is more purifying and approaching to God than suffering and sacrifice of an innocent human? To enunciate these words, human has to have Jesus Christ, the Son of God, deeply in heard – His paschal mystery, mystery of redemption... By passion and death on the cross, You redeemed the world. (...) The weakness of human, settled by faith in Christ's mystery, becomes the source of God's power. (...) Therefore, suffering of human and humans, which cannot be avoided, accepted in the spirit of faith, is the source of power for suffering person and others and is the source of power for Church and for salvific mission of Church. That is why I appreciate so much every meeting with sick and suffering people. It is why I hope very much, that their weaknesses and pain will be rewarded" (John Paul 1995, p. 311 – 312). Sense and meaning of human suffering can be found in acceptance of Christ's cross. During one of the audiences, addressing to ill, he was saying: "The Cross of Christ is the most excellent explanation of sense of suffering and value of it in life and history. (...) Cross is an appeal to respond with love on love. Not always we can find in God's plan the answer on the question why are we suffer. (...) But because of faith we can be sure, that it involves love plan, in which there is wide range of crosses, big and small once, which is aiming to connect into one Cross" (Redrado, Mari 1996, p. 55).

The pope in his teaching, speaking to sick people, often appealed for not withdrawing from life, but live life more fully and they also should try to change the reality they are living in. Human towards suffering and trials is never alone, God is always with Him. He does not leave him alone,

24 He wants to help. Confirmation of it are the words of St. Peter: “The God of all grace who called you to his eternal glory through Christ [Jesus] will himself restore, confirm, strengthen, and establish you after you have suffered a little.” (1 Peter 5, 10). The same author gives an example of Christ suffering for us: “For to this you have been called, because Christ also suffered for you, leaving you an example that you should follow in his footsteps.” (1 Peter 2, 21). In this context John Paul II underlined, that human belonging to Jesus will suffer. However suffering has sense, because it strengthens faith, connects with the Saviour and other people. The final fruit of suffering will be participation in Christ’s resurrection.

It should be noticed, that in the Magisterium of discussed the pope, referring to suffering human in a broad way, there is also a problem of human law to defend from suffering. Human has law to defend from pain. Man should, with the help of others, use everything, what modern medicine has to offer. However, when they will be in a situation, in which there is nothing to do, individual should see in it supernatural sense. An example is the Son of God, who accepted the Cross of rejection and suffering and converted it into the symbol of love. In letter *Salvificidoloris* pope writes: “The sense of suffering is in the same time very supernatural and very human. It is supernatural, because has its roots in the mystery of redemption of the world. It is also deeply human, because humans find in it themselves, their humanity, dignity and mission. Through Christ... and in Christ clarifies the mystery of suffering and death” (John Paul II 1984, 31). Truth can be a stimulus for lots of people to look for strength, power, support and sense of suffering in the suffering of Jesus Christ. “Suffering, underlines John Paul II, which destiny is to bless those, who are suffering, can be also used to bless those, who are bringing them help and consolation. We always remain in the mystery of salvific cross” (John Paul II 1994, p. 36–38).

John Paul II exploring the problem of human suffering not only encourages to affirm it, but also to understand. In his teaching he was speaking about the need to explore the mystery of pain, suffering and the truth about it. Christ’s Cross had for him evangelistic and instructive character. Individual, who experienced suffering asks about the sense and point of it. However following suffering Jesus gives a person supernatural

dignity, which can enrich world, church and every person. John Paul II often quoted the teachings of the Second Vatican Council, which in the dogmatic Constitution on the Church described clearly meaning of disease and suffering: “Just as Christ carried out the work of redemption in poverty and persecution, so the Church is called to follow the same route that it might communicate the fruits of salvation to men”.

Christ was sent by the Father “to bring good news to the poor, to heal the contrite of heart” (Luke 4, 18), “to seek and to save what was lost” (Luke, 19 10); Similarly, the Church encompasses with love all who are afflicted with human suffering and in the poor and afflicted sees the image of its poor and suffering Founder. It does all it can to relieve their need and in them it strives to serve Christ (Konstytucja Dogmatyczna o Kościele 2002, 8)”. The final meaning of our suffering is love, which found the deepest sense in the Cross. Words of the prayer in Gethsemane prove that – Jesus responds Father with love through the truth of suffering. St. John confirms that “For God so loved the world that he gave his one and only Son, that whoever believes in him shall not perish but have eternal life” (John 3, 16). Jesus was not only speaking and teaching about suffering, but he also, by his rejection and suffering, answered human on the sense and the value of suffering (John Paul II 1984).

Pope in his teaching sick people often was speaking about Christ in Gethsemane. He was did it in the particular way during Lent. The Son of God of his own free will agreed on great sadness and anguish. Jesus, fulfilling the will of Father, took the cup of rejection, suffering, fear and drank the cup to the last drop. John Paul II invited sick people to imitate Christ in Gethsemane, to connect with His suffering, to give own Cross for the sins of others as well as own. Sick human should look constantly in Jesus. Accepting Cross will change pain into hope, merit and source of strength. Only crucified Jesus can heal the wounds. For suffering human these words of Jesus can be significant: “My God, my God, why have you forsaken me?” (Matthew 27, 46). The agony of the Son of God and His cry of despair is an example of suffering man. Death of God-Human showed drama of every death of every human. Holy Week is the time of not only solidarity with suffering Creator, but also, first of all, the time of Solidarity of God with suffering human (John Paul II 1996). On the Holly Week man

should look through the prism of resurrection. Christ, wrongly sentenced to death, scourged and humiliated, in the same time reached fullness of a life. Example of His torment is a proof, that suffering is not useless. It inscribes into God's plan for man and points out to values supreme (John Paul II 1996). Pope in His speeches to sick people often draw attention to the figure of Christ, whose suffering in the same time was relieved, because His Father was close to Him. Sick and suffering person also is not alone, however can feel like this. Individual should remember, that Jesus loves everyone and that love should be continuing source of strength and joy. „But at the same time, writes John Paul II, in the mystery of the Church as his Body, Christ has in a sense opened his own redemptive suffering to all human suffering. In so far as man becomes a sharer in Christ's sufferings – in any part of the world and at any time in history – to that extent he in his own way completes the suffering through which Christ accomplished the Redemption of the world. Does this mean that the Redemption achieved by Christ is not complete? No. It only means that the Redemption, accomplished through satisfactory love, remains always open to all love expressed in human suffering. In this dimension – the dimension of love – the Redemption which has already been completely accomplished is, in a certain sense, constantly being accomplished. Christ achieved the Redemption completely and to the very limits but at the same time he did not bring it to a close. In this redemptive suffering, through which the Redemption of the world was accomplished, Christ opened himself from the beginning to every human suffering and constantly does so.” (John Paul II 1984, 24).

Christ voluntary chose the path of suffering to be an example for human. He showed it in the Garden of Gethsemane. He knew his future (arresting, scourging, crowned with thorns, humiliating, the Way of the Cross, death), was suffering on the mind and on the body, however it was coming from Father. In the Garden of Olives he remained alone. Alone and left by everyone expresses his solidarity with all lonely and left out people. Christ not only suffers for human, but also suffers with him. That state is filled by prayer, when the disciples of Jesus are sleeping. On the one hand, he asked God for removing suffering, on the other, he wants to fulfil the will of the Father “My Father, if it is not possible for this

cup to be taken away unless I drink it, may your will be done” (Matthew 26, 42). His obedience to the Father was the proof that he has loved the world and man in the world. Suffering in the Garden of Olives was undeserved gift from God to human (John Paul II 1984).

On the one meeting with sick people, John Paul II said “Suffering came and embraced whole humanity of the Incarnate Son of God” (John Paul II 1997, p. 63). It is why pope invited and encouraged suffering people to learn from Christ and imitate Him in His suffering. Sick and disabled person should be looking constantly on the Cross of the Saviour and be His companion on the root of pain and rejection. Christ on the Cross is “A man of sorrow”, is a Master, who, by His life and behaviour, was taught, that we are supposed to take example from Him, listen to Him, delve deeply into the mystery of cross. He encouraged His followers to love neighbours, to trust Him and to suffer with Him. Thanks to His painful sacrifice, human was redeemed. That sacrifice becomes a challenge for human, because of it man should see in life sense and meaning.

John Paul II was a human, who was suffering a lot during his pontificate. Through his long pontificate and his long life was building the Gospel of Suffering. Undoubtedly was accepting suffering and considered it as the grace of the God. He was repeatedly proving this, especially at the end of his pontificate. Although his old age, limited mobility, incapacity to speak, he was full of peace and joy. However, he did not hide difficulties with understanding and discovering God’s love for human in it. It seems, that the power to endure suffering he was deriving from faith. Through it he also saw a sick man, often immobilised, disabled and deformed. Faith helped him to notice in every person the image of God.

Summary

In the modern world suffering often occurs. Suffering, as disability in a broad sense, takes different forms. That is why the question someone asked Jesus is still actual: “Rabbi, who sinned, this man or his parents, that he was born blind?”. Lots of people ask: Why does God allow suffering, especially involuntary one? Looking for the answer on these questions is both difficult and tedious process. Some answer human

can find in the faith. Every form of suffering, especially involuntary, is what the suffering of Jesus was. Christ did not suffer for his own sins, but for the sins of people, to redeem them in that way. The conclusion is paradoxical: God loves and accepts suffering of innocent people. The issue of suffering, rejected human was taken up by John Paul II. These issues were very often present in his teaching and life. He was always giving lots of time and attention to sick people. At the suggestion of John Paul II, The World Day of the Sick was established.

Key words: sense of suffering, sickness, disability, John Paul II, the Sacred Scriptures about suffering, the role of suffering.

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Valuable Aspects of Work as a Subject of Interest of Disfavoured Groups, Especially Including Persons with Disabilities

Introduction

Considering work as a value brings a need to refer to creators and those, who are spreading values, like ancient philosophers. Plato is a great example, we owe him three values, which bring meaning to life – truth, goodness and beauty. These values are considered as universal values. Their highest dimension are ideals of truth, goodness and beauty, unreachable for human living on the Earth, that is why they are ideas. The model of education that includes them was called spiritual education (Hessen 1931, Kunowski 1993, 1996). This education is fulfilled not only by mental education described by life, behavior, truth, but also moral education with goodness as a basic category of values and aesthetic education referring to beauty as a basic category of values determining the sense of human aspirations.

In the aspect of universal values and educational work, often described as useful, reasonable, responsible, needed, exact, respected, adapted to humans capabilities, economical, punctual, conscientious, good, developing (Furmanek 2000, 2006; Wiatrowski 1994, 2005) making self-realization (Lewowicki 2003) and humans materializing in work process possible, deserving human and in the need to be the subject of work sympathizing with others (Moskwa 2003). These values give humanistic character to work and make it “the good of human, the good of human’s humanity (...) work is an action and experience is a key to the truth” (John Paul II 2005), what cause that humans, through the work, “not only change

the nature, adjust it to their needs, but also materialize themselves as humans, and then truly become humans” (John Paul II 1996). Presented values of work, including occupational work, are becoming interesting offer for disfavoured groups including disabled people, former prisoners, that perceive occupational work as a chance for readaptation, women over 50 returning on the job market from maternity leave, graduates and people, that are unemployed for a very long time. Each of these groups in these valuable aspects of occupational work can find interesting values and look for work in them, and this work will become for them a chance for a better, more fair life.

Disfavoured Groups – Characterization and Chances for Employment

Term disfavoured come from French *défavorisé*, (*Słownik wyrazów obcych* 1984) although it does not occur in PWN dictionaries, is being used in Polish in reference to job market and, more widely, defines people, environments with worse start and chances to function in the society. So, can this word be used more widely than in reference to job market? Social economy uses this term in exchange with the term excluded groups, that is the same thing as disfavoured groups understood as “groups in difficult situation/ position on the job market” or “groups with problems on the job market” (*Grupy wykluczone*), so-called groups of people related with secondary job market, where fluctuation of employment is very high, working conditions described by salary, raising qualifications, etc. They are definitely worse and periods of unemployment are more frequent, it also connects with multiple unemployment and/or unemployment lasting for a long time. Excluded groups become included groups, which often struggle with very specific problems, like – for example – people leaving penitentiary, people with low qualifications, disabled people, etc. However, according to actual legislation (*Act of 20 April 2004 on Promoting Employment and Labour Market Institutions with changes*) and reports mentioned below, there may be more different groups defined as disfavoured, it means socially excluded, like young people (Werbanowska 2006), women (Sztanderska 2006), people over the age of 50 (Schimanek

2006), inhabitants of the countryside (Marchlewski 2006), disabled people (Kalita 2006), mentally ill people (Kaszyński 2006), immigrants and national minorities (Goździk 2006), homeless people (Olech 2006), or, finally, people leaving penitentiary (Woźniakowska 2006). The criterion to choose these is multitude of psycho-social causation, from which in the spectrum of work and improving chances for employment, inscribes currently all of mentioned social groups low occupational activity. Its development, which concerns all the citizens, especially threatened by unemployment, is a derivative of job market fluctuation, persisting need to study and for disfavoured groups it is especially requiring task. Scale of its difficulty seem to overgrow disabled people, maybe is less difficult for those, who are disabled physically. Beside that *WHO – World Health Organization* distinguishes nine groups of disability with impairment: vision, communication, organic nature, intellectual and with emotional disorders, with apparent defect, invisible defect and processes of aging (Borkowska, Laska, Myślińska 2005). Another conception proposes M. Kupisiewicz (2013) who – in her conception of qualification – itemizes disabilities:

- 1) sensory, which includes damages and disorders of sight, hearing and both;
- 2) physical – motor organs and anatomical structure of motor organs damages, another chronic diseases;
- 3) psychological with mental handicap, psychological and personality disorders.

They are just chosen propositions, which present complexity of disabled people, considering their multitude and specific character, obliging them to adapt to diverse needs of the educational system, including occupational education, showing therapeutic values of work as well as economic ones, which are the chance to reach independence for disabled people, especially with mild subnormality. Work presented in categories of activities, referring to activity, becomes useful to every level of disability (*Act of 27 August 1997 on Vocational and Social Rehabilitation and Employment of Persons with Disabilities*), starting from undertaking work on the open job market, which is the chance to disability, it means mild subnormality, through classes in WTZ directed to mild subnormality, to schools of life teaching people with significant disabilities to be independent.

34 Work, its therapeutic values and contact with other human – shows to disabled people universal, valuable dimension of work, which, for the rest of disfavoured groups is – besides other values – also very precious. It is why various values of work should be presented to all of social groups, including different forms of activation – as most useful and appreciated in given group. It is why the problem of values begins further consideration, including the view on values and theirs exemplary structures.

Origin, Essence and Structures of Values as Introduction to Estimating Humans Work, Including Occupational Work

Recently the term of value is particularly up-to-date. This term comes from Latin words *valor*, *valere* and means "to be strong, healthy, powerful, worth, meaningful for oneself and someone" (*Słownik Wyrazów Obcych* 1994, p. 448). Quoted meaning range refers to the human, who always wants to be strong, powerful, worth, meaningful for oneself, but also for someone. Through these feature, people want to feel appreciated, because they are meaningful not only to this person, but also for the members of social community, in which they live, work and act. That interpretative dualism is the result of "positive emotions, focusing on the humans desires and aspirations", what shows what is "... important in human life, worth being desired, on gaining what individual care the most, what individual looks for everyday, a precious thing" (Mariański, Zdunkiewicz 1991). This view illustrates the way of thinking, acting, aspiring, is accompanied by values not revealed directly, which are characterized by "obscurity, liquidity and susceptibility to different interpretations" (Mariański, Zdunkiewicz 1991). That groups of values, which are experienced by human, often consciously (mentally, sensually) or unconsciously (intuitively) has immeasurable character, because what for one is precious, worth being desired, is a role model, for other does not have any value. This kind of values concerns beliefs and experiences, thoughts and desires of human being (Nowacki 2006).

Another understanding of values relates to things existing for real, which have values as a subjects described by price, being desired, fashionable and having other values because of which it has meaning for others.

This aspect illustrates measurable character of values and is described by the features of given thing, worth being possessed by human. In this dimension the value is what is the answer on need, the way to please it. The value is also the feature described by price assigned to given phenomenon, thing, based on their approval and experience (Ziembiński 1993). This argumentation leads to thesis that “values exist independently from the ones, who come to know them” do not expose directly, but manifesting through the way of thinking and expression, are undefined, what results from their complex character (Ziembiński 1993). They are what human approves, so they are something objective and subjective, real and mental entity, derivative of acts of consciousness, so-called phenomenons (Nowacki 2006). They demand from human different things, cause internal compulsion, and, because of it, human focuses on those things, which he considers as beautiful, true, good, because “truth improve intellect, good develop will and beauty form feelings” (Pólturzycki 1996, p. 39) (...) gives joy to human, let him to bear easier with all kind of life difficulties. It is why the values – despite existing through themselves – exist also in axiological situations and human as subject has to create conditions to arise and present the subject and its values, it is the third understanding of values. R. Ingarden (1987) determines them by subject-object attitude and understands as values. The fourth contention presented by Plato raise values beyond humans world giving them “eternal existence“, which “influence on our world” (Nowacki 2006). Plato describes them as universal values, ideas, it means values, which fullness is unreachable for humans during their lives and that it is important to prepare human to the meeting with whose ideals, which human can experience in “the house of the LORD God” (John Paul II 2005). The task can be completed – according to S. Hessen (1931) and S. Kunowski (Kunowski 1993, 1996) – through spiritual education and according to J. Tischner (1981) and A. Solak (2001) – Christian ethic.

Relations between values on the Earth, accessible to human and ideas are presented by Illustration 1., which – according to T. Nowacki (2006, p. 185) – can be used as a starting point to the division of values, according to the criterion of impulses and more exact – their affiliation to four zones.

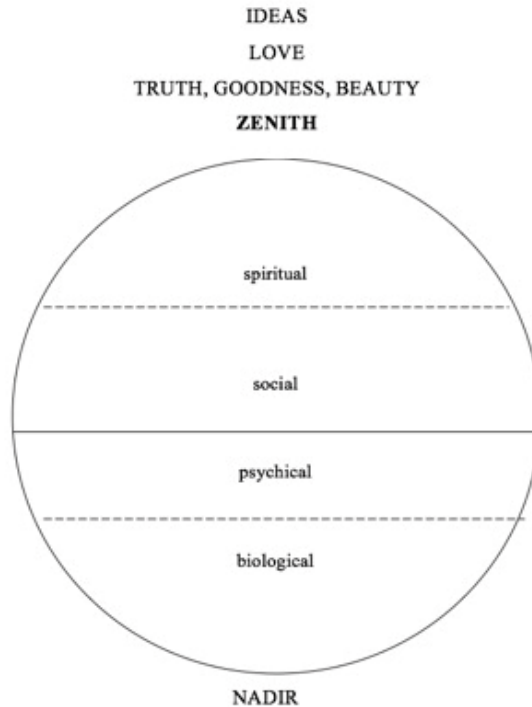


Illustration 1. Zones of values according to criterion of type of impulses (T. Nowacki, 2006 p. 185)

First layer, biological, (illustration 1) expressed by human attitude to impulses, is the biological need, which illustrates the degree of providing values usable and utilitarian as food, money and valuable objects – useful, for example, for exchange.

Second layer includes psychological values such as happiness, sadness, satisfaction, loftiness, etc.

Finally, third layer focuses social values such as manners, culture of given community, its law, etc.

These layers are fulfilled by spiritual zone of values, which outreach these three zones, they give human joy and let better and easier bear with the difficulties of life and give sense to human life.

According to T. Nowacki “values in every zone are not separated by invisible line, quite the opposite, they have affect on each other” (Nowacki 2006, p. 186), change entire time, enhance existing values or shift them on different scales.

So what values are valuable for human? Real, autotelic values and everything, that includes them or absolute, universal values and what creates the world of values?

Answer to these questions leads to theirs typologies among which the essential place falls on autotelic values. These are human, science, work and moral laws. Themselves are the value and the views of personalities like John Paul II (1920-2005) (John Paul II 1996) and J. Tischner (1931-2002) (Tischner 1981), but also pedagogues, (Denek 1994; Półturzycki 1996) and pedagogues of work, (Nowacki 2004, 2008; Wiatrowski 1994, 2005) are proof for it.

The thesis here is that values were arising with the world. Because of them human began to appreciate not only the beauty and threat of nature, but also its usefulness and the need to learn some behaviors and activities. They let human to make use of natural goods and enable to survive. Human’s association with nature, let Plato (427-347 BC) to notice these qualities important for human, that he described as values and considered them not only as basic to human, but also universal. They became the base to create different collections of values, for example: 1) vital, identified with life, health; 2) cognitive, identified with truth, simplicity, theory, judgment; 3) aesthetic, associated with ugliness, expression, fantasticality, comic quality, pathos, easiness, poeticalness, etc.; 4) moral, which equivalents can be good, selflessness, compassion, responsibility, generosity, nobility, sincerity, understanding, usefulness, honesty, etc.; 5) hedonistic, associated with pleasures, games, relax, sex, etc.; 6) religious, associated with God, Decalogue, holiness (Wiatrowski 1994, 2005).

In the face of typology asking again about groups of values and theirs value for human and place of forming seems justifiable? Answers on these questions are concluded in typologies such as E. Spranger (1882-1963), W. Tatarkiewicz (1886-1980), M. Scheler (1874-1928), R. Ingarden (1893-1970), J. Tischner (1931-2002), or T. Kotarbiński (1901-1984), John Paul II (1920-2004), Popielski (1996), and also A. Solak (2001), who thinks that

38 human has to open on values and accept them: (...) “on them are forming the features, properties and humans behaviors, the way of living. Their typologies of values not only are situated in frames of division of values through impulses” (Nowacki 2006) but also let to describe every layer with different values (look at illustration 2).

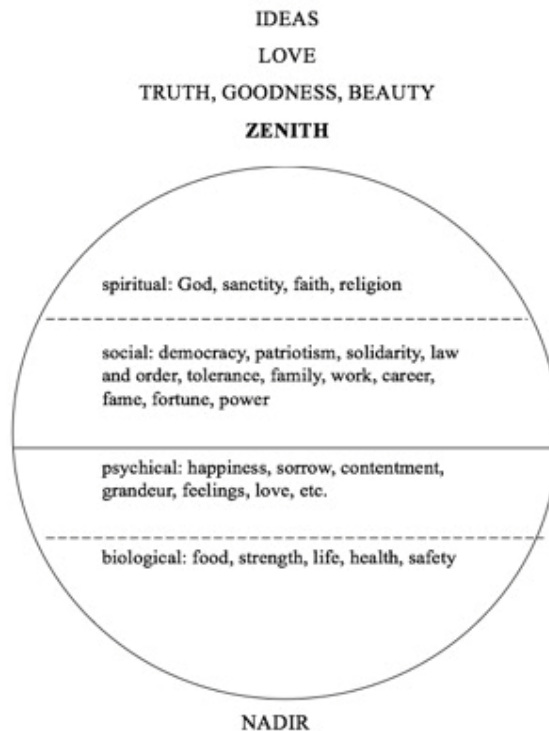


Illustration 2. Description of layers of values according to T. Nowacki (2006) criterion of types of impulses, which collect values (with personal modification, cf. Barbara Baraniak, 2010).

How it was mentioned, the criterion of creating different typologies of values became truth, good and beauty, which are treated as exemplary beings, what means, that their level is out of the range of human life and

acting, because no human can fully reach them, it means, that humans “cannot know the hole truth about themselves and about the world (...) will not achieve fullness of truth, because every of them is affected by the piece of evil (...) will never perceive the fullness of beauty, without a flaw” (Denek 1994, p. 19) living on Earth.

Aiming to these values is the task of human, expressed by duty, it means the need to get to know and form and understand their role and meaning to humanity. It is expressed by aspect of consciousness, which enable human to choose between good and evil, truth and untruth and beauty and ugliness, in belief, that “good protects from unworthy actions” (...) “truth from hypocrisy” and the result is goodness and truth (Anzenbacher 1987). It gives human joy, let to enjoy through noticing its beauty. The universal character of values proves, that they are essential component of human’s world, human has to create conditions to let them exist, show and define their meaning. One of these conditions is realizing determined activities, important for the theory of the pedagogy of work – and important element of it are human’s qualifications.

So, how to describe relations between values and work? In answer to that question – they make the criterion estimating work and its aspects – especially considering getting interested of work and the will to take up job – especially by disfavoured groups, it means disabled people, former prisoners, that perceive occupational work as a chance for readaptation, women over 50 and returning on the job market from maternity leave, graduates and people, who are unemployed for a very long time and also groups of immigrants and emigrants.

Presenting occupational work in the categories of values, allows to notice in it most important things for groups fighting with poverty and social exclusion. We can number them, according to researches and context, among:

- 1) economic;
- 2) the possibility to make interpersonal relations;
- 3) building strong social networks;
- 4) noticing the usefulness of work, etc.

Work and values, that includes, are becoming the hope to these social groups for better, more decent life.

Estimating the Work

40

Three values singled out by Plato – truth, good and beauty – were called the universal values, because they are the base of different typologies. Justifiable question is: do they refer to humans' work and influence on them, their work and the product of work?

The answer to that question provides characteristic of work described by such subjects as, e.g. work, which is meaningful, useful, responsible, needed, exact, respected, adapted to abilities, punctual, conscientious, good, developing, self-realizing, worth, materializing, etc.

These subjects of work provide tasks for human, who – wanting to create good, beautiful, useful and still procured product – has to:

- 1) have conviction about the sense of work in personal and social dimension. It lets to use owned intellectual and efficient potential to undertake decisions compatible with requires of technological process, considering the quantity and quality of used stocks and auxiliary materials to produce product of good quality and socially desired. This attitude to work can make it **responsible, free, frugal, expected and socially desired**;
- 2) fill the norm of production, expressed by quality and quantity of used stocks and auxiliary material and also effective using the time of work, what will be possible because of proper attitude to work expressed by **conscientiousness in work and the employee feel of usefulness**;
- 3) want to produce product responding to features, described in proper subject form, because of why **good, beautiful, useful and socially desired** product will arise;
- 4) undertake initiatives expediting work, because of which it will become **developing, realized, meaningful, deserving human** and will take place in more **friendly and safe** conditions;
- 5) be convinced about social usefulness of made products, because of that work can be considered as socially desired, meaningful, useful, etc.

Valuable context of work process, dominant role assigns to human (look illustration 3) – whose attitude and relation to work let perceive it

as worth, free and responsible and because of that – good, just, wise, conscientious, creative, developing, socially desired and expected.

Staying in the trend of values presented in the statement “Human as highest value” and “Work as a measure of humans value” (Wiatrowski 2004) – they assign the precedence of human over surrounding and entire activity (Nowak 2000, p. 155), including work (look Illustration 3).

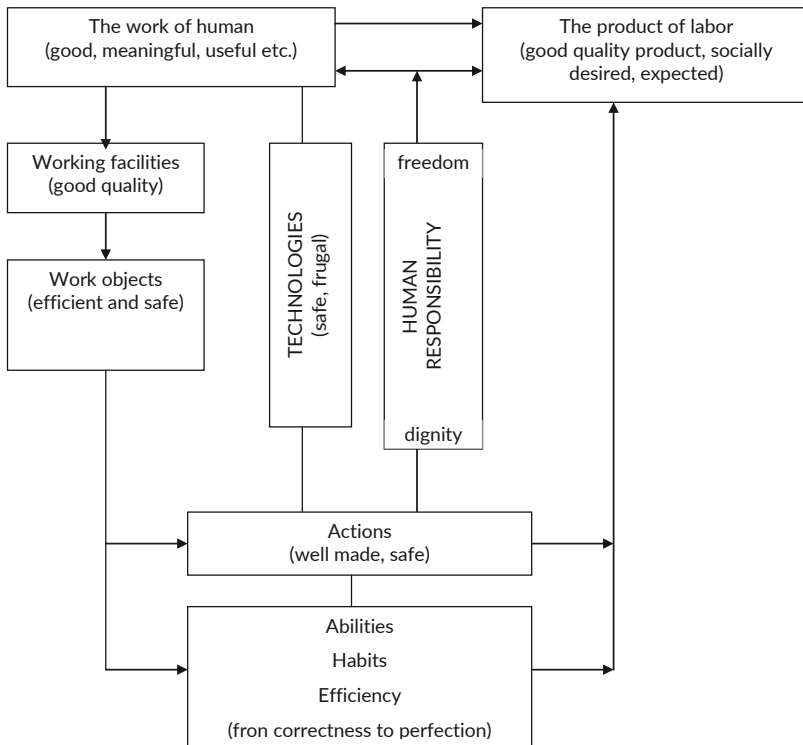


Illustration 3. Human and work process in constellation of values (possessed model, Baraniak, 2010 compare Nowak, 2000, p. 155)

42 Free choices allow man to get the education he deserves and thanks to this education he keeps making another free choices concerning work place. Then, in work, because of which, thanks to responsible actions influence on quality, efficiency, process and production of useful and socially desired products, compatible to norm, fashion and developing trends. These requirements underline dominating human's role in all kinds of activities, which always remains secondary, because is the result of thoughts, that make human the creator.

Conclusion

Undertook considerations proved that work is not only one of basic categories of terms of the pedagogy of work but also important value for every man, choices about educational process, employment, further functioning and development. Work is perceived by man as a value not only in itself, but also the source of another values expressed by effects of human's work being the source of goodness for others. Another dimension of value of work is its variability and the need to adjust it to human's abilities as a working subject, including different disfavoured groups, including disabled people, to fulfill various human's needs, including economic and aside of economic. For disabled people important values of work remain therapeutic, contact with other people, develop of communication and for others disfavoured groups human's development reducing social exclusion, study of language and culture of given country, considering immigrants, socializing former prisoners or participation through work and its products in social dimension of work, expressed in realizing needs and social expectations on different level. That last one becomes an impulse for designers, creators trying to face up to social expectations, which consequence are getting better and better, conditions are improving giving work new, more valuable face, that require different, often new, preparation for work, and also occupational improvement expressed by the need to striving to occupational championship, which value is idea and the need to achieve it by human. They also should not omit any social groups capable to face up to these requirements, including disfavoured groups, similar

as people with disabilities. To them we should particularly explain, show and approximate, that human, work and idea – described by axiological thesis, according to which “Work is the measure of human’s value” and “Human – most important value” (Wiatrowski 2004), they are available for everyone and set the sense of humans work, becoming a chance for better life of every human, including disabled one.

Summary

Undertook considerations proved that work is not only one of basic categories of terms of the pedagogy of work but also important value for every man, his choices about educational process, employment, further functioning and human’s development, with different disfavoured groups. There are important values of work remain therapeutic, contact with other people, develop of communication and for others disfavoured groups human’s development reducing social exclusion, study of language and culture of given country, considering immigrants, socializing former prisoners or participation through work and its products in social dimension of work, expressed in realizing needs and social expectations on different level.

Key words: work, valuable aspects of work, disfavoured groups

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Chosen Aspects of Functioning Physically Disabled People

In the last years we can observe constant increase of people with physical disabilities. It responses to both – inherited and acquired (Szczupał 2007). Disability is caused by lots of disruptions and problems in different areas of functioning – physical as well as psychosocial. About the fact how human being adapts to situation and life, which disability is a part of, decide various factors. Behaviour and attitude of society towards disabled people is very important to them, because it has great influence on their mood, motivation to overcome difficulties and on place they will find in society and how much will their life be normal.

Every disease, including physical disability, is a great obstacle in realizing aims and goals and violate human most precious values including: health, physical fitness and capability to fulfill basic social functions. It leads to suffering and cause lots of difficult situations for human, whose physical functioning is limited (Kirenko 2002).

W. Dykcik (2001) notices, that “disabled person is an individual, whose physical and psychical condition permanently or temporarily impede, limit or make impossible fulfilling life tasks and social roles according to law and social norms” (p. 15). According to A. Maciarz (2005), locomotor dysfunction is a physical disability caused by pathological change in locomotor system, motor system and spinal cord. M. Borkowska (1997) defines physical disability as “all dysfunctions of locomotor system, which can be caused by many different reasons, but the consequence is always limiting physical fitness” (p. 11).

Physical disability can be encompassed in following groups “damages and lacks in autonomic structure of the locomotor system, motor skills disorders without affecting autonomic structure of the locomotor system, deformations of the locomotor system causing simultaneously motor skills disorders” (Kirenko 2002, p. 38).

J. Sowa (1997) specifies, that in the first group diverse damages are included, lacks of bones and muscles, which are caused by mechanical injuries or amputations. The second group includes motor skills disorders, which include palsy as a result of damaging nervous system and paresis which results in total or partial abolition of motor skills. The third group of damages are deformations of locomotor system, it means some anomalies or defects in autonomic structure or some parts of it. Its structure is not normal, what means, for example, inappropriate number of elements, inappropriate shape or length. Deformations usually are inborn defects, and theirs base are changes in the skeleton. According to B. Pasomoniak (2004), dysfunctions of locomotor system most frequently are divided into:

- dysfunctions with origins in brain (e.g. cerebral palsy, movement disorders, paresis),
- dysfunctions with origins in spinal cord (e.g. spinal injury, muscular dystrophy),
- dysfunctions of osteoarticular system (dislocation of hip, rheumatic disorders),
- lacks of limbs (after amputation or inborn lacks)

From a practical point of view we can distinguish people with dysfunctions of upper limbs, lower limbs, wheelchair users, people who use, temporary or permanently, orthopaedic appliances around the spine and hip) (Grabowski, Milewska, Stasiak 2007).

These classifications of physical disabilities, despite common denominator, which is human with lower physical fitness and affected exercise capacity, differs a lot. Systematization in this group is singularly difficult task. It results from interdependencies between particular organs of the body and theirs functions, which sometimes can become damaged and that brings various consequences (Kirenko 2002).

Disruptions of motor organs, its reasons, dynamics and symptomatology can be very diverse. Taking into consideration etiological factors it is possible to divide them into:

- endogenous (genetic e.g. chromosome abnormality, metabolic disorders and women illnesses during pregnancy),
- exogenous (various factors influencing fetus – psychological and physical injuries, psychoactive substances, perinatal injuries and others) (Szychowiak 2001).

One of the worst dysfunctions of motor organ is a spinal cord injury. It can be caused not only by lesions, but also transport accidents and accidents resulting from practising sport, recreation or entertainment (Kirenko, 1999).

The reason of physical disability can be also different diseases. Some of them, despite the treatment, can cause serious locomotor dysfunctions. To these diseases we can include e.g. multiple sclerosis, cerebral palsy, poliomyelitis, rheumatism or tuberculosis of bones. They can be the reason of complete or partial paralysis of the muscles, their atrophy or stiffness of the lower limb joints (Kirenko 1999). In the opinion of T. Gaździk (2001), occupational disease is another problem that deserves attention. Orthopaedic practice proves that chronic diseases of motor organs often can be caused by different ways of performing work, ignoring microtraumas and overwork.

Movement of people with changes in motor organ can be deformed, straitened or even entirely excluded. Basic background of these people's lives becomes immobilization. It is not important if it is bigger or smaller, it is always very severe. Limitations, which accompany motor organ dysfunctions, connect with illnesses, which, in majority, are characterized by irreversible pathological changes, therefore permanent organ failure. In this context, it can create a problem with undertaking major life activities or bringing body into a specified standing or walking position (Koniczna 2004).

Despite various factors causing motor organ dysfunctions, they are lots of common issues for physically disabled people, because damaged motor organ influence on nearly every aspect of life. It makes difficult not only everyday functioning of humans, but also causes changes in theirs

50 financial and existential situations, limits social relations and affects the psychic sphere (Olszak-Krzyżanowska 2008).

According to A. Konieczna (2004) physically disabled people have negative self-image. It can be caused by excess of negative information from surrounding. Lacks in cognitive sphere make impossible for them to look and evaluate themselves in an adequate way. Negative self-image reduce human activity and level of aspirations, cause irritation, tiredness, fear of condemnation or rejection and reduce interest in others. They often have problems with satisfying their psychological needs e.g. the need of love, the need of self-realization, the need to belong, to be appreciated and safe, which makes difficult performing different roles e.g. professional, family or social. Women with serious physical disability many times underestimate their life chances, while men, especially with spinal cord injury, also have problems with satisfying previously mentioned needs.

Physically disabled people can also have inhibitions with sexual expression, because they are aware, that their eroticism in some way diverge from norms in culture, which is determined by non-disabled people's needs. It hurts disabled people and make them feel less valuable, they think that they do not deserve love, marriage or family life. They feel lonely, ashamed and guilty (Kirenko 2007)

Towards physically disabled people invariably important is social rehabilitation, which is the part of general process of rehabilitation. The goal of it is integration or reintegration disabled human being into society through providing assistance concerning adjusting to requirements imposed by the family and further communities, and, at the same time eliminating economic and social barriers, which can disrupt the process of rehabilitation (Majewski 2001). Significant factor of social integration is social acceptance – adjusting a human being to existing norms of social life through acquiring different abilities, techniques of social functioning and behaving in the family home, school, work and social institutions (Doroba 2010).

Important and priority place in this aspect has a family through creating conditions spreading activity, providing standards of behaving and performing various activities. It is possible when family accepts disabled person with all advantages and disadvantages and treats as part of a family.

In the atmosphere of love and trust physically disabled human being can develop full potential to become, in the future, fully adapted part of society, to have possibility to develop and to be happy.

The subject literature indicates a special need to integrate from an early childhood, that is why the institution of integrated (i.e. disabled and non-disabled children) kindergarten classroom was created. It gives benefits to both – disabled and non-disabled children. Children in this age do not see the differences between them and even if they do, that fact does not cause a sensation or negative emotions. If non-disabled children in the kindergarten are having contact with otherness, then, when they are older, it still remains something natural for them. Disabled children, on the other hand, in the early years are going to be more trustful, feeling normal and freely and because of it, it is possible that it will be easier for them to make their way in school (Janion 2001).

In educational work it is good to take up two-way educational actions, which will consolidate positive relations between them and non-disabled children. The purpose of these actions is to raise disabled children self-esteem and motivation, and also their ability to engage interpersonal relations.

In the opinion of A. Hulek (1997) educational system of integration disabled and non-disabled students in classroom consists in “maximum inclusion of all young people and children with disabilities in ordinary schools and another educational establishments, allowing them, if possible, raising with their peers” (p. 492).

Not only studying, but also occupational work is meaningful for every human being. It includes a large part of human life and has a special place in it. Thanks to the work, an individual has a possibility to get funds necessary for providing for themselves and their families, moreover it defines the level of independence, prestige, social approval, self-realization, social usefulness, self-esteem and enable satisfying different needs. However, disability can cause negative consequences in the professional sphere because of limited occupational possibilities and difficulties in performing work. Usually it concerns problems with choosing occupation, changing it, preparing to perform it, being able to maintain work and adapt (Majewski 1999).

52 The form of help in solving these problems is occupational rehabilitation, which is an important element of rehabilitation process. It helps to organize all the possible services, e.g. training and occupational advisory to enable obtaining work, promotion and also social integration. (Majewski 1995).

Occupational rehabilitation consists of 4 stages. The first one is an occupational advisory, which is based on giving advises about choosing proper occupation or changing it. Entire process depends on this stage of occupational rehabilitation. The second step consists in preparing for work, also concerns getting theoretical and practical knowledge. The third step is employment on the right place, which is adapted to psychophysical possibilities of that person. The fourth step concerns helping in the area of adapting physically disabled people to the new environment of work and reach full satisfaction from performing occupational tasks (Majewski 1999).

In psychosocial functioning of physically disabled people important, though underestimated, is the problem of integration during free time – social, recreational or cultural. These activities among people are the source of many social relations. It gives the possibility of getting new experiences and building mutual cognition and common passions or interests plays an important role in integration (Majewski 1999). The attitude of the non-disabled people has a significant role in it. Attitudes can be very different – from a total tolerance and treating physically disabled people in the same way as others to complete lack of toleration and aiming to eliminate them from the society. Many of non-disabled people still have difficulties with accepting the presence of disabled people in social life. Changes in the social policy and legislation cause that the possibility of the integration of disabled people grows in various sectors of social life, but, nevertheless, psychological barriers still are the obstacle and have a larger impact on it than architectural and urban barriers. It is why different institutions, which are actively acting in favour of disabled people endeavour to show how much psychological barriers are important, not only in society, but also in disabled people (Waszczak 2002).

What the author mentions, disabled people are often treated by society as victims of different circumstances and characterized only in the areas of their limitation. It causes treating them as objects of pity

and because of that fact, they are kept at a distance. Population of healthy people makes disability a stigma and the essence of human being, not just an illness, which is very harmful (Waszczak 2002).

In the case of the disabled people, the source of stigmatization is, mostly, physical aspect of disability. Physical disability and its attributes (e.g. wheelchair) are simple to notice. It is especially painful to the human. Deformed body or inconsistent gesticulation is always eye-catching, provokes comments and another emotions. In this context, physically disabled person is still exposed to indiscreet curiosity. Usually the aspect of the disability which is visible, attracts attention causing distress of the single person. That curiosity can be perceived as a form of violence and there is no way to avoid it – the only way to escape is to stay in home (Waszczak 2002).

Inappropriate attitudes in their immediate surrounding have influence on limiting social functioning of these people and not using different institutions by them. There are psychological barriers, which often can cause raising cultural and social barriers. They can make attitude to disabled people take the form of compassion, hostility, disdain or excessive interest (Ochoczenko 2001).

The aversion to disabled people usually results from the lack of knowledge about their possibilities, needs and difficulties they are struggling with. That ignorance is the main reason of avoiding relations with them. Frequently healthy human avoids relations with disabled as long as it is possible. If that contact is really necessary, non-disabled person provokes narrow-minded and unnatural behaviour. To disabled people proper functioning it is very important to keep contacts with healthy people. Therefore, the image of feeling, thinking of a disabled person, who can work and study and is an equal partner in various aspects of life is very important to exist in social public awareness (Szczała 2007).

A large share in the process of integrating disabled people with society have also disabled people themselves. An issue of psychosocial adaptation is meaningful, especially considering self-evaluation, self-acceptance and social functioning. An attempt to hide dysfunctionality or deny it is not a good idea, because disability will not disappear. For human being it is very important to realise, that on the quality of life not only healthy body has influence, but also another features and values of man.

Despite reduced physical capability it is possible to live with dignity and not be deprived of the pleasure. It is important to reach the state, at which disability of human being becomes just a part of life activity and do not determine the personality or life in general. Even severe disability do not make impossible other functions and capabilities of human being. Disabled people also can be successful and are taking up different activities, which allows them to be understood, appreciated and gain new contacts.

All of these actions considering different areas of life and social activity should not be separated, but be part of a consistent whole, similar as different aspects of life. Actions, which purpose is to provide independent life for these people and appropriate position in the society are the necessity and a chance for more complete social integration and counteracting social exclusion tendencies. It is a chance not only for disabled people, but also for whole society. Participation in supporting disabled people and being a part of their everyday life teaches sensibility and understanding for another human being (Ostrowska 2008).

To sum up, it is important to notice that functioning of physically disabled people especially depends on way of behaving and attitudes of healthy humans. Presently we devote more attention to physically disabled people, emphasise their needs, problems, which they are struggling with everyday. It is why the integration with non-disabled people is so important. More and more people should perceive disabled person as a normal human being and treat that person with respect.

Summary

This elaboration presents an etiology of people's physical disabilities. It causes a lot of disruptions and problems in different areas of functioning – physical as well as psychosocial. This work also contains main areas of supporting people with physical disability (such as school, family, work or spare time). Behaving and attitude of society towards disabled people is very important in their way of thinking about themselves. Inappropriate attitudes in their immediate surrounding have influence on limiting social functioning. Arousing in people proper attitudes should be the most important effort in the process of integration of healthy and disabled people.

Key words: physical disabilities, disability's etiology, supporting activities, social attitudes.

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Pilgrimages of Disabled Persons to Jasna Góra as an Example of Activities which Foster Social Inclusion

Introduction

Before we start talking about inclusive activities first of all we should look at the aspects of exclusion and marginalisation, which disabled people are affected by. Disability is closely related to social exclusion. That is because of negative and hostile attitude to the persons with dysfunctions, which began in tribal culture, has been developed during the ages and different civilisations up to the 20th century, when disabled and mentally ill people have been exterminated by Nazi-Germans during the Second World War (Woźniak 2008).

Of course, besides such an extreme ways of treating disabled people, there were some opinions, that supporting them is necessary. These may include attempts of improving different dysfunctions and activate people with disabilities (orator Demostenes or Caesar Claudius) (Kowalik 2007) or ideas of disabled people education: separative model of education at first and later also integrative one (Speck 2013).

In this elaboration different aspects of exclusion and marginalisation of disabled humans and, as the result of the situation, model of areas favouring inclusion of disabled people will be shortly presented. And then, on the base of this model, Walking Pilgrimage of the Disabled Persons to Jasna Góra will be presented.

Traces of Exclusion and Marginalisation of Disabled People

58

Social exclusion is a term often used in different areas of knowledge, economy or politic. Because of that is defined in different ways and its conceptualisation is not simple (Nowak 2012). Some of definitions underline lack of possibilities of participation of individuals or groups in different areas of social life, the others – deprivation during making use of services and social resources, because using them is connected with functioning in the world of work (Grotowska-Leder 2005). We can talk about social exclusion also with reference to concrete structures and areas differing humans – for example exclusion in the job market (jobless are excluded), exclusion because of lack of material resources (poor are excluded).

According to the definition presented in *National Strategy of Social Integration for Poland* (2003) „social exclusion is lack or limited possibilities of participation, influencing, exercising fundamental laws by individuals and groups in public institutions, services, markets which should be available for everyone” (p. 22). This definition pays attention to the excluded social groups, which are inequitably out of touch with important parts of social life, and it shows, that the exclusion is harmful for them.

Marginalisation is not as harmful as social exclusion, but it can be beginning of it (Radzewicz-Winnicki 2008). E. Wnuk-Lipiński (2008) writes that ”the term of marginalisation applies rather to locating human on the outlying area of public life important currents, while exclusion is the sharper term and relates to lack of possibility taking part in those important currents of public life” (p. 271). The other look at the marginalization shows G. Miłkowska (2005), who writes: “the social marginalization is the situation in which the person feels lack of acceptance and belonging, has no people to identify with. This situation is very harmful, makes that person feeling unhappy, looking for occasions, people, places which could help to abolish psychological discomfort” (p. 508-509). This presentation shows an important aspect – lack of possibility to fulfil the needs of human touched by the marginalization.

Looking into these problems, you can notice that, because of their characteristic, they are processes which deepen a state of individual separation. It means that effects of exclusion and marginalisation can become

a reason of alienation of individual. Good example is the situation of disabled people who, because of their condition, have often limited possibilities – comparing to non-disabled, of taking part in education process. The effect is their weaker qualifications and worse situation in the job market. That is the reason of low material status and limit using more services, blocking from the important areas of social life.

According to this way of thinking, exclusion and marginalisation can be also understood as chronic situation, which – because of features described above – makes impossible the development of individuals and groups, because it makes difficult or excludes from taking part in different areas of social life. It means, that because of personal, material, social deficits the way of development, understood as a realizing yourself, is closed for some people.

Disabled persons are at risk of marginalisation and social exclusion on the lots of fields, which depend on the kind and level of disability, upbringing and characteristics of disabled people. At the beginning we should say about obstacles connected with the mobility of disabled people, for whom it is difficult to get to some places, which are unavailable for persons on the wheelchairs. Limitation of their mobility causes lack of possibilities of using services as non-disabled, for example they cannot reach every bus or train, cannot move into every shop or cinema – to see a film. Not all the places give them possibility to save their life, during necessary evacuation. There are a lot of examples in this or another areas, but it is not the subject of the article. That is why next aspects of exclusion and marginalisation of disabled people will be only signal and annotated, which make references to the literature deeply consider the problems. Among the important areas of social life with limited participation for disabled people are the education (Chrzanowska 2010) and the job market (Chorążuk 2006), which has its own economic and profitability rules. Than we can talk about cultural space, access to different entertainments and way of spending free time (Żuraw 2008).

The attitude of the rest of society towards disabled is also important. M. Gazdulska (2008) draws attention to the fact, that with civilisation development and social consciousness the attitude of society toward their disabled members is improving. It is caused by developing of integration

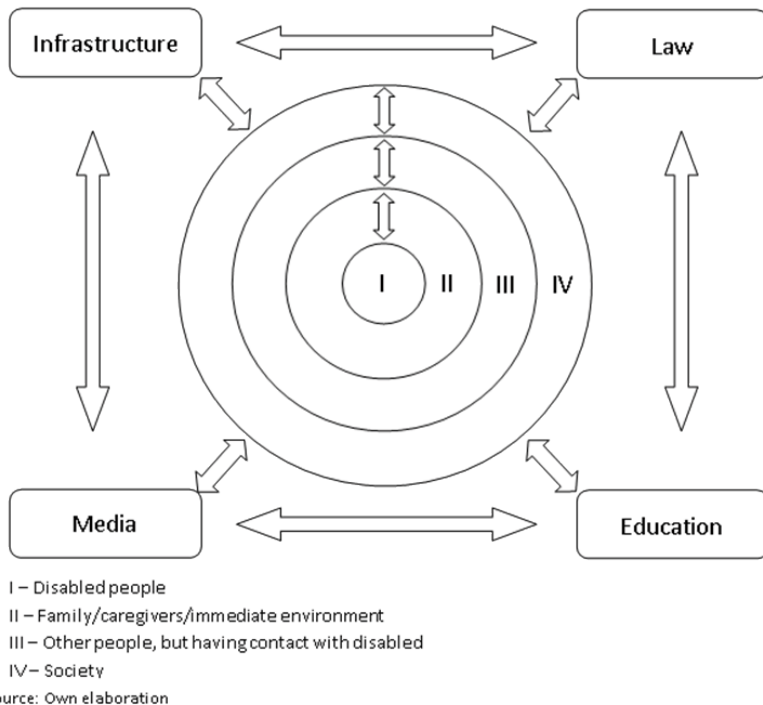
and inclusive conceptions. There can be still noticed negative attitudes, caused by prejudices and stereotypes. Very important area on which exclusion and marginalisation have influence on is also the close environment – the family, and the individual itself – identity and personality of disabled person. The last aspect cannot be ignored, because it can stop or turn destructive processes, which put the individual out of society and close in the area of dysfunctions.

Aspects of exclusion, presented above, could be, according to Z. Kawczyńska-Butrym (1996) grouped into four main barriers: architectonic, legal, psychological and social. Disabled people meet those barriers in their everyday life, they propel separation process. That is why they are the base of changing, which make possible the inclusion of disabled persons.

The Areas, which Need Actions Helping in Inclusion of Disabled People

Inclusion, involving marginalised and excluded people in all the social structures, is something more than integration of disabled, because assumes treating disability as an element of experience of mankind (Zacharuk 2011) and is connected to changing attitudes towards disability. It refers to social model of disability, according to which, damage, deficit (treated as an individual, immanent feature) should be separated from disability, which is an implication of perceiving individual with damage as weaker, worst, less efficient (Wiliński 2010). In this model – as B. Gąciarz (2014) announces, “it was assumed, that disability is relative feature, resulting, first of all, from character of interaction between the individual and environment, in which the person is and should act. Getting the functional efficiency means to give the person possibility of effective realisation of aims in spite of her damages and psychosomatic function loss. To reach it, the changes in material environment, construction of institutional mechanisms (which should give support to disabled) and in social models of behaviour towards people with impairment or different damages are necessary” (p. 21). Wiliński (2010) indicates, that the bigger a distance between disabled and non-disabled person is, the more difficult it is for the second

one to accept the social model assumptions. It depends on being in close contact with disabled and creates levels of familiarity, and in the same time a potential facilities of receiving social model: disabled person, close person, professional supporter, person who corrects disability and non-disabled person not engaged in work with disabled. Analysing the sources literature and above considerations, the conclusion which can be drawn is that for social inclusion to be fully possible, there is lots of different actions on different social circles and different forms of organisation and creating social life. It leads to create the model of main areas of action supporting social inclusion of disabled people, presented on *Scheme 1*.



Scheme 1. The model of main areas of actions favouring social inclusion of disabled people.

In the centre of it there is a disabled person for whom an inclusion task is to undertake activity in social life and improving the quality of life by it. It requires well-shaped identity, correct self-esteem and self-confidence, faith in one's own capacities. It is connected, first of all, to psychological aspect of disability. B. Gąciarz (2014) explains that: "psychological aspect is defined by attitude of disabled people to disability. Perceiving themselves as disabled has fundamental meaning for the way of behaving in social situations, for aims they put themselves in and instruments chose to realize them. It is also connected to feeling well-being and general mind-set to life situation. The mental attitude may affect lots of things, especially dealing with consequences of disability. (...) Two persons with the same level of physical impairment can have different ability of functioning, depending on the environment as well as on self-motivation and activity" (p. 36). The actions taken in this area should built in disabled a personal belief of strength, abilities, competences and suitability, increasing of self-esteem and acquiring confidence that there is a possibilities of good functioning in social structures.

The second circle of acting are people from the nearest environment of disabled: their families, caregivers, close friends. Actions in this area should aim to the possibly maximally relieve them from responsibility for the disabled person and aiming for independence by that human.

The next circle of people, whom those actions should be addressed to, are the persons outside of the nearest circle, but being in touch with the disabled. The aim is to create right attitude to disability, to improve the knowledge about dysfunction and to show the way of rational help. It also serves to reduce the gap and fear of different body or the functioning of disabled people.

The widest field of action would be whole society, mostly people deprived of contact with a disability or having contact but occasional and superficial (e.g. as passengers of the same bus). According to J. Bąbka (2014) "public knowledge about disabled people is still too small and sustaining negative attitudes towards this category of people are supporting isolating and marginalising tendencies" (p. 96). In this range it is important to shape correct attitudes towards disabled people, who, on the one hand, are full members of the society and their dysfunction is not threatening,

on the other hand under properly prepared conditions they are full members of the society too. It must embrace also eliminating prejudices and stereotypes considering disabilities and aiming to general change of way of thinking about disabled people, in which the point of gravity in perceiving disability will be relocated from person itself and body features of that individual to the quality of their integration with the society. It is the hardest circle of influence, in which desired changes can be accomplished after years. In the same time it is closely linked to four main areas of organising social life: infrastructure (eliminating physical barriers), law, education, job market and media.

In the infrastructure environmental resources should be adapted to the needs of disabled people. It concerns buildings (administrative, cultural, service, residential), roads, passages, means of transport (adapted buses, taxis, stops, stations or pedestrian crossings) another places connected with recreation as well as products and services used everyday (appropriate designations for blind people, television programmes for the deaf).

The legal aspect embraces government policy towards disabled people: giving disability status, access to education and job market, specialistic help, possibility of receiving social benefits, entering to the building with a guide dogs, etc. Following to social inclusion further legal acts are progressing towards increasing accessibility of many places and services for disabled people.

More and more changes are appearing also in education and job market. They concern enabling disabled persons getting education in the public school and encourage employers to employ individuals with a disability certificates. However, a lot depends on the attitude to disabled people in these places and belief about their full efficiency in areas not limited by a given dysfunction (e.g.: limited mobility does not have to have connection with mathematical skills, acting talent or social abilities).

Furthermore, media have great influence on creating right social attitude towards disabled. On the one hand, they make a lot of good, publicising social actions which support improving the lives of disabled people. However, there is still not done enough considering the image of people with disabilities as well-functioning and normal people, who can not only receive help, but also be useful members of the society they are living in.

The reciprocity between these forms of organising social life and social circles, which were mentioned above, is shaping on the base of positive interchange ability: shaping social attitudes and spreading public awareness of disability translates into better for disabled social life organisation, however changing forms of organisation (reducing barriers), simplifying functioning of disabled people slowly shapes social attitudes, because social perception of disabled people and disability is changing. In the light of the above considerations, social inclusion should aim at perceiving individual not through deficits and limitations, but through possibilities, abilities and skills; and focus on who that person is and who may become in the future, in the way of development. Only that can change the way of thinking about disability and in consequence lead to full participation of disabled in the social life, in accordance with their needs and abilities.

Disabled People's Pilgrimages to Jasna Góra

First walking pilgrimage for disabled people to Jasna Góra started on 5th of August 1992 from the parish of Saint Joseph. So far pilgrimages were not adjusted to the needs of disabled people because of too much kilometres per day, through places almost beyond reach for the people on wheelchairs (e.g. forests, meadows). It was necessary to set a route on a straight level track with a good surface and proper accommodation conditions (e.g. small villages with people willing to host pilgrims for night, etc.) An important element of these pilgrimages were good sanitary and technical facilities and sufficient number of volunteers, who would like to help disabled during the route. First Pilgrimage under the Catholic Disabled Association was organised by the priest Stanisław Jurczuk and around 250 pilgrims participated in it in two groups. From that moment the number of participants has significantly increased and disabled from different countries also started to join it (*Historia Pielgrzymki* 2009). Every year among pilgrims there are people with reduced mobility, blind, deaf, mentally disabled, people with cerebral palsy and multiple disabilities, non-disabled caregivers of disabled, prisoners and ex-prisoners, and in 2014 year homeless people went as caregivers of disabled people (*Pielgrzymki ruszają z Warszawy*

na Jasną Górę. *Dziś studenci niepełnosprawni i bezdomni* 2015). In spite of these characteristic groups, among pilgrims are also common pilgrims, who want to experience their journey to Jasna Góra with those people.

The conditions of participation and rules of pilgrimage are described on the website of Catholic Disabled Association of the Warsaw Archdiocese. Information on the website clarifies who can become a pilgrim, how people should behave during pilgrimage and towards the hosts, what they should take, how to take care of their own safety and others. Disabled people while signing on the pilgrimage must indicate their carer and physically disabled also must have a wheelchair (*Zasady uczestnictwa w Pieszej Pielgrzymce Niepełnosprawnych na Jasną Górę* 2015). Not only indicated carers help disabled people – other pilgrims also do it, helping by pushing wheelchairs or leading disabled. Most of the distance pilgrimage goes by the asphalt road to make moving for people with limited mobility easier. Every 4-5 km, so quite often, stops for eating and drinking are organized. There is never a situation, when a group goes 8 km without stop. Pilgrims currently are split into five groups and every have own colour: St. Lawrence group (green), St. Camillus (red), St. Joseph (purple), Blessed Pratulín Martyrs (blue), Archangel Michael (orange) (*XXIV Piesza Pielgrzymka Niepełnosprawnych* 2015). All the participants have cards with names and the motto of the pilgrimage "We are".

Inclusive Dimension of Pilgrimages of Disabled People

Pilgrimage of the disabled to Jasna Góra have very wide, inclusive character. Inviting excluded groups as disabled, prisoners or homeless makes boundaries between people more fluid and the emphasis is put on things, that are connecting people: brotherhood on the road to Częstochowa, common purpose and dignity that should be provided to everyone. Apart from that, inclusive dimension of Pilgrimages materialises in most of described elements in the model presented above, presenting areas of action, which favour social inclusion of disabled people.

Disabled people by participating in the walking pilgrimages are getting stronger, their self-esteem is higher and conviction about strength and

power in overcoming difficulties grow. On the one hand, they discover their potential, find out, that they are able to travel 300 kilometres in difficult conditions (while conditions and necessity to walk everyday discourage often healthy people). It gives them the feeling, that inside motivation and willingness to act is able to help that person in overcoming many barriers and doing the same things, that non-disabled do. On the other hand, they are experiencing kindness and support from other people, with whom, for the time of journey, they are creating community based on equality. Participation in pilgrimage and atmosphere during one are an example of full social inclusion, without divisions and distinctions. Calling themselves "Brother" and "Sister", no matter who they are, what they are doing or regardless of their function, is making that easier.

The second circle of impact are families and closest carers of disabled people. If they participate in pilgrimage with disabled people they are close to, they have possibility to experience together difficulties on the road. In the same time they notice ways to overcome them – disabled persons as well as theirs families and friends. It creates an area to share experiences in overcoming difficulties and improving some bad attitudes and also makes the feelings of loneliness or alienation, which are often in everyday life, less affecting. An important experience is a kind support and rational help from another pilgrims, which lets family to overcome the feeling of being different. However, if they are not participating in pilgrimage, their relatives can prove, that they are independent.

Very important circle of people, whose attitude changes on the pilgrimage are healthy pilgrims, who are not carers of disabled. Pilgrimage creates an opportunity of personal and longer contact with disabled people and their carers, who are passing them knowledge about disability and way of living with it. For healthy people it is an important experience, which enables to make the distance between them and disabled people smaller. That distance is often caused by the lack of knowledge and abilities to act properly or help disabled person or fear, especially in the case of mental disability, neurological disorders changing appearance, way of speaking or moving. Participating in walking pilgrimages helps in eliminating these problems and discovering possibilities, perseverance, kindness and lots of other features of disabled people, which are often hidden because

of the label, which says "different". That kind of experiences are an important moment and often are leading to changing attitudes towards disabled people. They are described on the website of Catholic Disabled Association of the Warsaw Archdiocese (*Pielgrzymka* 2015)..

The widest circle of people, who also can change attitude, although is not participating in the pilgrimage, are those, who are seeing it, when it is passing through streets and villages or is hosting participants. It is an important sign for the whole society, that the disabled, although may have limited mobility, dysfunctions of different senses or complex diseases, can have plans, follow defined goals and dreams, go with others, in the same direction, not being treated differently and not giving up.

That way of looking at disability may be consolidated by media, which often observe pilgrimages to Jasna Góra. Media show, describe and promote further pilgrimages of disabled to Częstochowa, building in the society image of disabled, who are struggling to reach their goals and not be stopped by all kinds of difficulties. That image of disability is an important opinion in enlarging space available for disabled in school, work and another places. It is proved, that if only disabled have full access to these places, they can be a part of them, inscribe themselves in.

Conclusion

Social inclusion is a phenomenon more and more debated in lots of communities in different countries. There is a long way to reach it, because it requires change of thinking about disabled people, which is firmly grounded in people. They are afraid of diversity in appearance and functioning as well as resulting from culture circles or living conditions. Usually we look at other humans through the prism of ourselves and then we are evaluating competences, abilities and usability of that individual. We forget about individuality of another person, who can be hiding different possibilities, thoughts and values, which can be extracted only after a closer acquaintance. Described pilgrimage of the disabled is an example of inclusion, which already took place for a small community and in the same time

can be the announcement of future model of society in which disability is just a feature not used to evaluate person or an obstacle.

Religious character of pilgrimage causes, that, although it is an effective example of inclusive action, not everyone can find a place for themselves in it to build connection with disabled people. In the same time, it is some indication, that spiritual dimension is an important key to effectively including disabled into different areas of social life and also a sign, that the Church can and should play in this process a meaningful role.

Summary

This elaboration shortly presents different aspects of exclusion and marginalisation of disabled humans, which could be grouped into four main barriers: architectonic, legal, psychological and social. It leads to create the model of main areas of action supporting social inclusion of disabled people, which includes four social circles (disabled people, their family or the nearest environment, other people having contact with the disabled and the whole society) and different forms of organisation and creating social life (an infrastructure, the law, education/work, and media). On the base of this model, Walking Pilgrimage of the Disabled Persons to Jasna Góra is presented.

Key words: disabled, exclusion, social inclusion, Walking Pilgrimage of the Disabled Persons

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70

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Person with Intellectual Disability in the Creative Space of Symbols

Introduction

The creative process comes into being from intensive relations with others and activates through learning about the world and being united with it. Through that perception exceed the everydayness, routine and becomes unknown space, which should be discovered again, seen and understood. “Act of creating work of art in space is about communing with oneself, but also with the thought about letting to that specified intimacy third parties – viewers. That makes possible to satisfy the need of contact, communication, self-expression and also fulfils the persuasive role towards viewer, reader. Self-expression diffuses the tension and is the medium of information forwarded to audience. Information emotionally charged in significant way” (Krasoń, Mazepa-Domagala 2003, p. 76).

In the article there is presented an individual with intellectual disability as person creating symbol of creative space – space of theatre and drawing. Special attention was paid to the issues like:

- terminological issues considering: symbol, space, theatre, drawing,
- symbolic space in the theatre of people with intellectual disability.

Space in the theatre and drawing activity is a revision of imagination, values, shapes, forms, colours, associations, metaphors and also... expectations.

It can be said, that individual expose that exists thanks to the twin processes, which consists of: contact with art work and personal creativity, which has become the foundation of that article.

Terminological Issues

72

In this place I want to characterize range of meanings of basic ideas often occurring in text such as: symbol, space, theatre, drawing.

Art (fine arts, poetry, literature, theatre, music) is a very important area of human culture-forming activity, because its sense and meaning are important in shaping entire human existence. Full meaning of the term “symbol” is revealing here. Greek verb *symballei* means “connecting into one, integrating two parts of some object in entirety (Kwiatkowska 1996, p. 138). *The Dictionary of Foreign Terms* define “symbol” as “sign, object, idea replacing other ideas or subjects having beyond literal meaning another, hidden one read out on the basis of arrangement or not entirely specified anthology (artistic symbol, which essence is polysemy)” (Tokarski 1980, p. 718). So, despite of literal meaning, symbol has also another, hidden meaning, which opens up a possibility of various interpretations. Stanisław Sierotwiński (1970) writes: “Symbol is a sign, idea or system of ideas used to identify other objects. Interpretation of symbol can be conventional (resulting from arrangement, life practice or literary tradition) or permits polysemy and arbitrariness, which is the rule of using symbols in the artistic creativity” (p. 310). Because of its undefined character symbol is characterized by instability and uncertainty of meaning. Its right sense is not clear and definite, because it is untranslatable: its flickering content cannot be passed by defined paraphrase, because it would bring to annihilating the most characteristic feature of symbol – intended ambiguity (Sławiński 1988).

These definitions of the term “symbol” show that it is a conception not precisely determined, how writes Stanisław Popek notices “is something symbolic in itself” (Popek 2008, p. 72). In psychology, he continues, “it is often identified with conventional sign, replacement of ideas, which are hard to define, representation of internal content, difficult to define by abstractive thinking or things, which cannot be expressed by senses, coming from sub-consciousness, revealed by intuition and emotional experiences. Symbol is a replenishment of internal content, which exist, but are difficult to describe, express” (Popek 2008, p. 73).

In the artistic space symbol is a sign, which expressiveness influence individuals, their cognitive and emotional processes. So what this space exactly is? In the last years the problem of space has become one of the most popular problems to tackle and analyse, maybe because this idea is vague problem even in the encyclopedia. „On the one hand, it is everything concerning relations between coexisting material objects and on the other hand is a three-dimensional, unlimited extend, it also can be said, that it is set of any objects connected by geometrical, algebraic or abstractive relations.” (Nalaskowski 2002, p. 9).

Considerations of the space as a humans environment and place of their existence are characterized by metaphysical concept. Example of that can be understanding space from the theory of drama perspective. Jan Błoński writes: “*Dziady* (Forefathers’ Eve) can be staged on the boxed scene, in the foyer, in the public square or even in forest. Spaces of show will be different, but no matter what stage is, we can see the same Lithuanian chapel: dramatic space remains unchanged. Mentioned by words of the short stage instruction, gently sketched by activity of figures (...). It is space for viewer destined to be seen only one time, but, simultaneously, it is created to make that viewer understand that as a part of universe a lot more capacious.” (Błoński 1988, p. 68). Space is not only physical quality, but, how writes Aleksander Wallis “it is socio-cultural quality, which is an object of cognition, evaluation, valorisation, experienced, shaped and used by individuals and groups” (Wallis 1990, p. 83). The most important, according to the author, is when and in what conditions space become capable to satisfy human needs, when is becomes valuable, meaningful, symbolic (Wallis 1990).

That meaning of space I want to refer to art of theatre and drawing. Theatre is a place, “where the pale creature ripped from everyday life anarchy of shadows is exposed to the public. Is an instrument which, presenting individuals, rediscover them and make from existence creative act.” (Hausbrandt 1983, p. 126). Depending on beliefs and adopted assumptions, theatre used to be characterized by presence of author, simultaneity of creative act and receiving performance, significant division of space or strong mechanism of transforming people and objects into signs. The result of these

statements is the idea of theatre as an area of meeting two groups: actors and viewers (Kosiński 2011). It was noticed, that similar meetings (performer-receiver) have also place in another life activities. Therefore, there is a need to complete original definition – “theatre is situation in which A (actor) plays B (character) in front of C (viewer), with provision, that acting has place in the same time and place, where viewing” Kosiński 2011, p. 89). In the theatre space understood as an abstract concept covering all the space relations, French scientist Anne Ubersfeld (2002).distinguished four kinds of it:

- 1) the stage space – actual place of performance, space of presentation;
- 2) the stage place – fictitious place, where the action is carried out;
- 3) the theatre space– architectonic space including stage, audience and all places included in it creating specific theatre with its location in the surrounding;
- 4) the dramatic space – all the signs and information about space and spatial relations contained in a dramatic text

Typology shows, how much important functions in the process of creating performance does space and configuration of the space. „The most important and the most obvious is fact, that the effect of the division of space is creating meaningful *frame* – signal of distinguishing some place, which during the performance becomes *here* and *not here*” (Kosiński 2011, p. 90). Spectator’s acting in the space of theatre involves increasing distance from reality and getting close to the theatre fiction. It is why marking out specific space as *theatre space* means separating theatre from real life and protection of social life against confusion of both orders (Kosiński 2011).

The art of creating space in the theatre reminds every other artistic expression. It requires specific identification with expressed content and materials, in which this content is presented. Drawing activity, which I have on mind, is a special stimulus to scientific and exploration activities leading to discovering, gathering and ordering aesthetic and cognitive values. Drawing, on the other hand, interprets as “representation or suggestion concerning placing object on some surface with the help of various graphic means” (Wallon, Cambier, Endelhart 1993, p. 67). One of basic elements of the formal content of drawing is its space – surface, differently

understood and described. Beata Bebel-Karankiewicz (2008) defines it as follows: "(...) and suddenly I found myself in the magical space full of lights, colours and smells. Space remaining meadow smelling like herbs with blue sky above the head changing to nave blue, violet and black. To the gold stars and even further. Space separated by rocks, trees and clouds. Quiet space. Space of imagination." (p. 34). According to Elżbieta Pazera (2008), an animator, who works with children and adolescents in Authorial Design Studio in the Tarnów Culture Centre, the space of drawing is "unlimited extent and in the same time part of it, limited by borders" (p. 36).

Rudolf Arnheim (2004), analysing idea of space refers to its three dimensions. First dimension of space conception "limits to the line. There is no specific shape. Completely deprived of contours things, which can be determined only by their position, can be expressed in the category of distance, relative speed and the difference of two directions: to us and from us. Mind understanding only that elementary conception of space would be undoubtedly primitive" (p. 123). Two-dimensional space is characterized by higher complexity. Size and shape are diversifying, there are also appearing new directions and orientations. "(...) Various things are appearing – big, small, round, angular. (...) Shapes can be recognize with help of directions, on which these shapes are pointing at, mutual positions of shapes can be also changed many times. Among various directions there can be noticed and separated movement – comparable with fancy shapes sometimes made by the skaters" (Arnheim 2004, p. 165). Three-dimensional space, is the space in which, how author says, "different shapes are extending, take different forms, form in different systems and are moving like sparrows" (Arnheim 2004, p. 123).

Every shape on the stage of theatre, single line on a sheet of paper are closely connected to the space, area limited by acting and interpretation, because of which created product (performance, drawing) takes on open and ambiguous character and gives an opportunity to interpret it on many ways.

Symbolic Space in the Theatre of People with Intellectual Disability

76

Theatrical practice of people with intellectual disability gives a specified direction, because of which these people find the truth about themselves, purpose of their existence, about the world, which surrounds them and in the same time are open to grow up to the fullness of humanity. Performance *Place of the Other* (Miejsce Innego), in which symbolic space of three main ideas is presented, turned out to be stimulus to reach this.

The first idea is the idea of the meeting. Symbolically we have presented meeting with other human, relation Me – You, which is the essence of our existence in the social world and key element of change. What is the most important in meeting, on what we were giving a lot of attention, is experiencing yourself and authenticity. “Basic experience – wrote Józef Tischner – and the condition of possibility of *constitutive origins Myself* in *he being – himself* is experiencing another. That experience has two sides: I am *different than others, others are different than I*. I am for them totally *different, I am separated, I am alien*” (Tischner 1998, p. 78).

The second idea was the idea of spontaneity, which symbolized freedom in free expression of true aspects of our lives. This way we opposed typical behavioural patterns, inflexible social roles, masks we are wearing everyday. How Stanisław Chrobak (2009) wrote, “freedom manifests on two ways: as self-assessment of person in acts of will and self-assessment of one’s own act. Acting materialises in decisive acts, which are connection of human cognition and love. Decisive acts are inseparable from human personal acting and in the same time are inalienable, because through them we do not auto-determine ourselves and constitute ourselves as an actual source of acting” (p. 161-162).

The third idea, on which it is worth to draw attention to is a symbol of carnality in theatre, accented with facial expression, gesture, motion, because of which we could equally feel, notice, experience, understand ourselves and each other. Especially, that human body “is not a machine, which is possible to be controlled or autopoietic organism in which man would be restricted by auto-relation and relation with the world. It is an organ of human practice in the broadest sense” (Benner 2006, p. 133).

Theatre of disabled actors is a laboratory in which they can try out different threatening results of situations and learn, how to avoid, and, what is even more important, how to cope with them. Theatre is a laboratory – a symbol of space. Space, which has physical dimension, but is being governed by human inside laws. However, it is not completely unreal and deprived of structure and reference to reality. That symbolic space is created by actor referring to the personal psychical, emotional, existential space. It is usually the mirror of memories, fantasies and dreams. To recall on stage that space, actor uses props available in real world – means, which mark symbolically elements of stage, e.g. material, suit case, ocarina. Guide the viewer through the stage, and viewer, thanks to imagination, read symbols and enter area of personal space.

Performance *Place of the Other* was realized under the European programme Grundtvig “Lifelong Learning Programme” in which participated: Poland, Belgium, Italy, Romania. It is characterized by originality because it connects elements of wise naturalness and lively expression. Originality, which is a madness, because it shows viewers someone else, who they do not expect to see.

Music and motion start in the same time. Listening to melody we become mysterious, secretive characters. Every person creates the character which plays, arises from nothing and grows. By slow, lazy moves of different parts of the body we create specific figure. It is the start of theatrical performance. Figure is a symbol of beauty, grace, love, desire, pain of life, desperation, perhaps hidden for years. When music changes, all figures begin to move smoothly and chaotically in the same time. Every in another direction. Material rises and falls. Motion is intensified and chaos increases. Only through light, unnoticeable for viewer, touch of every character, we head for our place – unknown place. Every character takes *ocarina*. Then it is possible to imagine light, fluent, melodious, mysterious sound, which is created by all the instruments. Sounds, together, are growing, are becoming loud and shrill, and then one gesture of hand stops all the characters and there is complete silence... terrifying silence, which dynamically and decidedly is being stopped by the rhythm of *djembe*. Then two characters, with quick, dance step start to look for each other. They

78 dance around others, rotate, covers, discovers and again covering and their moves intersect in original way.

Symbolic space of the theatre of intellectually disabled actors is like colourful palette giving lots of possibilities. It shows, how to put participants in a good mood, to release movement expression, how to make contact with partner, experience consciously and, first of all, how experiencing this space can be engaging.

Symbolic Space in Drawing of People with Intellectual Disability

Creativity is a kind of purposeful activity performed by people, consisting in creating new, original values, which are able to charm and move. As a form of shaping emotions and experiences of subject – creator and viewer in contact with world is searching for truth, goodness and beauty. According to this, it becomes the space which is shaping human, who has to perceive reality not as definitive structure but as a field of possibilities, which should be fulfilling and developing.

The example of symbolic drawing area is mandala. Word „mandala” comes from Sanskrit and means circle. The motive of circle is present from the very beginning of human history. Circle, spiral and another patterns can be found in prehistoric cave drawings in Africa, Europe and South America. The purpose of these paintings is a mystery, but we can guess, that they had to have an important role, since there is so many of them (Fichner 1994). Therefore, mandala symbols are one of the oldest religious symbols of humanity. They have a special place in discovering not only personal identity, but also social one. Prominent Swiss thinker, psychiatrist and psychologist C. G. Jung showed, that creating mandalas through drawing or painting is a natural need to individualise. It is why he encouraged to use imagination, fantasy and spontaneous creation. In his opinion mandala “shows dynamic of self creating matrix in which reveals unique identity of human. Circle is a reflection of self as frame space and formal motives (shapes, colours) have individual character and that fulfilling and attempts to exceed drawing of circle are expression and projection” (Popek 2008, p. 177). Referring to formal motives, in order to colour, it is necessary to

refer to the author of *Colourful mandala* conception, specialist in therapy through art Susan Fincher, who thinks, that human composing colourful mandala creates personal symbol revealing own identity and selection of colours express thoughts, emotions and intuition of the author.

People with intellectual disability, who were creating mandalas, were free to choose theme. In artistic expression nature was dominating (world, sun, landscape, meadow, four seasons) and also geometrical and abstract forms. Before entering to creative drawing, every participant had time to relax and clear mind to, taking into consideration one's vision, get to the right work. Every creator was fully engaging in the expression process, which provided authentic and honest self-expression, especially given the fact, that this action was limited by the position of circle fulfilling function of strong concentration on the internal life of man and connection between it and universal symbols of social reality. Created mandalas were full of harmony, with carefully selected colours, compositions, rhythmically interesting. It is significant to underline importance of all the forms, shapes and number of elements repeating and their position in the space of the circle, but the main symbolic function is colour. Colour in an artistic expression express deepest emotional states. "Colour as symbolic sigh is an expression of spontaneity and creativity of human imagination, is setting human as *homo symbolicus*, is building man's world beyond reductive power of the intellect (intelligence), somewhere between intuition, imagination and emotions" (Popek 2008, p. 177).

Artistic works of intellectually disabled people were presented in Art Gallery in Warsaw during an exhibition entitled *Le cercle de l'imagination*, what means *The circle of imagination*. That exhibition was a nice distinction for creators and was an opportunity and precious material for discussion. Preparing exhibition was very emotional event. The purpose of developing aesthetic plan was to awake sensibility of viewers on secrets connected with symbolic drawing area, which mandala is, and analysing formal and representative content leading to giving sense to it.

The form of mandala respond to human internal space, which in symbolic way is opening, developing and fulfilling. Act of drawing in within the circle gives feeling of self-expression and expression uncovers unique dimension of human.

Conclusion

80

Creating symbolic space in the theatre and drawing is for intellectually disabled people an incredible adventure. Creating character of stage or artistic work at the piece of paper they discover with surprise, that exists structured symbology of own creativity and also its connection with universal symbols of humanity. In the artistic space are appearing motives, which importance for human life with disturbing precision ancient, medieval and modern sources of different cultures are explaining. Each of us is a part of humanity living and developing for thousands of years as one organism. Humans experiencing themselves and whole social community anywhere do not reveal more clearly than in whole creative space of symbol.

The title of performance *Place of the Other* and title of exhibition *The circle of imagination* show symbolic meaning. Talking about *Place of the Other* I indicate on difficulties we were overcoming together, on the lack of ideas, laziness, irritation, anger, jollity, happiness, achievements, success. Shows "Otherness", that should not be worrying and "Place" in which we should all be, if we are not. Place, in which we should safely be with ourselves. However "*The Circle of Imagination*" symbolizes dynamic negation of wide-spread schemes of thoughts, experiences and actions. "Symbolization is a defensive reaction against intellectual schematism, vital ability to create these worlds, in which human can live thanks to creative imagination" (Ricoeur 1975, p. 78).

Person with intellectual disability has lots of needs in common with human who is not disabled in any way. Due to this fact, that person, on the artistic level, has need to express oneself or manifest existence in different way. That need is noticed and stimulated in the right way can be realized through defined form of creative expression, in this case, fully symbolic.

Summary

The article shown theatrical creativity and drawing persons with mental handicap in the symbolic space. The subject of the presented content was made the symbol as

a sign of hidden meanings developing wing of multiple interpretations. The spectacle “Place of the Other” and an exhibition of the mandala “Le cercle de l’imagination” have become the foundation of this interpretation, leading to a dynamic and vital creative activity.

Key words: symbol, space, theater, drawing, creative activity of persons with mental handicap

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Kinga Krawiecka

82

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The Child with Cortical Visual Impairment – the Problems of Functioning

Introduction

Cortical Visual Impairment is the main reason of visual disability in developed countries (Flanagan, Jackson, Hill 2003). In the past twenty years also in Poland the increasing number of children with visual impairment caused by cerebral disorders has been noticed (Kurczak-Wawrowska 2006).

Cortical Visual Impairment (CVI)

Cerebral Visual Impairment – CVI (Hyvarinen 2005) or Cortical Visual Impairment (Roman-Lantzy 2007; Steendam 1989; Whiting 1985, as cited in: Topor, Rosenblum, Hatton 2004; see also Walkiewicz-Krutak 2011) these terms are used all over the world (also in Poland) to describe the group of visual impairment caused by brain damages. Beside disorders in the eye structure, like retinopathy of prematurity, disorders of optic nerve (underdevelopment or partial atrophy), they are the main eyesight afflictions, diagnosed in infants and babies who have eye problem, and are under early medical intervention (Walkiewicz-Krutak 2009). CVI, occurring among children, should be distinguished from so called, cortical blindness – disorder of sight or loss of sight among adults caused by brain damage.

Cerebral Visual Impairment concerns optical aberrations with aetiology of damage in retro-ocular part of eye (caused not by damage of the eye, but other elements of visual system – cerebral cortex, accountable for analyse and interpretation of images). CVI it is a disorder of visual functioning which can be temporary or permanent caused by damage of optic tracts, visual cortex or both of them.

Aetiology of CVI

An increasing number of infants and children with CVI is – to a certain extend – caused by medical progress and possibilities of saving infants with low birth weight, premature birth and children with micro-damages of cerebral cortex. According to Lea Hyvarinen (2005), Christine Roman-Lantzy (2007) neurological damages are the main cause of CVI. They are due to lots of factors, for example: cerebral damage during pregnancy, cerebral anoxemia and ischemia, perinatal asphyxia, cerebral trauma (for example accidents), cerebral defects (connected with genetically determined diseases), cerebral hemorrhage, infections of the nervous system, for example meningitis, viral and parasitic infections caused by toxoplasmosis, cytomegalovirus, or rubella, hydrocephalus (as cited in: Walkiewicz-Krutak 2011, p. 28-29; see also: Pączalska, Kaczmarek, Kropotow 2014). Disease process affects optic tracts or visual cortex. More and more often the scientists say, that CVI is a spectrum of disabilities from mild to profound degree (Colenbrander 2009; Dutton 2008; Morse 1990).

Diagnosis of CVI

During the eye examination it is not possible to state abnormality of the eyes in children with CVI. Screening/evaluation of visual functioning usually does not consider characteristic features of children with CVI.

Diagnosis of neurological disorders is possible on the base of magnetic resonance imaging (MRI), electroencephalography (EEG) and visual evoked potential (VEP), which examine the activity of cerebral cortex

(Walkiewicz-Krutak 2011). For the purposes of vision therapy (VT) it is necessary to do functional diagnosis – evaluate eyesight and indicate characteristic features of CVI. It is done by vision therapist or therapist of early stimulation of a child's development. Careful observation of child visual behaviour can be helpful during the initial diagnosis which is made to distinguish between front and back damage of optic tract (Krawczyk 1997). The CVI Range Scoring Guide, created by Christine Roman-Lantzy, can be helpful. Range Scoring Guide can be used to measure a child's visual possibilities and indicate characteristic features of CVI. It is necessary to define how disabilities can affect educational environment. Characteristic features of CVI, measured by the scale, are the base which is used to prepare activities which help in visual therapy of a child with CVI or they may also be the suggestion what kind of modification to improve the program should be introduced (Roman-Lantzy 2008).

Functional Consequences of CVI

In functional descriptions of CVI the most important thing, on which scientists are focusing on, is if optical system of eye is correct (perceptual skills are preserved). Structure of eye is normal, as well as fundus. In spite of that, child with CVI cannot see, do not see well or visual process is changed – because the problems are caused by interpretation of visual signal, transmitted to the brain through complex neural pathways that connect the eye via the optic nerve to the visual cortex and other areas of the brain. Damaged parts of cerebral complex do not interpret what is being seen. The eye only transmits the information about the image to the brain along the optic nerve. The visual cortex is the largest system of human brain and is responsible for processing the visual image; processing, interpretation and analysis.

Symptoms of CVI are individual, and depend on a lots of things. The range of damages is also different – from little disorders of visual perception (important for educational functioning) to blindness. That is why, according to some scientists (Hyvarinen 2005), we should not indicate on constant, characteristic features of CVI.

The type and range of visual impairment caused by brain damage depends on a lot of factors (Hyvarinen 1994, 2005; Stenndam 1989; Morse 2002; Roman-Lantzy 2007): for example the localization and extent of damage (monofocal or multifocal brain damages). The factors which have influence on the character of brain damage causing visual problems are also the age of person with impairment (for example oxygen deficiency in the prenatal period, brain ischemia in the perinatal period, brain damages in infant, older child), the type of damages (ischemia, effusion, anoxemia, brain injuries and diseases, myelomeningocela, cerebral palsy, brain damages caused by toxic substances, intracerebral hemorrhage, central nervous system infections and the others infections, for example TORCH syndrome, degenerations, cysts, tumors, hydrocephalus, toxic substances used by mother during pregnancy).

Damage of the visual system in particular place cause loss of different functions. If damages are located near the optic chiasm, they make it impossible to receive visual stimuli, pupil is not reacting on light and there can be observed lack of eye defensive reaction (lack or late blink reflex). Because of the impairment located near lateral geniculate nucleus (LGN), visual information get to occipital and prefrontal cortex and to cranial nerves, but is not present in visual functions (Walkiewicz-Krutak 2009). The child with this kind of impairment can react to the light, has blink reflex, but is not consciousness of visual environment; might give the impression of seeing brilliant, colourful objects. Alicja Krawczyk (1997) considers that it is a proof of keeping some visual functions, which are not revealed during electrophysiology studies.

Visual function, because of damages of optic radiations, is partially lost – a half of visual field or lots of its small parts. Damaging of projection systems causes loss or disability upper visual functions. Children who have lost temporal-parietal pathway keep move consciousness in relation to the other objects. They can catch objects according to visual information without looking at them; to recognize it they use their hands. They manipulate objects without visual control and do not keep eye contact with other people, they can hear but do not understand. Because of that they are noticed as autistic or intellectually disabled. Children with CVI have different abilities – not all of them can tolerate the same numbers, time and

quality of polisensorial experiences. Negative consequences can be result of too many as well as too few stimuli. Too much can overload nervous system, block visual system, cause loose of activity (small children go to sleep or block the eyes) or energizing – if it lasts for a long time it can cause behavioural disorder. Shortage of stimuli can cause small psychomotor activity, directs child's attention to its body and the signals from inside. Correctly working brain is still involved by sensory information. It can select them and verify as important or unimportant.

Visual impairments caused by cerebral damage are not the same as intellectual development disorder, unless cognitive and emotional structures are damaged – in that case intellectual development disorder and another combinations of disorders, especially limited expressive function can occur (Kurczak-Wawrowska 2006). Changed sight in child with CVI is the reason of difficulty to diagnosis of intellectual development disorder. According do Finnish scientist L. Hyvarinen (2005), human with CVI have high level of communicational abilities, even if they are not able to communicate verbally. Małgorzata Walkiewicz-Krutak (2011), thinks that cerebral vision impairment is one of the main reasons of visual disability in children with sight disorder and the others combination of disorders, as well. But we should remember that lack of some or all diseases cannot exclude diagnosis of CVI.

Tab. 1. Additional disorders occurring with CVI – percent of occurrence

Additional disorders occurring with CVI	% occurring
Intellectual disorder	80%
Cerebral palsy	80%
Epilepsy	60%
Hydrocephalus	20%
Hearing disorder	10%

Sources: Kurczak-Wawrowska 2006; Good, Jan, DeSa, Barkovich, Groenvel, Hoyt 1994; Walkiewicz-Krutak 2011; Wawrowska 2015; Matsuba, Jan 2006. See also: Fazzi, Signorini, Bova, La, Ondei, Bertone, Misefari, Bianchi 2007; Khetpal, Donahue 2007).

Partially damaged temporal-parietal way prevents to read the word longer than 2-3-letters, because of wrong spatial imagination giving

possibilities to recognize the space around – in spite of full visual acuity and high or low contrast sensitivity. In spatial imagination they use memory and touch instead eyes. They cannot use the visual information even in well-known places. This is why they have problems at school – to map shapes, puzzles and localize the objects (Walkiewicz-Krutak 2009). After losing function of temporal-occipital, which play role in psycho-moving coordination and motion analyses, children with CVI have problems with movement of eyeballs and during eye-hand, eye-leg, eye-head coordination. Impairments of high visual abilities can also cause loss of visual attention.

In CVI the visual acuity is not lowered but there are impairments of perception and visual integration like direction or length calculation, drawing from memory, picture reproducing, orientation, recognizing of faces, emotional expression and recognizing of geometrical shapes. In children with CVI visual agnosia (Kurczak-Wawrowska 2006), can be diagnosed. Visual agnosia presented as an inability to recognize objects, people by their shape, in the absence of other explanations, such as vision problems. Drawing objects from memory and recognize 2D illustrations or photographs is more difficulty than 3D object, as well as group of objects than each of them.

In medical literature there are some levels of visual agnosia (difficulties with recognition of visually present objects; with reserved ability to recognize these objects by other modalities, e.g. touch) (Stolarska, Zajac, Skowronek-Bala et al, 2009), we can distinguish:

- associative visual agnosia – impaired object identification; it is broken connection between perceptual impression (observation) and “store” of memory vision. If the information, because of damage of neuronal connections cannot get the memory store, where are memories of objects are contained, the right recognition of the object is not possible; the same children can draw noticed object, what is the proof of lack of sensual stimulus, in the same time they make a lot of mistakes during identification of sensate objects, based only on their primarily perceptual features (e.g. bucket is interpreted as a basket, because of handle);
- apperceptive visual agnosia – impaired object recognition; it is an impairment of lower level structures which are responsible

of perceptual processes, called by Heinrich Lissauer, *apperception*. The child is not able to recognize even shapes of simple geometric figures, to copy the object or to point at the named object and has problems to organize visual information; but is able to name colour, light intensity or move direction (Dutton, McKillop, Saidkasimova 2006);

- visuospatial agnosia – it is impairment of orientation in space or serious difficulties with it; the child has problems to recognize the space around; can get lost in the house or well-known part of the city; cannot correctly draw a map, elides and distorts the important elements; problems are also connected with determining orientation of objects in space, relations between left and right side, vertical and horizontal level, relation sizes (the child is not able to recognize size of matchbox and the house) and determine depth (e.g. stairs seen as flat element of the floor);
- simultanagnosia (or *simultagnosia*) – impairment characterized by the inability of an individual to perceive more than a single object at given time; it is inability to see individual details of a complex scene but failed to grasp the overall meaning of the image (inability to pay attention to more than one element); the child can recognize single part of configuration (e.g. single patience card), but is not able to judge the whole sense (e.g. to recognize form of card *solitaire*); this deficit can be described as an activity limited visual field – to only one object. Impairment of eyes movement and lack of eye-hand coordination is the most often associated symptom. The child is not able to incircle of a square, because can see only circle or only square or only the end of pencil at one time; impairments of visual analysis of graphic materials make impossible to understand the sense of presentations; due to superficial analysis of complex graphic material, difficulties of visual search and impairment of visual attention make it hard to understand relations among elements in the picture and meaning of the whole scene (unless the describing of simple element of the picture is correct) and gives wrong interpretation, in the result.

- Balint's syndrome – described in 1909 by Rezső Balint – difficulties with visual search and attention processes were observed in the patient; due to it he was unable to notice more than one object at the moment, apart from its size and complex; this impairment is also named psychic sight paralysis, patient was able to fixate the object, but was unable to notice the other; optic ataxia (the inability to guide the hand toward an object using visual information) was accompanied by left-sided neglect and moving the attention field to the right; the patient had serious problems with everyday functioning, e.g. if he tried to cut the bread, his hands moved out of the plate, if he tried to light the cigarette, he started from the middle;
- prosopagnosia – disability to recognize familiar faces, including self-recognition; individual with this very rare impairment, is not able to recognize well-known faces, although is able to know that the set of elements is a face. The child with prosopagnosia is not able to adequately interpret people's emotional states and rightly react; literature describes patients, who lost possibility of recognition elements of the other categories, well-known by them (e.g. furniture, cars, animals – farmers cannot recognize their own cows); recognition based on the other modalities, even on visual modality, but not compared to face, if is possible, that is why individuals to identify known persons use sound of their voice, smell, special way of wearing or moving; this impairment can have different intensity, depending on the level of interpreting of information, on which lesion appears; some of patients do not recognize that the configuration of elements is the face at all; some of them are only unable to tell if they know the face or name it;
- pure alexia – individuals who have pure alexia suffer from severe reading problems while other language-related skills are intact;
- akinetopsia – disorder of perceiving motions (moving object disappears);
- colour vision deficiency (colour blindness) – is an inability to see the colours (identify and name them); in this case, the patient has problems to recognize colours, to order in pairs or grade; there is

no information about impairment on the level of sensory processing information; sometimes this impairment coexists with losses of visual field, especially with lack of right sight; it seems to be more frequent in the case of damage to the dominant hemisphere of the brain; in the case of “pure” colour blindness, speech disorders like aphasia (which can cause problem in naming colours) should not occur; but in practice the deficiency in perception of colours is often a secondary deficit, primary deficit is speech disorder, especially sensory aphasia (Cohen-Maitre, Haerich 2005);

- achromatopsia – it is very similar to above, defined by John C. Meadows in seventieth as an inability to perceive colour, often connected to prosopagnosia; it is loss of colour vision in one or both parts of vision field; it can be caused by damages of hindbrain;
- anomie colour – patient can identify colours, but cannot name them; it can be disconnection anomia – this impairment is important to tell about, because it does not seem to be pure semantic anomia; the child can make mistakes in verbal phrases (name colour of the group of objects), but can also has problems with adequate colouring of drawing); the differences among types of difficulties to recognize and name colours is not enough explained;
- acalculia – one of the form of acalculia is caused by difficulties of visual perceiving or processing symbols; acalculia may be the result of disorder to occipital cortex of left hemisphere, as the others impairment described here.

According to the examination, the degree of visual impairment in children with CVI can be from decreased ability to see to totally blindness. Under the some scientists (R. Huo, W.V. Good, CS. Hoyt, S. Burden, J.E. Jan, A. Skoczinski, R. Candy; as cited in: E. Kurczak-Wawrowska 2006, p. 4), in 65 percent of patients with CVI, neurological impairment can occurred in combination with the others visual afflictions. Abnormal functioning of eye optical system – reduced contrast sensitivity (Good 2001), changes in central visual field, sensitivity to light, impairments of eye motility: fixation, accommodation, strabismus, nystagmus (as cited

in: L. Hyvarinen 2005) and diversifying visual possibilities accompanying to CVI. Alarming symptoms, noticed in infants, can be incorrect look of the eyes or their incorrect, wandering movement (Krawczyk 1997).

Fluctuation vision is often caused by bad mood, tiredness, atmospheric changes, medicines taken by children, lighting conditions, contrast between the object and the environment (Krawczyk 1997). Diversity of visual possibilities happens not only day by day but also minute to minute. As a consequence, the same pupil which can notice details on drawing one day, the other time has serious problem to move in the space, stumbling on the things inside.

Among behaviours typical for CVI also aversion to spontaneous exploration of surrounding and difference in functioning of child with CVI in known and unknown environment is contained. It can even provoke loosing visual functions in new environment (Walkiewicz-Krutak 2009). The child has problems with unassisted moving and sense of direction – sometimes they are more serious than in visually impaired people. It is caused by influence of impairment to right assessment of spatial relates among the objects and depends on losses of visual field. Sometimes the problem to find the right way can occur, even in well-known surroundings, because of lack of possibility to recognize landmarks.

Aversion to see, short time of spontaneous seeing, fast tiredness of the sight or short time of visual activity in children with CVI can be also result of much more visual stimuli and inappropriate stimulation (the stimulation level is not adjusted to the limited cognitive abilities). Problems of regulating the level of arousal and keeping attention concerns also concentration and reducing visual attention consistency.

Children who achieved good level of recognizing objects, can do it worse on the base of visual information (or cannot achieve this ability). Difficulties of perception of depth cause, that they have problems in evaluating the spatial objects' position, they have problems to reach objects, they cannot notice height changes in surrounding and are unable to recognize spaces during moving and doing complicated visual-spatial tasks (Walkiewicz-Krutak 2009).

Losses in visual field observed in children with CVI have regular or irregular shape (as cited in: E. Kurczak-Wawrowska 2006, p. 7-8). The object

which is in the loss of field of sight is not brought to their attention, and the brain uses only information from unspoiled part of the visual field.

Children with CVI often have reserved ability to see colours. Both cerebral hemispheres and reduced – in comparison with shape perception – number of involved neurons are taking part in it. It is why sometimes it is easier for child to name colours than subjects and in the therapy of identifying forms, often with success, colours are being used (Krawczyk 1997). Our eye's ability to correctly perceive the colour is not unambiguous with recognizing it. There may appear preferring some particular colours (e.g. red, orange, shiny and light-reflecting objects). However, it should be noted that the person with Cortical Visual Impairment does not feel well in overcrowded, multicoloured places with many visual stimuli. Distinguishing form from background is also a problem – children with CVI often bring observed object closer to eye, which is a method to reduce visual clutter and role of background while looking – equally discernible are objects exposed on a clear background.

Considering children with CVI prefer peripheral vision to central vision, they often do not respond visually on stimuli exposed in front of the face. Another problematic issue is also looking beneath body's midline and placing head at the right position. In this case they prefer to look at moving objects using peripheral vision.

Infants and young children with Cortical Visual Impairment often have weak visual reactions: not observing face, which is trying to make eye contact with them or even avoiding visual contact (despite the fact they have sufficient visual acuity to notice elements of face, not noticing stimuli in the surrounding, lack of visual contact, slowed and delayed visual reaction. "There can be different reasons of that behaviour. We are often facing with situation in which child with CVI is on the very early stage of visual development and reacts only on simple visual stimulation, e.g. big, shining surfaces and single coloured toys e.g. red balloon, meanwhile face is a complex object – containing details and dynamic – difficult to interpret on an early development stage" (Walkiewicz-Krutak 2011, p. 31-32). More effective vision can be achieved by working with children, after telling them exactly how to look.

94 Another visual reaction, often exposed by children with visual impairment, which has origin in brain, is sensitivity to light (or intensive gazing at the source of light). Paradoxically, these two symptoms can co-exist with each other – one day a child compulsively gaze on the light, and another day are over-sensitive to light. Sometimes that need is so strong, that children look at the sun intensively. “It can be dangerous because it can cause solar retinopathy. Gazing at the light does not depend on the degree of cortical visual impairment or the level of decrease of vision. Probably, with the loss of cortical changes, that manner decreases and, sometimes, completely disappears, while the children grow up. Lower number of children with visual impairments, with poor eyesight, gazing at the light, provoke flickering of light through waving fingers before the eyes. People with eye disorders do not try to provoke these effects, and if they do (e.g. in the case of retinopathy of prematurity), it indicates on simultaneous Coral Visual Impairment” (Krawczyk 1997, p. 20).

Another manners affecting children, for example intensive rocking, clapping, show that they have increased need for physical movement, which disappear when it is satisfied. These symptoms are applying to both – children with CVI and ocular visual impairment, but according to some scientists, it is more often connected to Coral Visual Impairment. (Krawczyk 1997).

Scientists indicate on difficulties with performing few activities at the same time (with listening, looking, planning and performing motor activity). There is also a problem with connecting visual information with facts related to different modalities (a child, reaching for previously observed object, turns head). “When a child with CVI must control the position of head, look and perform activity involving small motor skills in the same time, it is an effort comparable with effort of a healthy adult, who is learning to knit and tightrope walking at the same time” (Hyvarinen 1994, p. 219).

Children with CVI have problems with visual memory, visual attention and visual imagination. They are characterized by incapability to recognize written words – it is difficult for them to distinguish grouped symbols. Sometimes they are able to recognize single letters. Child with CVI is not able to read particular word, although knows the single letters.

It is why cerebral cortex injury can have influence on processes connected with studying – some functions of cortex are disturbed: reception, processing and integration of visual information with information collected by other senses, and also integration of the sensory stimuli with memory, speech system and executive function – these processes can be disrupted or disturbed. It is why the consequences of CVI are different problems in school.

Therapeutic Strategy Towards Children with CVI and Educational Implications

The extend of CVI and the degree of disease – how it was mentioned – depends on localization and extent of damage and from time it occurs – if it occurs very early after childbirth, prognosis are more propitious and visual functioning of child with CVI (after vision therapy) still can be improved. That thesis is confirmed by various researches (Khetpal, Donahue 2007; Flanagan, Jackson, Hill 2003; Goggin, O’Keefe 1991; Hatton, Schwietz, Boyer, Rychwalski 2007; Khan, O’Keefe, Kenny, Nolan 2007). Improvement of visual functioning usually is assigned to flexibility of the brain and its ability to form visual abilities, in spite of the fact, that optic tract and the areas of brain in charge of vision are damaged. A human brain – especially in the first three years of life – has compensation abilities. The mechanism of compensation relies on creating new nerve connections. It gives possibility to use structures, which are not damaged, more effectively. There are created new, alternative routs, which take over the role of damaged ones (Hyvarinen 2005; Krawczyk 1997; Walkiewicz-Krutak 2000, 2009). During the first months of a new-born child’s life, many changes are taking place, for example there are created new connections between neurons (also in the visual cortex). It is why providing them new and interesting stimuli has a positive influence on their development, including sight. The sooner child will be diagnosed and treated, the better effects might be.

Confirmation of that thesis are the researches conducted by K. Czerwińska (Czerwińska 2006), in year 2005 on the group of 35 children in age of six with neurological visual impairments. On the basis of realizing

individual programs supporting development of vision (IPWRW), there was examined the impact of stimulating eyesight. At the preliminary studies stage it was agreed that 57,1% of examined child were functioning below developmental norms, it means on the level of one month of life. These children had characteristic for CVI features of visual functioning: delayed response time (57,1%), fluctuation of vision (54,2%), problems with perception of the depth, which are the cause of imprecise reaching for object (45,7%), problems with localizing static stimuli (31,4%), problems with noticing stimuli in the two modalities (28,6%) and excessive concentration on light sources (8,6). It was stated – as the result of the intensive stimulation to look and visual stimulation – that there is significant change in the level of vision development among 82,8% of children (only in four of them the vision level remained on the level of 0-1 month of life) (Czerwińska 2006). It means that neurological visual impairments can be not as harmful, if, during infancy, the child and the family will receive support and there will be an intervention. Children with CVI usually develop their visual capabilities, but rarely are developing them fully. The condition of effective vision improvement is (Walkiewicz-Krutak 2011):

- 1) stable neurological condition (lack of epileptic seizures);
- 2) surrounding supporting child development (proper intervention strategies, acceptance).

The aim of the therapy with reference to children with CVI is a gradual inclusion of sight in the process of getting to know people, objects, spaces. It should be carefully planned taking into account whole range of cognitive capacities and limitations, especially visual. The basic conditions and assumptions essential for process of effective therapy of child with CVI include:

- therapy in the familiar environment, in which they spend lots of time and feel safe (a family home, offices of pedagogues, psychologists and vision therapists) – diagnosis and improving vision in the other environment, which is alien for them, can cause worse effects than usually;
- frequency and duration of therapy session depends on children capabilities – in case of longer meetings it is important to change forms of stimulation, position and activity of patient;

- these classes should have always similar scheme, with marked the beginning and the end of different activities – all changes should be introduced gradually and with moderation;
- determining the manner of communication with child;
- knowledge about CVI and its influence on child functioning;
- knowledge about medicines child is taking;
- place and position of child are important (determining optimal position for child – comfortable and giving the sense of security – which will be conducive to using all the capabilities e.g. children held by someone, who is close to them response differently, holding head of child with mild cerebral palsy, applying appropriate seat);
- there should be chosen the moment of child’s attention – suitable moment of the day – if child is under the influence of any drug may be sleepy; child should be well-rested and after a meal; some children have specified time of the day in which they are functioning best);
- if it is possible, establish information if lighting conditions and other are appropriate for child (it is important to know child’s preferences regarding lights, colours and theirs quality);
- researches while playing;
- eliminating white outfits in surrounding, unnecessary appliances (including child’s toys) – simple environment without any other, redundant stimuli (reducing visual chaos);
- eliminating (or limiting) all factors causing stress, which limits child’s motoric and psychological capabilities and cause occurring different, difficult to define behaviours;
- the therapist’s cloth (uniformly coloured, because important for rehabilitation objects should be easily visible); room should not be white, there also should not be lots of colours;
- using their individual preferences regarding distance of observation, part of the visual field, kind and position of stimulus;
- in the beginning of therapy, on the stage of stimulating to look and perform basic activities connected to vision, using big, simple objects to look at, without details, in contrast with background

- and – if necessary – illuminated, gradually moving towards more complex subjects;
- give them enough time for relax (if there will be any signs of fatigue – stop or postpone further actions on the other day);
 - give children all the time they need to interpret visual stimulus and react on that stimulus – do not change stimuli quickly, but expose them as long as it is necessary – children with CVI need more time to notice object, concentrate and react;
 - using repetitions many times;
 - using stimulation engaging all the senses – recognizing objects by sight, completing by information from other modalities gives often good results (Steeendam 1989; Hyvarinen 2005; Roman-Lantzy 2007; Walkiewicz-Krutak 2009; Kurczak-Wawrowska 2006), e.g. underline meaning of colour and movement and connection of both to realize these children full potential (Cohen-Maitre 2003);
 - teaching aids and materials used during the therapy have to be individually chosen and adapted to child visual abilities;
 - stimuli should not be too loud or pulsating;
 - it is important to use reinforcements (rehabilitant has to know, what child likes; lack of that knowledge can be harmful and the research can have wrong result): if child responses on colours, if has favourite colours, food (in condition, that it will be given in the right time of the day); smells (perfumes, cosmetics) – can deter children; pulsating source of light or contrast of the objects – there can be the prize – letting child to play colourful lights or the flashlight (black and white stripes can cause an epileptic seizure); children can react on their names, particular voice ton, manner of speaking; child may like spending time with particular person; praising (older children); body stimulating (hugging, swinging); amplifying sounds (humming melodies, turning on music);
 - appropriate interpretation of physiological signals by therapist – child's reactions on stimulus can be different (gentle motion of the hand, body movement, smile – in these situations they

can help child to receive stimuli); correct interpretation of physiological signals and appropriate reaction on them (recognizing tiredness and applying brakes or changing activity).

Therapy is taking place while child's visual functions are developing, they have to be supported by therapy like in the case of partially sighted children. It should be noted, that child with CVI has specific way of functioning and particular difficulties. Marieke Steendam distinguishes main stages of stimulating children with CVI (Steeendam 1989, as cited in: Walkiewicz-Krutak 2009, p. 51):

- causing reaction on visual stimuli in children with underdeveloped visual conscience;
- developing stimuli awareness in children reacting on chosen type of stimulation;
- developing perceptual-motor skills;
- developing visual-perceptual skills.

Pedagogical work with child with CVI has to be based on a thorough observation of patient connected with knowledge about physiological reactions linked to that disease: posture, body position, changing breathing rhythm, turning pale – redness, hiccups, a tone of voice, changing the level of motor activity (Kurczak-Wawrowska 2006). The level of child's activity should be constantly maintained on the right level during the classes – by a suitable choice of quantity and quality of stimuli and using them properly. All the pedagogical situations should be predictable for child, it is why education should only take place through making routine from individual activities chosen for a child after careful observation. All the changes should be introduced gradually – sudden changes cause disorganisation of child's behaviour, strong physiological reactions, withdrawal or strong exhilaration, bedwetting, cry, scream, aggression or auto-aggression and another behaviours which make studying difficult or impossible. Helpful in this area will be introduction of constant signs. Constancy in child's surrounding is in general very important. Student with CVI has to know objects and materials he works with, which help him to get new competences and knowledge. These objects should be adjusted to that purpose – right font, adaptation of graphic material (simplified with highlighted lines, well contrasted), bigger distance between lines and words in text with

possibility to apply objects and materials other than optical (typoskop – “window” to limit visual field essential in learning how to read made from dark material, colourful filters). Analysing every graphical form should be precluded by information what a child should see or localize. While counting, objects should not be grouped in one place.

Children with CVI require multiple repetitions of activities before they will remember it. To maintain longer concentration of children’s attention on presented new object, it is worth to present it in few parts of the visual field. Colours of objects should be chosen according to children’s individual preferences. Because, how it was mentioned, the ability to recognize colours has significance in recognizing shapes and understanding visual space. Helpful can be also integration of visual stimuli with other sensual modalities (colour with motion, touch with sound). In the process of recognizing reality by child with CVI main sources of information should be – apart from visual performance – also touch and verbal description. Because connecting several activities related with sight and motion is problematic for child with neurological visual impairment, it is necessary to divide orders connected with sight and motion until intensive stimulation of sight in the direction of developing perceptual-motor abilities will bring some effect.

These, often misunderstood by healthy people, different ways of experiencing reality, untypical visual reactions on people, educational materials and being surrounded by children with neurological visual impairments requires individualized, properly adapted to children’s needs strategy of supporting development. Therapy of child with CVI is an individual process with lots of stages, properly planned and overthought. It is effective only as multidisciplinary process, in which child and child’s environment are encompassed by support, because problems of child with CVI are not only limited to difficulties with sight. Except from adaptation actions concerning: adjusting environment and materials, positioning, teaching basic concepts and description of events, facial expression, etc., practical experience, interactive, learning spatial integration and independent, safe moving, sight rehabilitation, it is also necessary to work on social skills, teaching parents to build connection with child.

Conclusion

Children with neurological visual impairment are specific group of people with visual impairment. Changeability of their visual behaviours is often perceived as “weird”, misunderstood by people, who see properly. Repeatedly these children are said to be lazy, that they simulate and manipulate. They experience difficulties with studying not only considering didactic character, but also emotional – incentive one. Proper understanding their development possibilities and educational needs is a basic condition of optimal support in conditions equivalent to these students without impairment are dealing with.

Summary

The following work tries to present selected aspects of visual perception and functioning of children with Cortical Visual Impairment.

The article, which presents the specific character of visual perception of children with Cortical Visual Impairment, discusses their basic visual abilities. It tries to describe disorders in reception and processing visual stimuli that appear in such cases, on the basis of the knowledge from the literature from the field of ophthalmology and typhology.

The article includes also some recommendations of constructive modifications of the surrounding (that were only mentioned in Polish and foreign literature), social behaviours and situations taking place with children who have Cortical Visual Impairment and some disorders of the sight sensory channel.

Key words: Cortical Visual Impairment, visual perception, visual functioning, functional consequences of CVI

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Teaching L. Braille System – New Challenges and Strategies

Introduction

Reading and writing in Braille are abilities still essential to effectively using written information by blind people. Although systems based on audio channel (speech synthesis, dictation machines) are perceived by users as quicker access to information requiring smaller workload (D'Andrea 2012), getting to data only by hear can lead to functional illiteracy. It is why Braille system still has key meaning in the process of education and rehabilitation of blind people. Using it, it is important to learn, how to write properly, how to use grammar, punctuation, create sentence structure and paragraphs. Furthermore, reading texts written in Braille is active reading, enabling focusing attention on details and understanding the context (Cryer, Home 2011). Braille materials are necessary to study math, science and foreign languages (regardless from the level of education). Braille is also a medium, which enables access to computer environment, including programming languages (D'Andrea 2012).

Although from many years reading using Braille becomes less and less popular and attitude to it is negative (Kilian, Śmiechowska-Petrovskij 2015), it seems, that modern development of supporting technologies should stop that tendency. Knowing Braille system is necessary to use Braille notetakers – multifunctional devices enabling creating, downloading, processing and storing various files. Considering their ergonomics, easiness in use in any place and time, discretion of using (using device do

not focus others people attention) (Chan, Foss, Poisner 2009), are devices optimal for blind users – from technological, functional and social point of view. Furthermore, the possibility to store in the memory of device digital files extends library of some person (from several Braille publications to hundreds). Similar advantages will have using computers with Braille screens. Another thing is that recently devices to write Braille are created, which connect advantages of traditional, mechanical typing machine and electronic device. Because of them study process of reading and writing Braille can be more effective through reducing physical and cognitive effort of blind people, raising their comfort, effectiveness and productivity in studying Braille. It can be said, that development of modern supporting technologies and benefits from using them cause that the possibility of using them – especially considering high-tech equipment – will be one of goals of modern Braille education. On the other hand, part of those technologies should be perceived as new didactic aids leading to reaching high level of Braille competences – in case of less high-tech equipment.

Braille Education – Basic Information

Braille system is based on the six dots – tactile recognizable dots on a rectangular plan, which is a sign creating system. Two columns containing three dots each are creating it. The numbering of dots is constant and every letter of that system can be described by them. Left column contains dots: 1, 2 and 3 and right column dots 4, 5 and 6 (dots are calculated from top). The Braille cell has on average high 6,5 mm, and distance between them is about 2,5 mm. The number of dots and their distribution let to obtain 63 combinations and one empty sigh, it means interval. Braille enables to write texts by integral notation (letter after letter – Uncontracted Braille, Braille Grade 1) as well as contractions (specific for some language, which is about substituting a sign by combinations of letters, parts of words or words – Contracted Braille, Braille Grade 2), but also mathematical, chemical, physical formulas and equations and also notes (thanks to mathematical, chemical, physical and musical notation). Another type of Braille is Eight-Dot Computer Braille (eurobraille, computer Braille). It lets not

only to read texts by blind people, but also has communicative role because of texts created by blind people by different tools: manual and electronic. Regarding linguistic, Braille system is equivalent with normal writing system, because only physical form differs them, not rules of connecting language signs. Braille takes into account specificity of touch sense:

- touch do not has the easiness of sight in perceiving continuous line;
- touch is the sense of dashed feelings;
- touch perception of surfaces is a lot harder than relief points;
- the scope of attention is limited: number of simple elements perceived in one act of noticing, cannot exceed six;
- ordered touch feelings are easier to express than chaotic ones;
- Braille sign does not cross the field of finger tip;
- removing Braille signs from each other exceed the step of touching sharpness, what make it easier to recognize signs (Czerwińska 1999).

Reading relief text has tactile-kinesthetic character, reading is possible by swipe index fingers of both hands on Braille lines and touching them lightly, however to the right process of reading dominant hand is used and second one represents an ancillary function, for example: it is looking for another line and makes it possible to maximize the area of tactile perception. At the beginning user focuses on the number of dots, creates a letter, is checking it carefully and, with time, starts to recognize the shape of sign as determined tactile form. Practice in reading makes all the dots creating letters stop being units, individual parts and the effect of it is full picture of letter of word and connecting form of sign with its content (i.e. depicting), giving up perceiving them individually as elements (points creating letters, letters creating words). It is possible to get the quality of global reading, especially when reader is concentrated and has big vocabulary range (Grzegorzewska 1989). In this context similarities can be noticed between reading using sight and touch. It can be said that at the beginning stage of learning how to read tactile sensitivity has great meaning, which is lower and lower while structure of point reading is getting more and more familiar and there is arising a relation between sign and content, which is presented, it means letter, word (Majewski 1983).

However, reading using touch has its limits considering the size of the field of perception and also its variability and discontinuity connected with moving hand. Reading using touch has sequential character, requires memorizing elements and then reconstructing them and assigning meanings. The process of understanding reading text requires more frequent than in case of seeing people, integration of content, at least on the level of phrase (not sentence or paragraph). All these factors are influencing on fact, that reading using touch is 3-4 times slower to reading using sight. However, another way of perceiving text by touch do not has influence on another psychic activities, which take part in act of reading, such as: imagination, helping to express meanings of signs, memory, providing preservation of contents, understanding (capturing relations between contents), will, feelings (including motivation and involvement). They are equivalent to reading using sight (Czerwińska 1999).

To write in Braille machine can be used (manual or electronic one). It has buttons, which correspond to dots in the system of six dots. Pressing all of them at the same time lets to create a letter. Less and less popular tools to write texts in Braille are the slate and stylus. Braille notetaker also have Braille keyboard. On the first stage of writing education the biggest challenges for students can be problems with coordination and pressure force.

Braille education will proceed in the specific way, depending on the diversification of groups of users:

- children blind from birth, who learn how to read using particularly Braille techniques;

- children with sight impairment, who, during education, stop using normally written text because of developing disease of sight and have to learn Braille;

 - children with visual impairment and additional dysfunctions;

 - people losing sight when they are adults;

 - normally seeing people – teachers, rehabilitants, parents of people who use Braille.

Braille education of blind from birth children includes pre-Braille stage, in which main focus is on the tactile stimulation of a blind children, development of theirs touch perception, coordination, orientation in the small space, dexterity and study of basic abilities connected with

Braille such as placing and scanning by hands and fingers along a line of the text, finding beginning and end of verse, searching and passing to the next verse, exercises introducing the idea of a system of six dots. In the same time there must be early introduced a stimulation of speech development, development of phonemic hearing, synthesis of hearing and development of concepts, including the spatial concepts (Paplińska 2009). At this stage child has to have a lot of contact with texts in Braille to understand, that writing is a coding system (relation sign – meaning). An indispensable condition on this stage is creating a braille-rich environment (Wormsley, D’Andrea 1997; Paplińska 2009). In the stage of proper reading and writing in Braille, student get to know Braille symbols and their meaning, study to distinguish and identify them and to read texts – synthesize signs creating text, interpreting sense of it and apply that content to actual goals and needs. In the same time a student studies how to write texts in Braille using Braille keys. In connection with this, in Braille education it is very important to integrate reading, writing, listening and speaking.

Studying Braille system by children with sight impairment, who, during education, stop reading normally written text because of developing disease of sight, require different attitude. Decision about changing printed text to Braille is emotionally difficult for users (Wormsley, D’Andrea 1997). That is why it is very important to develop in students internal motivation to study. On the other hand, students have consciousness about what language system is, including its written form and already mastered the ability to read and write, which is good base to further learning. The goal of learning is to be able to use different alphabet – based on touch, not sight. While studying it is important to practice feel perception, but also to learn Braille system quickly and be able to use it in all kinds of situations connected to education and everyday life.

Braille education of children with visual impairment and additional dysfunctions, including intellectual disability or another dysfunctions connected with autism is not the subject of scientific analysis, although it is estimated that these children are about 65% of population of blind and partially blind children (Parker, Pogrud 2009). In the case of group of students with intellectual disability normal strategies of teaching Braille

can be ineffective, what causes the need to look for new, effective methods of teaching reading and writing. Another group is a group of students with motor disorder, which make it impossible to use both hands to read and write and then strategies to read and write by one hand are important.

In case of people, who lost their sight while they were adults, the important thing in Braille education is to make them conscious about importance of functional character of Braille in everyday life. Adults and older people often have difficulties in the area of tactile perception because of lack of training, another thing is that with age the tactile sensitivity is lower. The need of intensive exercises to identify Braille signs can be discouraging, that is why it is very important to show to that group of users, how much this ability to write and read in Braille, is necessary in everyday life (writing letters, marking private things, reading to children, grandchildren etc.). Apart from that, it is worth to organize alternative forms of teaching. As highlighted by M. Kilian (2015) high motivation of studying seniors, strong life experience and developed interpersonal skills give solid base to carry out in that age category practice exercises e.g. in discussion groups, group projects.

Normally seeing people, who want to study how to read and write in Braille are mostly using visual materials (are studying to read by sight, not touch) – from so-called black printed Braille. It lets to learn how to differ Braille signs more easily (black points on white background and using auxiliary dots, which show the frame of the 6-dot Braille cell). Particular challenge in the education of professionals is the study how to use technologies based on Braille. It is important to know not only 6-dots Braille, but also Eurobraille – 8-dots Braille, Computer Braille, which is used in Braille displays.

Advanced Materials and Tools in Braille Education

Tools and materials, which can have significant influence on Braille education are electronic Braille typewriters. They make communication between blind and people without sight disorder more effective and make Braille easier to study by themselves.

Perkins Smart Braille is a small device, which connects functionality of an old, traditional, mechanic Braille typewriter (texts in Braille can be written on it using 6-dots keyboard) with functionality of electronic devices – it has screen, on which in black print there is presented transcript of the text on the machine (with equivalents in black printed Braille) and speech synthesizer, which reads, what is written. Immediately received audio and visual information is an excellent solution for blind people, who receive information about what was written, but also for normally seeing people (teachers, rehabilitants, parents), who can check, by sight, if it is written correctly. Machine has also a USB port, which lets to establish work in the form of text file and upload it to the computer, print or send by e-mail. The button, which corrects mistakes makes it possible to correct everything on paper and in electronic version of the file. The button to correct mistakes let to make corrections on paper as well as in electronic file.

The Mountbatten Braille Pro is also electronic Braille machine, which lets to write in both ways – in 6- and 8-dots systems and to print in Braille, thanks to two-sided communication with computer and internal memory. After connecting external screen Mimic it gives possibility to read Braille transcript in black print. Thanks to Bluetooth Smart files can be downloaded from the memory of device, send to device and printed by application, which works with iPads and iPhones. After connecting device to the computer it can be used as Braille keyboard. Thanks to voice tools device gives also information about written letters.

The Mountbatten Braille Pro, contrary to Perkins Smart Braille, has more ergonomic keyboard requiring less pressure, what may be important for younger Braille users and works more quiet. Another device, Perkins Smart Braille, is device much more intuitive in using.

Using electronic machines in early Braille education can have several advantages. First of all, thanks to immediate feedback student can be more independent in studying how to write and correct mistakes he is making in the same time. Furthermore, auditory message helps to build connection between motion scheme (position of fingers on keys and the pressure of fingers) and Braille letter. Because of that, thanks to ‘muscle memory’, kinesthetic-motor model of letter can be received, what can be a key to increase writing speed.

Secondly, thanks to specially projected computer programs and applications, attractive multimedia program can be proposed to students (containing commands, video recordings, games, tests and exercises) to study Braille system. Thirdly, electronic devices implement blind students from an early age to create and use electronic information and multimedia formats, what is for seeing students common experience in connection with the development of communication and information technology.

Important advantage in using Braille electronic machines is that it is a transitional stage – it fills the gap between traditional Braille typewriter and technologically advanced devices as Braille notetaker or iPad.

However, there is not many publications which deal with applying supporting technologies using Braille and teaching Braille system. There is a lack of empirical data, which would confirm a cause and effect relationship between applying Braille electronic machines or Braille notetakers and efficiency of Braille education, however it is suggested, that digital technologies can play a key role in teaching how to read and write in Braille (McCall, McLinden, Douglas 2011). It was proven, that using Braille electronic machines students motivation to study Braille increases (Michaelson, Matz, Morgan 2015). Students perceive electronic machine as attractive device which can be used not only to study, but also for fun, for pleasure. They need less instructions than teachers. Teachers participating in research, using Perkins Smart Brailier noticed, that students have studied by themselves how to use device through audio guide and willingly started to write. Also, thanks to the feedback, they started to correct their mistakes. Instead of looking for help from teacher noticed, that something is not right, could correct text by themselves and audio information was perceived as non-judgmental feedback.

It should also be noted that Braille notetakers (or computers with Braille displays) can improve studying Braille. However, in the case of children, who use Braille techniques as base to learn how to read and write, it is important to use hard copy braille to build up knowledge about the structure of written documents (one Braille line showed on the Braille displays do not let to create the idea of whole document). Furthermore, technical operation of Braille notetaker can make it difficult to use it alone. It seems, that Braille notetakers as basic writing and reading tools

in Braille education will be more useful to people, who have learned how to read and write in common print and also have experience with information and communication technologies. Also in this case using speech synthesis in work with Braille monitor can make the process of learning Braille letters more simple and efficient.

Although between scientists there is no agreement about the time of introducing speech synthesis and electronic Braille in education of blind children (some of them think, that introducing speech synthesis can have negative influence on learning how to read and write in Braille, another think, that the sooner ability to use supporting technologies will be introduced, the better), it seems that all should focus on the way to integrate traditional Braille (hard copy braille) and mechanical tools to write with technologies using speech synthesis and electronic Braille to introduce more effective Braille education. In other words – how to use speech synthesis and digital Braille to study how to read and write by Braille, not to replace Braille receiving audio information.

New Methods and Forms of Teaching Braille Adjusted to Specific Needs of Users

Braille education will proceed in specific way, depending on the group of users. Separate group of users are students, who had studied how to read and write using common print, but because of developing disease of sight, which can lead to blindness, have to learn how to read and write in Braille. People, who used common print and are not able anymore to read normally written text, have to study Braille in the most effective way and besides of it, time to study should be used efficiently. Apart from exercises developing touch perception and recognizing Braille letters, there is a need to learn symbols from mathematical, physical or chemical notation

In the process of moving from common print to Braille, motivation is very important, because learning to read and write is perceived as time-consuming. Interesting content of Braille texts or the speed of learning Braille system can be motivation to learn (D'Andrea 1997).

The method, which is tested in Braille education of students losing sight is the procedure *time delay*. It consists of two phases: *instructional phase*, in which stimulus: Braille sign or intervention (tip) – loud reading sign, occurs immediately and *fading phase*, in which there is 5 second break between presenting Braille sign and tip. Because of that student has time to recognize sign independently. Learning proceeds while several sessions, when chosen groups of signs are presented in several tries consisting of *instructional phase* and *fading phase* (Cooper, Heron, Heward 2007; Ivy, Hatton 2015; Ivy, Hooper 2015). That method turned out to be effective in teaching Braille adolescents, who knew how to recognize Braille symbols. During researchers students have learned from 28 to 40 words (contracted Braille) and Braille symbols. Researchers emphasize, that *time delay* can be a good additional method, which is supporting traditional Braille education strategies. Because in learning Braille by people losing sight, very important is their motivation and active attitude to educational process, the possibility to reach good results in short amount of time can change their attitude to study. This method requires empirical exploration. Evaluating results of students were not analysed such achievement predictors as earlier touch stimulation and training on the ground of abilities connected to Braille. There should be also established the number of attempts and sessions to teach chosen symbols more effective.

It is worth adding, that interesting educational strategy can be connecting *time delay* method with using Braille display and speech synthesis, thanks to which students could use *time delay* alone (without teacher) with carefully created application.

Another tested, modern method of learning Braille system is *Individualized Meaning-centered Approach to Braille Literacy Education* (I-M-ABLE) (Wormslay 2011). Method assume creating Braille rich environments, individualized reading materials and focusing on basic stage of study to create small dictionary of users consisting words meaningful for student, chosen by him or her. That method is particularly useful in work with children, because for their traditional way of learning Braille does not give satisfying effects (effort to recognize Braille symbols makes impossible to understand the sense of reading texts logically). Using them, students are creating own stories and are reading them. Teacher adds words

to fill story. That studying plan is for students engaging and motivating. Components of method are:

- selecting and teaching the Key Vocabulary;
- teaching the efficient use of the hands in reading;
- creating and reading Key Vocabulary stories;
- teaching phonics;
- teaching contractions;
- teaching writing;
- expanding reading vocabulary;
- creating functional uses for braille;
- monitoring progress;
- being responsive to students (Wormslay 2011).

That method verifies in particular in work with students with mild intellectual disabilities or with autistic disorders, also with those, who are changing common print to Braille system (McMillan 2015; Campbell 2011; D’Aurizio 2011). There is a need to check possibilities and effectiveness of using method in teaching non-abbreviated Braille (uncontracted Braille) – there is a lack of empiric verification of effectiveness of method in using integral Braille.

Another challenge in Braille education is work with people, who have lost sight, especially with older people. Seniors are considered in the population of blind people as group less willing to learn Braille because of lowering the tactile sensitivity, which makes perception of Braille letters harder, difficulties with acquiring new skills, problems with identification as blind person (Kilian 2006). In work with adults and elder people building up motivation has important meaning to start learning Braille and positive attitude to learning. That is why organizational form, which can encourage to study Braille adults can be workshops. Elder people prefer learning useful things for their functioning, especially accompanied by others, looking for occasions to make social contacts (Kilian 2015). Farrow(2015) is describing group classes for adults losing sight. During 6 group meetings participants had opportunity to get familiar with Braille system and the six point Braille system, then they have worked individually using proposed by instructor work cards and recordings implementing to right habits during reading (swiping hand on the Braille lines, finding new verses). During individual

work instructor was at their disposal, answering questions. During next class participants were familiarizing with tools to writing Braille and also worked individually with work cards. A structural element of every class were group discussions about knowledge and abilities received during classes, exchanging experiences and views. Classes projected in this way let participants to build up internal motivation to learn how to read and write in Braille on their own way.

Conclusion

Contemporary Braille education faces lot of new challenges connected with methodology and organization. On the one hand they are the result of various needs and possibilities of people, who need to learn how to read and write Braille. Essential is testing new methodical instructions and forms of organizing classes including needs of students, especially students, who have additional disabilities or are getting blind and have to learn Braille. There is a need to take into account specific cognitive limitations as well as affective motivations, which have meaning for educational process.

On the other hand, in connection with new technologies development it is necessary to include to standard educational procedures new tools and materials, such as electronic Braille machines and Braille notetakers. There is the need to elaborate methodical indications regarding the way of using them. Multimodality of new tools (using sound – speech synthesis and electronic Braille) can make the process of getting Braille abilities easier, through making that process more attractive, making students more independent, building up a motivation to study, which is huge educational potential.

Summary

The point of the chapter is to present modern Braille education and the participants of it. New teaching strategies of L. Braille system are, on the one hand, answer to new technologies development supporting and using speech synthesis, electronic

Braille and converting relief printing to normally printed text. On the other hand specification of people learning how to read and write in Braille requires individualized approach including different perceptual and manual skills of users and their affective motivations.

Key words: L. Braille system; Braille education, blind people, Braille machine, Braille notetaker, assistive technologies

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