

The problems of implementation of inclusive education in Ukraine: generalization the experience of empirical sociological researches experience

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Abstract. The article is devoted to current problems of the strategy of inclusion in the education system. The authors attempt to analyze documents regulating legal relations in the field of inclusive education, the accessibility of both educational and medical institutions, the readiness of the teaching community to work with children with special educational needs. The empirical basis formed by an array of empirical data collected by conducting a traditional analysis of documents, interviewing parents and teachers. The analysis result of conducted research allows us to conclude that informants are fully aware difficulties of inclusive education today. They are associated with the lack of architectural accessibility of the majority of school buildings, proper professional training of teachers, experience in communicating with children with various types and severity of diseases, and lack of readiness of society adequately to perceive the idea of integration.

1 Introduction

The objective of the study is to summarize the experience of random empirical sociological surveys (analysis of regulatory support and the results of teachers' and parents' surveys conducted in certain regions of Ukraine with the typical structure of the educational system) regarding the implementation of inclusive education, and identifying promising areas of sociological consulting in the context of the problem under study.

According to WHO data, published in the World Report on Disability in 2017, the total number of people with disabilities in different countries of the world is more than 1 billion people, with almost 200 million among them having serious problems with normal functioning in society [1]. According to the study of the United Nations Children's Fund (UNICEF), the number of children with disabilities in the post-Soviet countries increased almost three times on average from 1990 to 2015 [2]. The tendencies of increasing primary disability with various nosologies [3], in particular in Ukraine, determined primarily by the demographic crisis, the presence of a wide range of congenital anomalies, the diversity and extent of which are directly dependent on the social, spiritual, physical and economic well-being of certain countries. Thus, in Ukraine in 2016, there were 153547 children with disabilities, which is 2.02% of the total population of the country under the age of 18 years, and 12 267 123 diseases were registered, an average of 100 diseases per 11.6 people with disabilities [4]. According to the statistics from the Ministry of Health of

Ukraine, throughout 2005-2015 the rating of causes of primary childhood disability remained relatively unchanged: in the first place – congenital anomalies, deformities and chromosomal abnormalities – 31.3% in 2015 (31.0% in 2014, 30.4% in 2013, 29.13% in 2011, 22.9% in 2005); the second place includes diseases of the nervous system – 17.0% in 2015 (17.1% in 2014; 17.6% in 2013; 18.9% in 2011; 20.4% in 2005); on the third place – mental and behavioural disorders – 14.0% in 2015 (13.9% in 2014, 13.9% in 2013, 15.5% in 2011, 16.6% in 2005) [5].

According to the Ministry of Education and Science of Ukraine in the academic year of 2016-2017, 4180 pupils were trained in inclusive classes, which is 53.6% more than in the previous year (2720 pupils in the studying period of 2015-2016). To provide qualified assistance in mastering educational material for children with special educational needs, 1,825 teacher assistant positions were introduced in the staffing table of general educational institutions. The question of the organization of accessible educational space remains topical. So, in the 2016/2017 survey data, 12652 educational institutions are available only up to the first floor (77.2% of their total number), 69% (0.4%) up to the second, 22 (0.13%) up to the third, and up to the fourth and next floors – only 11 structures [6]. As we can see, positive developments can be traced, but still many more questions remain unresolved.

The priority of solving problems related to the spread of childhood disabilities is actualized by the need to ensure the social protection of disabled children during a long period of time, since almost a quarter of cases of

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disability in people under 50 years old are caused by diseases suffered in childhood. In addition, we should not forget that the effectiveness of solving problems of child disability depends entirely on the life quality of the population, integrating all social institutions, including state authorities, public organizations whose activities are aimed at creating the right conditions for full life activity of people with special needs in all its aspects. In this sense, the strategy of inclusion in the education system, in particular, can be considered as the direction of social investment in human development.

Benefiting from the successful implementation of inclusion is impossible without dialogical planning for implementation, long-term funding to create the right infrastructure, and creating a regulatory framework for settling legal relations in this area. The basis of the adoption and implementation of management decisions should be based on the priority interests of stakeholders of inclusive education.

2 Literature review

A number of scientific studies are devoted to studying the problems of implementing inclusive education. So, T. Booth, M. Ainscow, M. Vaughan presented a selection of practical recommendations in their work 'Index for Inclusion' [7] for creating an inclusive educational environment for all members of the school community. In particular, T. Booth, studying the social practices of inclusive education in 17 countries of the world, concluded that the list of countries supporting the inclusion policy mainly included those that are characterized by decentralized systems where budgets for special needs are delegated to municipalities, districts and / or individual schools. Exploring the features of the implementation of the process of teaching children with developmental problems in different countries of the world, L. Shipitsyna noted that the principle of financing inclusive education depends on understanding the essence of the processes of inclusion and integration. Thus, in her opinion, Ukraine and Russia do not distinguish between these processes and, as a result, in these countries the majority of children with disabilities are neither included nor integrated into general education schools and instead receive education in special institutions. At the same time, resource centres are being established in Armenia, Belarus and Uzbekistan to support inclusive education in secondary schools [8].

According to UNICEF terminology, the term 'invalid children' (or children with health disabilities) is used to define a group of children who are diagnosed with impaired bodily functions of moderate or high severity, whereas special educational needs are inherent to children with milder functional disorders, who often do not have the social status of a disabled person, and are regarded as impaired learning abilities. According to the WHO, indicators of child disability in developed countries do not exceed 2.5% of the total population of children (1% of them are children with serious pathologies), but about 8% of children with special educational needs [9]. The indicator of children's disability in this case is considered as a basic criterion for the public to recognize the need to develop effective

mechanisms for the social protection of children with disabilities in the field of education. According to the results of the research by A. Kolupayeva, in most countries of the post-Soviet space there are problems in harmonizing the methodology for registering children with special educational needs, as organizations are subordinate to different social departments, in particular to the Ministry of Health, the Ministry of Social Policy, the Ministry of Education and Science [10]. Actually, the first of these social institutions records the number of children with various groups of diseases, the second - the number of children with disabilities claiming monetary social assistance from the state, the third - the actual number of children with special educational needs who applied to general education and / or specialized schools at the place of residence for the provision of social protection in the field of education. The real statistics regarding the number of children with special educational needs, who have various kinds of disorders in the functioning of the body, can be several times higher than the official data of children's disability. Thus, the lack of interdepartmental interaction due to the methodological inconsistency of registering children with special educational needs is one of the problems of implementing inclusive education.

Studying the effectiveness of the functioning of the state social security system for people with disabilities, P. Romanov and E. Yarskaya-Smirnova argued that the social policy towards people with disabilities, implemented when the Soviet Union was in, was of a compensatory nature [11]. A sufficiently long period in a society where the attitude towards a person was utilitarian and the economy was economical, the life of representatives of this social group took place on the periphery of social relations. The system of special education has become the legacy of the post-Soviet countries, increasing the segregation of children with disabilities, depriving them of the possibility of being surrounded by their peers who have no health problems.

A. Kolupayeva [12], referring to UNICEF experts, argues that the main reasons why in post-Soviet countries parents raising children with disabilities still support the functioning of specialized international schools are a low level of material well-being of the family, lack of alternative provision of special assistance and support from both the state and society as a whole. In addition, she notes that before the transition, in the CIS and Baltic countries, only the main signs of disability (hearing, vision, intellectual development, speech impairment) classified children who had the opportunity to receive education in specialized institutions under corrective programs. This raises a second problem - the possibility of providing inclusive education for children with primary disabilities with other nosologies, since the spectrum of recorded diseases is enormous (12,267,123 diseases were registered in Ukraine in 2016) [5].

Systematizing the results of empirical studies of the problems of social and educational inclusion, T. Yudin and S. Alekhina concluded that the full implementation of the principles of inclusive education is impossible without overcoming psychological hostility from healthy

citizens towards people with disabilities, the desire of people themselves with a disability to socialize and actively participate in society, the awareness of the differences between the integration and segregation model of education [13]. Thus, a third problem emerges – the formation of the readiness of parents raising children with special educational needs to uphold the right of educational inclusion for their children and educators to fulfil this right.

That is why the state educational policy should at the same time satisfy the educational needs of children with disabilities, promote the development of educational systems that would guarantee equal access to preschool, school, vocational and higher education for all children and young people, and also become an integral part of economic development. Of course, achieving positive changes in the implementation of children's inclusion with disabilities is impossible without analyzing the legal acts that ensure the existence of an inclusive component of the education system, an empirical study of the problems of families raising children with special educational needs, expert evaluation of the mechanisms for ensuring social protection of children with disabilities and children with special educational needs in education.

Certain attempts to identify promising areas of sociological consulting in the field of inclusive politics were taken by O. Panchenko [14], who focused on the need to develop an empirical sociological model of a stakeholder activity. In her opinion, a comprehensive analysis of this model, including objective-subjective factors of inclusion, inclusive environment, inclusive behaviour and practices, together will not only talk about the effectiveness of the implementation of inclusive education policies, but also carry out its correction for further optimization.

3 Materials and methods

The simultaneous use of structural-functional and activity approaches to the consideration of inclusive education allowed us to characterize the stakeholder agents that form an idea of the effectiveness of this process. Among them are the following categories of people: representatives of the authorities, developing regulatory support for the implementation of inclusive education; parents raising children with disabilities and children with special educational needs, acting as consumers of inclusive educational services; teachers as persons providing services in the field of inclusive education.

The source materials for the analysis were obtained as a result of processing an array of empirical data collected by conducting traditional analysis of documents (decrees, regulations, laws regulating legal relations in the field of inclusive education), as well as interviewing parents and teachers.

The first stage of the study was initiating by representatives of the Strong Together, public association, by the Mykolaiv Centre for Sociological Research of the Black Sea National Petro Mohyla University, with financial support from the Department of Labour and Social Protection of the Population of the

Mykolaiv City Council in January-May 2018. In particular, 385 parents took part in the survey who raise children with special educational needs living in the city of Mykolaiv and the Mykolaiv region. In the course of forming the sampling, the available sampling method was used (the survey was conducted at the location of the rehabilitation centres), the snowball method (the participants of the social group on Facebook 'Special children of the Nikolaev region' were interviewed), the quoting method was used to select respondents from the territorial departments of social protection population in the city of Mykolaiv and Mykolaiv region [15, 16]. Considering the fact that there is no statistical record of families raising children with special educational needs, in order to verify the representativeness of the research results, an attempt was made to compare the data obtained in terms of nosology groups with the statistics of the Ministry of Health of Ukraine regarding the causes of primary childhood disability.

The second phase of the study, implemented by the staff of the Department of Sociology and Economics of Kryvyi Rih State Pedagogical University, suggested systematization and analysis of normative acts regulating the inclusion policy in Ukraine, as well as conducting an expert survey among teachers. The survey was conducted in October-November 2018. The study involved 30 teachers of secondary educational institutions and 10 employees of specialized boarding schools for children with disabilities in the city of Kryvyi Rih and Dnipropetrovsk region. The selection of the participants of the expert survey was conducted by the method of self-assessment of their competence in this problem.

In the course of interviewing parents and an expert survey of teachers, they were asked to answer a number of questions regarding the most appropriate types and forms of education for special children in the context of various nosologies, as well as the range of problems associated with the organization of inclusion, and the need to involve a number of related specialists in this process, including psychologists, social teachers, speech therapists, rehabilitation therapists, teaching assistants and others.

4 Research results

The effectiveness of inclusive education depends primarily on the willingness of the state to adopt appropriate legislation, clearly define policy directions, develop an action plan, build infrastructure as well as implementation capacity and benefit from long-term funding. According to A. Kolupayeva, I. Lutsenko [10], who analyzed the legislative base of Ukraine on issues of inclusive education, the main problem is the lack of the mechanisms description for its implementation at all levels of the education system, as well as the regulation of activities related to them in this area. After ratification of the UN Convention on the Rights of Persons with Disabilities by Ukraine, the first document in this context is the decree of the Cabinet of Ministers of Ukraine 'On approval of action plans for the implementation of inclusive and integrated education in

general educational institutions until 2012' (No. 1482 of 12/03/2009). The first attempts to legitimize inclusive education were made in the decree of the Ministry of Education and Science No. 855 dated 11.09.2009 'On approval of the plan of measures for the introduction of inclusive education in general educational institutions for 2009-2012', which for the first time deals with the need for scientific substantiation to create programs, methodological support, training and retraining of teaching staff to work with special children and their parents in an inclusive education.

O. Krasnyukova-Enns, S. Crocker, T. Lutsenko, Y. Naida [17], implementing the work on the Canadian-Ukrainian project 'Inclusive Education for Children with Special Needs in Ukraine', carried out an analysis of the compliance of Ukrainian legislation with the UN Convention on the Rights of Persons with Disabilities with the purpose of its subsequent harmonization. Among other remarks, voiced by the experts, our attention was drawn to the points dealing directly with issues of inclusive education. In particular, they noted the fact that in the Ukrainian legislation regulating the information and educational policy regarding people with disabilities, there are no norms on the obligatory conduct of an appropriate educational and educational function in society realised by the state. In addition, there are no laws regulating the creation of a unified system or program for collecting and summarizing statistical data on the number of people with disabilities and their needs, which are essential for the development and implementation of effective social programs, etc.

It took the Cabinet of Ministers 8 years to adopt the Order On Approving the Organization of Inclusive Education in General Education Schools (No. 588 dated 09.08.2017) [18] after ratification of the UN Convention on the Rights of Persons with Disabilities, but today there are still unresolved problems of accessibility of both educational and medical institutions, the readiness of the teaching community to work with children with special educational needs, etc. And how long will it take to develop specific mechanisms and their practical implementation, since the question remains open about the possibilities of financing inclusive education? In addition, the question about cultivating a tolerant attitude towards people with disabilities in society arises, as well as approving the reform of the education system in order to promote inclusion. The survey of both parents raising children with special educational needs and teachers allowed researchers to specify the range of problems that are present today in the field of inclusive education.

Moreover, parents,, answering the question about the acceptable form of education for their children, preferred full-time education at an educational institution (58.1% of the total number of respondents). Almost every fifth respondent (18.9%) approves of individual form, which provides for a combination of homeschooling and attending individual classes and events in an educational institution; 7.6% of parents consider it appropriate to use part-time education, which implies individual distance learning training without visiting an educational institution.

In the context of children's diseases, the data obtained are ambiguous (see Tables 1, 2), because the parents' opinion about acceptable types and forms of education is determined, above all, by the actual state of health of the child and the individual dynamics of the disease. On the other hand, from a purely mathematical point of view, the law of small and large numbers works – trends can be traced only for those cases that repeat more often. And since individual diseases in children are quite rare, the opinion of their parents in this matter is not indicative.

Table 1. Distribution of respondents' answers to the question 'What kind of training, in your opinion, is the most acceptable for your child?' according to the type of child's illness, % of the total number of respondents

Childhood Disease / Acceptable Type of Education	Education in an ordinary school class or a group of pre-school educational institution	Inclusive form of education in the ordinary school class (kindergarten group)	Training in a separate / special class (group) for special children in the framework of a general education institution according to an adapted program	Special education for special children	Individual tuition at home or at school	Difficult to answer
ICP (infantile cerebral paralysis)	16.1	30.4	21.4	16.1	12.5	3.6
Autism Spectrum Disorders	18.8	21.9	35.9	9.4	12.5	1.6
Down syndrome	12.5	31.2	6.2	37.5	6.2	6.2
Cardiovascular diseases	40.6	3.1	18.8	21.9	9.4	6.2
Retardation	28.6	25.0	17.9	25.0	0	3.6
Kidney disease	80.0	20.0	0	0	0	0
Eye diseases	41.7	16.7	16.7	16.7	8.3	0
Epilepsy	23.1	15.4	15.4	30.8	7.7	7.7
Organic brain damage	21.7	13.0	17.4	26.1	17.4	4.3
Diseases of the musculoskeletal system	56.8	18.9	0	5.4	16.2	2.7
Hearing disorders	40.0	6.7	6.7	33.3	6.7	6.7
Other congenital malformations	35.9	28.2	7.7	17.9	5.1	5.1
Immunodeficiency	33.3	33.3	0	33.3	0	0
Diabetes	40.0	10.0	30.0	10.0	10.0	0
Burns	0	0	0	0	100	0
Oncological diseases	100.0	0	0	0	0	0

According to parents' estimates, the number of specialists who are engaged to work with their children in school or kindergarten include: psychologists (35.0%), social teachers (18.9%), doctors, physical therapy instructors (13.2%), correctional teachers (12.0%), speech therapists (11.8%), rehabilitation therapists (4.8%), psychotherapists (2.8%), and pedagogues for deaf-and-dumb (1.2%). In the case of non-attendance of

general education institutions or the lack of the required specialist, parents turn to other institutions where they receive almost equal services from psychologists (19.3%), social pedagogues (12.8%), doctors, physical therapy instructors (16, 0%), correctional teachers (12.1%), speech therapists (19.0%), rehabilitologists (13.7%). The difference in percentages regarding the availability of rehabilitation therapists requires special attention, which is explained by the fact that only 58.8% of parents surveyed attend rehabilitation centres with their children, while others, citing the lack of rehabilitation services due to the type of illness of the child, are forced to seek qualified medical assistance 'beyond the framework' Which, in its turn, is again the evidence of the lack of highly qualified professionals, and government support does not cover the cost of necessary treatment.

Table 2. Distribution of respondents' answers to the question 'In what form, in your opinion, is it best to train your child?' according to the type of child's illness, % of the total number of respondents

Childhood Disease / Acceptable Type of Education	Collective or group (all services are provided by teachers and psychologists of an educational institution directly in an educational institution), including an inclusive form	Individual (training at home with teachers of an educational institution in combination with attendance of classes, events in an educational institution)	Individual (on the recommendation of a doctor at home with teachers of an educational institution without attending classes and events in an educational institution)	Difficult to answer
ICP (infantile cerebral paralysis)	50.0	20.7	13.8	15.5
Autism Spectrum Disorders	58.5	23.1	7.7	10.8
Down syndrome	43.8	6.2	18.8	31.2
Cardiovascular diseases	62.5	15.6	3.1	18.8
Retardation	63.3	10.0	6.7	20.0
Kidney disease	80.0	20.0	0	0
Eye diseases	66.7	25.0	0	8.3
Epilepsy	53.8	30.8	7.7	7.7
Organic brain damage	47.8	26.1	4.3	21.7
Diseases of the musculoskeletal system	62.2	18.9	10.8	8.1
Hearing disorders	86.7	13.3	0	0
Other congenital malformations	56.4	12.8	2.6	28.2
Immunodeficiency	100.0	0	0	2
Diabetes	60.0	30.0	0	10.0
Burns	0	0	100.0	0
Oncological diseases	50.0	50.0	0	0

The analysis of the research data in the context of the types of children's diseases, has allowed us to make assumptions about the fact that in most cases the work

on inclusion is more successfully organized mainly for children with diseases of the supporting-motor apparatus, musculoskeletal system. To solve the issue of assisting children with psychosomatic diseases, with developmental delay, who sometimes do not even have disability status, is more difficult.

The main argument of parents who oppose the education of their children in ordinary classes, groups of educational institutions, is that these institutions are not adapted to the needs of their children. According to parents, in general education institutions there are no opportunities to receive assistance from a teacher's assistant, a teacher (22.2%), support from peers and their parents (32.6%), to move freely within the institution (38.6%), to attend groups for free, sections/clubs (42.9%), attend the room of psychological relief (49.1%).

In addition, the interviewed parents believe that the most unacceptable educational programs (13.6%), the lack of appropriate training or experience in working with special children among teachers and educators (12.8%) are not introduced (or created only partially) nor the relevant conditions of accessibility (10.0%), lack of adequate funding for the school (7.9%), a large number of children in school classes, kindergarten groups (7.4%).

The majority of parents, having to struggle difficult life circumstances, are shortsighted in their plans regarding the possibility of continuing their education for their children. Only a third of the respondents (31.8%) answered the question about the prospects for their children to receive vocational education in the future. Among them, 4.0% said that their children have the ability and opportunity to continue their education in higher education, 12.0% - in vocational schools, college, and 4.0% - in labour workshops. The remaining 80% only suggested that such a possibility exists, but they have no specific plans, therefore, they are not definitively determined in their answers.

An important type of assistance to families with children with special educational needs is socialization, aimed at expanding communication and organizing leisure activities. Only 54.3% of respondents answered the question about the possibility of their children visiting out-of-school sports sections and clubs, almost a quarter of them do not know about the possibility of visiting such institutions, the other half know, but do not do that. In general, only every tenth adult tries to organize leisure of his child, however, the range of reasons for such passivity is quite diverse - from financial insolvency, physical condition of a child to psychological unwillingness of parents to adapt a child in society.

Only 70.6% of respondents are concerned about a similar picture of the informants' answers about attending cultural and festive events, theatres, cinemas, concerts, master classes, excursions, etc. However, we note that the majority of parents were interviewed precisely in rehabilitation centres, where they are involved, in particular, in the sphere of leisure activities. Those who attend leisure facilities on their own turned out to be only 1.6% of the respondents. Most parents

raising children with disabilities organize leisure activities with (or at) rehabilitation centre(s) or by an invitation of public organizations, charitable foundations, etc., however, this is done mainly at their own expense.

As we can see, the actual implementation of certain guarantees by law is associated with a number of difficulties, one of the most significant of which is the public passivity of the parents themselves raising special children. And this is not their fault directly, the problem is the existence of social distance in any post-Soviet society between healthy people and people with disabilities as a result of the implementation of compensatory state social policy until 1990 in order to develop inclusion and the actual encouragement of parents 'to fight' for the rights of their special children, are directly related to the possibility of bilateral interagency-governmental communication and media activities.

For inclusion to be successful, parents raising children with disabilities and children with disorders should provide complete information about the condition of their children, their basic needs, and public services, in turn, should not ignore their obligations to inform about their rights, opportunities, and meet, if not all, most of the needs of special children.

It is alarming that, according to the estimates of informants whose children mostly visit territorial rehabilitation centres, the main source of information about the types of state social assistance are social workers, doctors (23.7%), friends, acquaintances (23.6%), social networks, forums, chat rooms (17.3%), articles, messages on the Internet (16.3%). What can be said about the parents whose children are not able to attend rehabilitation centres for various reasons? In fact, they remain cut off from the world, remaining alone with their problems. Representatives of public organizations are ready to take on some of the concerns related to informing, and this could be a way out, since 33.0% of the parents surveyed are eager to learn more about their activities, 10.9% would like to take part in their events; 5.7% even expressed a desire to become their members, thereby expressing their active social position. The mass media, in turn, must step up work on cultivating a tolerant attitude towards people with disabilities, approving the reform of the education system with a view to developing inclusion, through the implementation of explanatory work on the need to improve an accessible and comfortable life environment in all respects for all citizens without any exception.

These and other questions remain open and require further deeper study, conducting a full-scale representative study that would justify recommendations regarding the potentially possible ways to improve social policy in relation to both children with disabilities and their parents.

The representatives of the expert group, answering the question about the acceptable types and forms of education for children with disabilities, preferred to study in specialized institutions for special children (60% of respondents), only 10% consider inclusion the most acceptable form of education in this case, another

20% agree that children with disabilities should be trained in specialized classes (groups) established in general education schools. At the same time, the majority of experts (60%) approve of an individual form of education, which provides for a combination of home schooling and attending individual classes and events in an educational institution. 30% of respondents consider it appropriate to use part-time education, which implies individual distance learning without visiting an educational institution. Only 10% of respondents advocated collective education for children with disabilities, which implies that all services are provided by teachers and psychologists in an educational institution (including inclusive education).

The comparison of answers about the most appropriate form of training and the sphere of employment of experts represents the greatest interest. Thus, 75% of those who support the education of children with disabilities or special needs in educational institutions (inclusive education or training in a specialized group in a general education institution) are employees of specialized boarding schools. Whereas the majority of supporters of isolated education for such children are teachers of secondary schools. This state of affairs is due, in our opinion, to the fact that for a long time there was a social distance between healthy people and people with disabilities, created by the policy of isolating children with disabilities in specialized educational, medical, sanatorium and preventive institutions. Teachers of secondary schools simply fear that they will be incompetent in solving certain tasks and difficulties they may face.

The main argument of teachers, who oppose the education of children with disabilities in ordinary classes, groups of educational institutions, as well as the parents of such children, is that these institutions are not adapted to the needs of children with health problems. According to the teachers, in general education institutions there is no opportunity to receive assistance from a teacher's assistant, a tutor (90%), support from peers and their parents (80%), to take part in holidays, competitions, contests (70%), to move freely within the institution (70%), schools lack the necessary equipment for training (50%).

In addition, the interviewed experts believe that the most difficult obstacles to obtain high quality education for children with disabilities are the missing (or only partially created) relevant conditions of access to education (70%), lack of adequate funding for an educational institution (50%), a large number of children in school classes (50%).

According to teachers of general educational institutions, the specialists staff engaged in working with children with disabilities in their school include social teachers (90%), psychologists (80%), and speech therapists (50%). Only some of the experts noted (2.5%) that their school has the opportunity to invite a rehabilitation specialist or a pathologist from other institutions. The employees of specialized educational institutions responded that children with disabilities in their institutions have the opportunity to receive qualified assistance from all the necessary specialists,

regardless of whether they are in this institution or they need to be invited.

The carried out analysis of the possibilities for positive socialization of children with disabilities and their adaptation to communication with ordinary children showed that, in general education institutions, apart from occasional participating in sports competitions (from time to time – 30% of the surveyed experts) and visiting a theatre or class excursions on their own expense (50%), such opportunities are absent. The opportunity for children with disabilities to attend out-of-school sports clubs and circles is entirely the responsibility of their parents; the school, as a rule, does not deal with such issues (one might say, is not interested). Considering the fact that parents of children with disabilities, as can be seen from the survey data presented above, are not particularly engaged in organizing socially oriented leisure of their children for various reasons, such indifference on the part of general education employees becomes understandable. First of all, parents should insist on the usefulness of their special children and the protection of their rights.

Among the primary problems associated with children with disabilities, experts named the lack of teacher assistants (40%) and the need to create appropriate conditions in schools (ramps, toilet rooms, the ability to move around the floors and provide the necessary educational materials) – 30%.

5 Discussion and conclusions

An analysis of the results of the conducted research suggests that the opinions of teachers and parents regarding the possibility of integrating children with special educational needs in secondary schools are somewhat different. The fact of the architectural inaccessibility of most school buildings is important. Furthermore, almost a third of the interviewed parents, who repeatedly encounter the bureaucratic system of social relations, acutely experience the cases of neglecting their children and therefore more negatively perceive the idea of integration.

Drawing analogies with the research data conducted by the Central Institute for Disability Expertise and Labour Organization of Persons with Disabilities in 1990-1991 [19, 20], members of the Department of Social and Economic Systems and Social Policy of the Higher School of Economics Research Institute in 2004 and 2008 [13], we can conclude that, of course, attitudes towards people with disabilities in the post-Soviet countries is changing for the better. However, the social distance between healthy children and children with health problems is still quite noticeable today.

The first steps that need to be taken to solve the existing problems should be aimed at: regulating the interaction of state institutions regarding the collection and synthesis of data on the number of children with disabilities and their needs; the creation of an effective system of early intervention for the timely detection of deviations in the development of the child, coordinating work with their parents; development of effective control mechanisms to reduce doctoral (medical) errors; optimization of the work of institutions providing

medical and social rehabilitation for special children, their parents and other family members; training teachers, their assistants, parents in order to teach them to work with special children in an inclusive education. The most important thing in this regard is the organization of information and educational work of the media, aimed at forming public opinion with targeted at destroying the usual stereotypes about people with disabilities, in particular, children with disabilities. In the context of interagency cooperation, increased transparency of control by public organizations, by parents raising special children, and by society as a whole, inclusive education will definitely develop, following international experience in line with the struggle for the civil rights of people with disabilities. The success of the further implementation of the social integration strategy fully and totally depends on the development of appropriate mechanisms for the implementation of legislative initiatives.

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