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SCIENTIFIC FOUNDATIONS FOR DEVELOPING SOCIAL ADAPTATION AND SOCIAL INTERACTION IN CHILDREN WITH INTELLECTUAL DISABILITIES (OLIGOPHRENIA)

Abstract: This scientific article analyzes the theoretical, methodological, and practical foundations for developing social adaptation and social interaction in children with intellectual disabilities (oligophrenia). The study examines the structure of social competence, psychological and pedagogical characteristics of social maladaptation, and effective corrective-developmental technologies used in special education. A stage-based pedagogical model for the formation of social skills is scientifically substantiated. The importance of an integrative approach combining pedagogical, psychological, and social support is emphasized.

Keywords: intellectual disability, oligophrenia, social adaptation, social interaction, social competence, corrective education, inclusive integration.

INTRODUCTION

One of the priority tasks of modern special pedagogy is preparing children with intellectual disabilities for independent life and successful integration into society. Children with oligophrenia experience limitations in cognitive development, abstract thinking, emotional-volitional regulation, and communicative abilities. These characteristics significantly complicate their process of social adaptation and interaction.

Social adaptation is understood as the process through which an individual adjusts to social norms, values, and expectations, acquires social roles, and develops appropriate behavioral strategies. For children with intellectual disabilities, this process requires systematic and scientifically grounded pedagogical support.

I. THEORETICAL FOUNDATIONS OF SOCIAL ADAPTATION

In psychological and pedagogical research, social adaptation is viewed as a multidimensional construct that includes communicative competence, behavioral self-regulation, independence in daily living, and participation in educational and labor activities. In children with intellectual disabilities, these components develop unevenly and often require targeted intervention.

The structure of social competence in children with oligophrenia includes:

(1) communicative skills;

(2) understanding and acceptance of social norms;

(3) emotional responsiveness;

4) self-care and daily living skills;

(5) cooperative activity skills.

Insufficient development of these components often leads to social isolation, dependency, and maladaptive behavior.

II. CHARACTERISTICS OF SOCIAL INTERACTION IN CHILDREN WITH OLIGOPHRENIA

Due to limited intellectual functioning, children with oligophrenia may experience difficulties in understanding social situations, interpreting verbal and non-verbal cues, and maintaining stable peer relationships. Their speech limitations and reduced vocabulary further complicate interaction processes.

Common challenges in social interaction include low initiative in communication, impulsive emotional reactions, dependence on adults, and difficulty adapting to new social environments. These factors necessitate structured corrective programs aimed at forming socially acceptable behavior patterns.

III. PEDAGOGICAL TECHNOLOGIES FOR DEVELOPING SOCIAL SKILLS

Effective development of social adaptation in special education institutions involves the application of evidence-based pedagogical technologies. These include role-playing activities, situational modeling, social stories, cooperative learning strategies, and elements of occupational therapy.

Role-playing enables children to rehearse real-life social scenarios and practice appropriate responses. Social stories provide structured explanations of social norms and expected behaviors. Visual supports and modeling techniques enhance comprehension and retention of social rules.

Group training sessions promote peer interaction and cooperation, while labor-oriented activities contribute to responsibility, independence, and self-confidence.

IV. STAGE-BASED PEDAGOGICAL MODEL

The development of social adaptation should be implemented through a systematic model consisting of four stages:

1) Diagnostic stage – assessment of the child's social competence level;

2) Planning stage – development of an individualized intervention program;

3) Corrective-developmental stage – implementation of structured social skill training;

4) Monitoring and evaluation stage – assessment of progress and adjustment of strategies.

This model is based on an integrative approach involving collaboration among teachers, psychologists, speech therapists, and parents. Interdisciplinary cooperation ensures consistency and continuity of developmental support.

V. PRACTICAL IMPLICATIONS AND EFFECTIVENESS

Empirical studies demonstrate that systematic social skills training significantly improves communicative competence, behavioral regulation, and adaptive functioning in children with intellectual disabilities. The effectiveness of intervention depends on early identification, individualized programming, and regular monitoring.

Inclusive practices also contribute to improved social outcomes when adequate support systems are established. The development of adaptive behavior enhances independence and

reduces long-term dependency on social services.

CONCLUSION

The development of social adaptation and social interaction in children with intellectual disabilities requires a scientifically grounded and systematically organized pedagogical process. The integration of corrective education, structured social modeling, and interdisciplinary collaboration ensures positive developmental dynamics. Future research should focus on expanding innovative technologies and evaluating long-term outcomes of social adaptation programs.

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