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**VITALITY AS AN INDICATOR OF THE LIFE QUALITY OF
PEOPLE WITH DISABILITIES**

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Abstract

The study of the vitality of students with disabilities is presented in the article. The growing disability of the population, the expansion of inclusive practices in education actualize monitoring the quality of life of students with disabilities as an integral characteristic of their health and well-being in the educational space of the university. The authors consider the vitality of students as a condition for a positive subjective assessment of life and a resource for positive changes. The methods used by the authors to study vital forces made it possible to get an idea of the quality of interaction between different subjects of educational relations. Vitality is studied as the emotional, mental and physical state of a person. The following empirical indicators are distinguished: respondents' self-esteem of their vital energy, self-esteem of vital energy during adaptation at a university, locus of control, level of professional competencies formation. Among the significant factors that reduce the level of adaptability of students with disabilities at the university, the following are highlighted: difficulties in moving and orienting in the university, the presence of ambivalence of expectations from interaction with classmates, external expectations from the administration and teachers. Based on the results of the study, the authors proposed measures aimed at supporting the adaptation of students with disabilities in the educational environment as part of inclusive technologies at the university.

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Keywords: Students with disabilities, theory of vitality, students' quality of life, inclusive education, accessible educational environment of the university.



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1. Introduction

Through the ratification of the Convention on the Rights of Persons with Disabilities (2006) and the constant development of the legislative framework for ensuring equal opportunities, the Russian state guarantees the equality of rights and freedom of citizens regardless of disability due to their state of health. The international classification of functioning, disability and health defines *disability* of people as the so-called umbrella term for violations, restrictions in actions or participation that reduce the level and quality of their life, creating a variety of “barriers” for full inclusion in the social environment (2001). The conceptual apparatus used in the article includes definitions in accordance with the Federal Law of the Russian Federation “On Social Protection of Persons with Disabilities” (1995) and the Federal Law of the Russian Federation “On Education in the Russian Federation” (2012):

- a disabled person is a person who has a health disorder with persistent dysfunction of the body due to diseases, the consequences of injuries or defects, leading to a limitation of life and causing the need for social protection;
- limitation of life is a complete or partial loss by a person of his ability or ability to self-service, to move independently, navigate, communicate, control his behavior, learn and engage in labor activities. Depending on the degree of dysfunction of the body's functions, persons with disabilities are identified with a disability group, and for people under the age of 18, the category of “disabled child” is established. Recognition of a person as disabled is carried out by the federal institution of medical and social expertise. The procedure and conditions for recognizing a person as disabled are established by the Government of the Russian Federation;
- a student with disabilities is an individual who has deficiencies in physical and (or) psychological development, is confirmed by the psychological, medical and pedagogical commission and prevents the education without creating special conditions;
- inclusive education is ensuring equal access to education for all students, taking into account the diversity of special educational needs and individual opportunities;
- adapted educational program is an educational program adapted for the training of persons with disabilities taking into account the peculiarities of their psychophysical development, individual capabilities and, if necessary, providing correction of developmental disorders and social adaptation of these persons.

The analysis of the concepts of "health", "well-being", "quality of life", "vitality" shows their interdependence, and such an indicator as "quality of life" acts as an integral characteristic of health - a key category in the field of vital power and vitality. Unlike the standard of living, which is measured in objective economic indicators, the quality of life reflects the subjective assessment by people of the level of satisfaction of their needs in various spheres of life. A number of researchers (Orlov & Gilyarevsky, 1992) characterize the quality of life as the ability of an individual to function in society in accordance with his position and receive satisfaction from life. A detailed description of the research paradigm and the concept of quality of life were provided by experts from the Interethnic Study of Quality of Life (Novik et al., 2002). One of the fundamental provisions of the concept is the postulate that the quality of life is a universal

criterion for assessing the state of the basic functions of the body: physical, psychological, social and spiritual. The quality of life depends on many conditions: income level, freedom of movement, environmental quality, position in the family and team, satisfaction with one's labor and educational activities, and health status (Novik & Ionova, 2002). We consider the quality of life as an integral characteristic of health (Artyukhov et al., 2017; Koloskova, 2018; Zhilina & Kovalenko, 2019).

According to the study of the quality of life of student youth in Krasnoyarsk conducted in 2004 (more than 2,000 students from five universities of the city of various profiles and departmental affiliations took part in the research), the overall quality of life of which is by 20-44% (depending on the name scales for assessing the quality of life) lower than the quality of life of young people of the same age in St. Petersburg. Moreover, the smallest differences (20%) were observed on the "Vitality" scale, that is, the level of sensation of vigor and energy. Despite the differences in the quality of life indicators, young people in Krasnoyarsk subjectively generally positively assessed their well-being and health status (which in only 30% of the cases corresponded to objective indicators) and their life prospects. Thus, the quality of life of young people in different regions is closest in terms of vitality, that is, vital forces (Gorbach & Lisnyak, 2012). This peculiar characteristic allows considering the vitality (vital forces, vital power) of youth as a condition for a positive subjective assessment of the existence of a young person, which is a resource for positive changes.

In the framework of the sociology of vitalism developed by Grigoriev (2001), human life energy comes down to the ability of people to reproduce and improve their lives by individually-personal and organizationally collective means. Thus, the vital forces are the most important resource of the individual; they underlie his social well-being, determine the level of social optimism and satisfaction with life. They affect the ability to solve life problems arising as a result of various circumstances and form a special life position that affects not only the result of activities (overcoming barriers), but also the world view.

2. Problem Statement

There is a constant increase in disability indicators among the world's population, in Russia, and in Krasnoyarsk Region. 11 197 175 disabled people were officially registered in the Russian Federation on the 1st of February, 2020. 485 336 people from 18 to 30 years old are among them. According to the regional branch of the Superannuation Fund of Krasnoyarsk region, on the 1st of February, 2020, 181 468 people with disabilities were recorded, of these 9 853 people were from 18 to 30 years old, as of January 1, 2019, 193 934 disabled people were registered, including 180 808 adults, 13 126 children, and in 2018 there were 189 397 people with disabilities, including 176 524 adults, 12 873 children (Federal Register of Disabled People, 2020).

The planning of rehabilitation technologies is influenced by the analysis of the degree and structure of disabilities of disabled people. In 2019, the share of people with III disability group still prevails in the structure of primary disability (44.2%) and is gradually increasing; the proportion of people of II disability group is reduced; the proportion of people of I disability group remains at the same level over the past 3 years. Naturally, people with disabilities of groups II and III have more opportunities for inclusion in social relations. The positive dynamics of the effectiveness of the rehabilitation technologies used by various entities is evidenced by the statistics provided by the Federal State Institution "ITU GB in Krasnoyarsk

region” of the Ministry of Labor of Russia - full rehabilitation: 2017 - 2.5%, 2018 - 2.4%, 2019 - 2.2%; partial rehabilitation: 2017 - 8.2%, 2018 - 9.2%, 2019 - 10.3%; total rehabilitation: 2017 - 6.2%, 2018 - 6.5%, 2019 - 6.5% (Main Bureau of Medical and Social Expertise in Krasnoyarsk region, 2020).

The formation of social relations that take into account the diversity and dynamics of the phenomenon under discussion is necessary for a high quality of life and social well-being of people with disabilities. Education is a significant factor and resource that contributes to improving the quality of life of a person in general and persons with disabilities in particular. Therefore, the state attaches paramount importance to ensuring the accessibility of all levels of education for people with disabilities, to the professional development of young people with disabilities. The key document that guides various actors to create a barrier-free social environment is the state program of the Russian Federation “Accessible Environment” for 2011-2020. Educational organizations are included in the list of key social areas in which an accessible environment should be organized in accordance with Order No. 1309 of the Ministry of Education and Science of Russia dated November 9, 2015 “On Approving the Procedure for Ensuring Accessibility Conditions for Disabled Facilities and Educational Services and Providing Education they need and give a hand if it is necessary”.

Adaptation to new life circumstances caused by limited health opportunities can occur in the form of a passive adaptation of the needs of the individual to the real circumstances of the existing situation or be active in nature as a focused interaction of the individual and the environment. We can talk about the impact on the assessment of both the characteristics of the subjects, and their correlation with the social position of the evaluating subject itself. So, apparently, serious differences will be observed if potential population groups include pensioners, people with disabilities, students, etc. (Vorotnikova et al., 2010). The inclusion in the practice of higher education of technologies appropriate to the needs of students with disabilities can improve their quality of life and vitality, the ability to overcome difficulties, reproduce and improve the relevant aspects of their lives.

The study of the vitality of students with disabilities reflects the dynamics of their quality of life in connection with admission to the university and allows identifying their well-being in the process of adapting to the conditions of educational activity, expectations from higher professional education, and the further trajectory of professional activity. The subjectivity of assessments is especially important because it reflects the specifics of differences and allows highlighting the different clusters in the sensations of the level of well-being of youth with disabilities and composing a comprehensive picture of their moods and conditions when they are included in higher education practices. In this case, a subjective assessment of vitality allows getting an idea about the quality of interaction between different subjects of educational relations (students, teachers, representatives of the university administration), which makes it possible to correct them, as well as the formation and implementation of the necessary methods and technologies conducive to successful resocialization of students with disabilities in the educational environment, and their professional orientation.

3. Research Questions

Despite the fact that state programs are aimed at creating a barrier-free social environment that allows being used regardless of the limitations people have on their life, at the moment the results of studies

on the availability of priority infrastructure and services for this category of citizens in different regions of the Russian Federation are unsatisfactory, about as evidenced by the data of numerous studies (N. F. Basov, A.N. Bolnitskaya, Yu. Yu. Bocharova, E.K. Naberushkina, P.D. Pavlyonok, M. V. Firsov, L. N. Fakhradova, T. V. Furyaeva, E. I. Kholostova, A. A. Shabunova, E. R. Yarskaya-Smirnova, A. V. Zharova, O. V. Logunova, I.G. Sinkovskaya and others) and, importantly, the public opinion of people with disabilities (as cited in Furyaeva, 2017; Sinkovskaya & Logunova, 2019). Information on the accessibility of higher professional education for persons with disabilities is presented and is constantly updated on the portal “Inclusive education.rf”. In accordance with the tasks set in the state program of the Russian Federation “Accessible environment”, by the end of 2020, educational institutions should basically have created an accessible environment for students with disabilities.

The development of rehabilitation technologies will continue to stimulate this process in various educational institutions with different intensities. According to the unanimous opinion expressed by scientists and practitioners at scientific and practical forums, an accessible environment is not only the technical side of the adaptation of society; it is also the possibility of inclusion in social relations in general. In an educational organization, these concepts are united by the term “inclusive education”. The inclusion process involves a subject-subject relationship; therefore, the focus of education is monitoring the involvement of students with disabilities in social relations.

In this context, vitality was studied as the emotional, mental and physical condition of a person, his ability to set significant goals and perform certain social actions, especially those related to the implementation of active actions to overcome difficulties in the formation of professional competencies. The 1st and 2nd year students with disabilities studying a bachelor degree course at universities of Krasnoyarsk were examined. The respondents' vitality was studied as a result of adaptation in the educational space and as a factor influencing the formation of educational and professional competencies. The study involved 52 respondents (22 women and 30 men) with II and III disability groups and disabilities of varying degrees. The age category of respondents was from 17 to 35 years old.

4. Purpose of the Study

To achieve the goal, empirical indicators were identified such as: respondents' self-esteem of their life energy (in connection with entering a university), self-esteem of life energy during adaptation at a university (development of an educational program, interaction with fellow students, faculty, university administration), locus of control, the level of formation of professional competencies.

5. Research Methods

In the research process, methods of semi-formalized interviews, questionnaires were used. To study respondents' self-esteem of their vitality, the questionnaire “Emotional orientation of the personality” developed by Nemirovsky (2008) in the framework of post-non-classical sociology (universal approach) was used.

6. Findings

The limited volume of the article allows us to present the main results of the study. Respondents' self-esteem of their vital energy included a number of indicators: health assessment, emotional assessment of the state of happiness, self-esteem of the level of internal strength, interpersonal interaction as a resource of vitality, level of realization of vitality. The basis of vitality is health: 51% of respondents rated it "satisfactory", 39% of respondents rated it "unsatisfactory", and 10% of respondents rated it "good". A significant information indicator of the manifestation of vitality is an emotional assessment of the state of happiness. A high assessment of the subjective feeling of happiness indicates a high level of vitality and the absence of serious obstacles to their implementation, while the results reflected a change in the index of happiness for most respondents (about 70%) from the indicators "not very happy" to "rather happy" and "very happy" in connection with admission to the university. Distribution of answers to the question "What is your level of internal strength, energy, readiness for active action?" indicates that a little more than half of the respondents assess the level of internal strength in the range of judgments "I don't observe special energy, but I want to change the situation" - "I feel calm confidence in my abilities, quite satisfied with my form". About 12% of respondents "feel great, have new ideas, plans," and just over 30% of respondents report a lack of strength, fatigue, lack of energy, unwillingness to do anything, and helplessness.

Assessment of the number and depth of interpersonal interactions of the individual, as a life force resource, showed that the main sources that feed the life force are the family-household, friendly environment and the circle of people with close social status. It is significant that the majority of respondents (about 70%) don't assess classmates as a reference group, increasing their vitality. The noted reasons are their estrangement or close, intrusive attention.

The level of realization of vitality was assessed through indicators of satisfaction with life (about 60%) and confidence in their future (15% of "rather confident" and 45% of "doubters"). From this it can be concluded that there is a hidden potential of vitality, which will be aimed at getting out of any dysfunctional situation.

The term "locus of control" was introduced into scientific use by the American psychologist D. Rotter and means a certain property of an individual to explain his successes and failures in activity by external circumstances (externality), or by internal factors (internality). In our study, the locus of control was considered through the respondent's assessment of the possibility of improving his life either as a result of his own efforts, or through external assistance. The results revealed the ambivalence of such estimates, which suggests the presence of both an external and an internal locus of control at the verbal level of mass consciousness. At the same time, externality is manifested in placing hopes on improving the quality of life at different levels of the statehood, and in relation to the university - on its leadership.

The level of adaptability of students with disabilities and limited health abilities at the university is assessed by them as low for the following reasons: difficulties in moving and orienting in the university space, difficulties in interacting with classmates (having ambivalence of expectations from it), unjustified externalities of expectations from the administration and teachers (the dominance of type judgments: "They should always meet me," "must understand my difficulties," "must reduce the requirements for academic performance"), which are perceived by respondents as factors that lower the level of vitality.

The results of the respondents' assessment of the formation of professional competencies revealed

that the second-year students have an increase in anxiety in relation to the first year students due to the difficulties in mastering the educational program and the expected job prospects.

The use of correlation and factor analysis made it possible to distinguish several clusters of respondents depending on their vitality.

The first group is a positive assessment of the level of vitality (“I feel a surge of strength, inspiration” - “I feel great, new ideas”) correlates with the internal locus of control, satisfaction from the team, mastery of the material and conviction in further employment (15%).

The second group is a neutral assessment of the level of vitality (“I don’t see much energy, but I want to change the situation”), it is characterized by the ambivalence of the locus of control, generally favorable relations both in the team and with teachers, difficulties in mastering the material and doubts about employment (50 %).

The third group is a low assessment of the level of vitality (“I feel anger, irritation in relation to the world around me” - “I feel deep helplessness”), it is associated with an external locus of control, difficulties in interacting at a university, mastering a study program, and doubts about further employment (30%).

Among the respondents' proposals on creating a comfortable educational environment, students with disabilities paid special attention to the need to create an escort service at the university, as well as the possibility of creating an individual educational path for the successful development of educational competencies, internships, and further employment. In this regard, social values that determine the cognitive work of both the student and the teacher with the information received become the basis for the formation of the structure of their value-loaded categorical landmarks (Kudashov et al., 2017).

The individual educational trajectory proposed by the respondents is one of the models of educational activity and meets the modern requirements of the time. It is currently actively used by participants in the educational process at all levels: starting from a preschool institution and ending with the institution of professional training and retraining of specialists. The works of many researchers are devoted to its development and description; among classics, for example, O. A. Abdullin and P. V. Sysoeva, A. V. Khutorsky and others. Among the distinguishing positive features of the individual educational trajectory the following features can be distinguished: firstly, this is an individual path in education, which is developed on the basis of the subject-subject approach, where the student and his entourage work together; secondly, the trajectory is built taking into account the motivation, abilities, psychical, psychological and physiological characteristics of students; thirdly, as resources used in the implementation of the trajectory, the emphasis is on socio-economic and temporal capabilities of the subject of the educational process; fourthly, this will contribute to an effective process of socialization of younger generations, which, first of all, is characterized by orientation to peers close in age, social and professional experience (Sysoev, 2014).

7. Conclusion

The results of the study allow the following conclusion.

The study revealed an increase in the index of happiness and a surge in the vital energy of people with disabilities when entering a university. However, due to the barriers manifested in the organization of the educational process, inadequate adaptation of the university space to the needs of students with

disabilities, inclusion in the educational and spatial environment of the university adversely affects the students' social well-being, lowering the level of vitality. In the formation of the social well-being of students with disabilities, frustrations of interpersonal interaction with the subjects of the educational process play a significant role.

It can be argued that the external locus of control provokes the formation of a dependent position in students with disabilities, expressed in the need for positive discrimination measures at the university, and, at the same time, reduces the orientation toward independent overcoming of difficulties encountered in the process of training and further employment in the specialty.

In connection with the above, it is advisable to implement the following activities at the university, aimed at developing independence skills, developing communication abilities, as well as improving the general educational and general cultural level of the participants in the educational process:

- 1) psychological support and counseling for students with disabilities and limited health abilities in order to develop responsibility for various areas of their lives (the formation of an internal locus of control);
- 2) the development and implementation of an individual educational path for each student with a disability and limited health abilities, taking into account the level of formation of their educational and professional competencies;
- 3) psychological support and counseling for teachers and student activists with the aim of developing communication skills when interacting with students with disabilities and limited health abilities.

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