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# Types of Socio-psychological Competence of Adolescents with Disabilities: from Adaptability to Maladaptability

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# Abstract

Introduction. In the conditions of modern digital society, the research of sociopsychological competence of adolescents with disabilities (AWD) is relevant. Sociopsychological competence determines the variable ability of a personality to adapt in interpersonal interaction. The novelty of the work lies in the development of a typology of socio-psychological competence of adolescents with disabilities taking into account the properties and degree of their adaptability. Methods. Adolescents with mild mental retardation (n = 84), adolescents with visual impairment (visually impaired) (n = 70) and adolescents with hearing impairment (hearing impaired) (n = 60) were recruited as respondents (n = 294). The control group included adolescents with normal development (n = 80). The studied parameters of socio-psychological competence - directions and types of reactions in a frustrating situation, self-esteem and level of pretensions, types of behaviour, social interest and others - were assessed by the method of expert evaluations and the projective method. The methods of factor and cluster analysis were used for statistical data processing. Results. On the basis of mathematical and statistical processing of the results of the empirical study, a typology of socio-psychological competence of adolescents was created taking into account the characteristics of adaptability-maladaptability of personality. The proposed

typology includes four different types of competence: (1) adaptive type, (2) partially adaptive, (3) partially maladaptive, and (4) maladaptive type. **Discussion.** As a result of the study, it was proved that groups of adolescents with disabilities are heterogeneous in terms of the degree of adaptability-maladaptability, the presence and expression of personal resources, and the characteristics of social and psychological competence of adolescents in these groups are largely determined by the potential safety of the intellectual sphere in case of sensory disorders and intellectual weakness in case of mental retardation.

## Keywords

socio-psychological competence, adaptability-maladaptability, adolescents with disabilities

## For citation

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# Introduction

Modernisation processes, covering the social reality of modern society and occurring in all its spheres, actualise the requirements to the process and the result of interaction of the individual with the social environment. Significant changes arising in the interaction of a person with the external world inevitably lead to a state of instability, triggering the processes of adaptation and changes in system parameters.

For modern children and adolescents, the process of adaptation to the social world is burdened by the conditions of digital society, which actualises the need to study the communicative features of the younger generation at the present stage. Intensification of communication with its shift towards virtual communication, limitation of real communication due to displacement by other activities (including the Internet) leads to the lack of social experience and the emergence of its specificity, weakening the ability of the individual to social interaction - social and psychological competence (SPC).

Interest in the study of personality SPC is due to the significance of this construct for interaction with the social world, for the process of personal integration into the social system. Social-psychological competence, including its emotional component, contributes to a positive attitude towards oneself, reducing anxiety, increasing adaptation

to school and to society in general, as noted in foreign studies (Corcoran, Cheung, Kim & Xie, 2017; Mella et al., 2021).

There has been a steady interest in the study of the phenomenon of SPC for more than sixty years, but there is no identity in the authors' views on the essence and structure of this phenomenon. Despite the lack of identity, there is a similarity in the general focus of SPC - on the effectiveness of social or interpersonal interaction (Kvitchastny, 2012; Koblyanskaya, 1995; Minkina, 2005). This allows us to consider SPC as an ability that provides an individual with the ability to adapt, flexibly change his/her behaviour, and realise himself/herself in society, i.e. it characterises adaptability.

In foreign psychology, the concept of "social competence" is more often used as a concept that includes the ability of an individual to interact with other people. F. Hellmann (1963) considered this phenomenon through the prism of ideas of relativistic approach, emphasising the constant changeability of reality and denial of relative stability of things and phenomena.

The definition of social competence by J. Bowlby, who interprets this phenomenon as "a positive sense of self-efficacy in achieving socially significant goals" (1973, p. 82), allowed followers to structure their studies taking into account the variability of these goals and subject areas: the feeling of sufficient comfort in social situations, development and maintenance of good relations with other people were also taken into account (Semrud-Clikeman, 2007; Zimmer, Ullrich & Ullrich de Muynk, 1978).

Social psychological or social competence includes a complex set of social skills involving the ability to assess perspectives, understand the social environment, and initiate positive social interactions (Milligan, PhillSPC & Morgan, 2016).

In domestic psychology, the problem of SPC is widely presented within the framework of the systemic approach, in which, as a rule, a triadic model of cognitive, emotional (or expressive) and behavioural (or interactive) characteristics is considered (Koblyanskaya, 1995; Koroleva, 2008).

In the present study, the triadic variant of the phenomenon structure presented in the author's works (Koroleva, 2008), framed by personal-resource organisation and related to the adaptability of the individual, was taken as the structure of SPC.

The concept of adaptability is interpreted by researchers in a variety of ways: as the ability to internal self-organisation, as a result of activity, as variability of behaviour in accordance with role expectations, but more often as an innate or acquired ability to adapt to the whole variety of life in any conditions (Mikhailova, 2012; Nalchajian, 1988). Social and psychological adaptability is interpreted as the ability of an individual to adapt in interpersonal interaction, fulfil social roles, while maladaptability implies a decrease in the ability to adapt, characterised by possible difficulties in adapting a person to the social environment.

At the socio-psychological level, the dyad "adaptability-maladaptability" determines the variable ability to adapt in interpersonal interaction. Using specific models of socio-psychological competence based on the dyad characteristics of "adaptability-

maladaptability", it is possible to determine and predict the success of personality adaptation in different conditions and at different stages of development.

The most important factors that reduce the quality of personality adaptability in society are the conditions of abnormal development of personality, which largely determine the deficit or fullness of a person's social skills.

According to modern research, the assessment of SPC in persons with disabilities can be carried out at the stage of preschool childhood. Thus, Kurienkova A. (2020), distinguishing socio-motivational, socio-cognitive, socio-activity, socio-personal components in the structure of SPC, notes that already a preschooler with intellectual disability should have knowledge about himself and socially significant phenomena, ideas about peers and relatives. However, the achievement of SPC is associated with a certain level of maturity of the personality, the development of its self-consciousness, which draws our attention to the adolescent stage, which is rightly considered sensory for the development of personal constructs.

Domestic educational standards and adapted educational programmes for children with disabilities provide not only for the formation of a system of knowledge and skills, but also social competence in general (Borisova, 2018), necessary for successful social interaction.

The analysis of specific secondary and tertiary symptoms in the structure of the defect in different developmental disorders allows us to discover common characteristics that disrupt social and interpersonal interaction of the individual (Boykov, 2005; Vygotsky, 1983; Korobeinikov, 2002; Mallaev, Omarova, Bazhukova, 2009).

The **aim of the study** is to theoretically justify and develop a typology of sociopsychological competence of adolescents with disabilities, which allows determining and predicting the success of their social adaptation.

# Methods

To test these assumptions, we conducted a study involving four groups of 12-15 year old adolescents (n = 294):

- All subjects in experimental group 1 have *mild mental retardation* and are taught according to version 1 of the adapted educational programme (n = 84);
- Experimental group 2 consisted of *visually impaired adolescents* (n = 70);
- Experimental group 3 consisted of *hearing-impaired adolescents* (n = 60);
- The control group consisted of adolescents with normative development (n = 80).

All subjects in the experimental groups study in special remedial schools, often boarding schools, but live in families. The groups are homogeneous by gender and similar in social characteristics. Taking into account the psychological characteristics of

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the respondents of the experimental groups (infantile, insufficient reflexivity, reduced criticality, etc.), most of the methods used belong to the method of expert evaluations. The exceptions were the "Frustration Tolerance Test by S. Rosenzweig" and "Frustration Tolerance Test by S. Rosenzweig". "Rosenzweig" and "Symbolic tasks to identify the "Social Self", which are based on the projective method. The methods used are presented in Table 1.

The development of the SPC typology required a number of standard mathematical and statistical procedures with empirical data using factor and cluster analyses.

# Results

In order to generalise and reduce the large amount of empirical data, we performed the procedure of their factorisation using the principal component method with Varimax rotation, which allowed us to reduce the techniques whose parameters were not included in the factors in any of the groups. Thus, we obtained 24 parameters (instead of 45), which were distributed across the principal components of the SPC and are presented in Table 1.

## Table 1

Name of the components of the SPC	Parameters to be studied	Methods			
Cognitive-emotional	Cognitive-emotional competence	Social and psychological competence of an adolescent (Koroleva, 2018; Koroleva 2022)			
Emotional-regulatory	Emotional-regulatory competence	Social and psychological competence of an adolescent			
	Arbitrariness	A.M. Prikhozhan Social Competence Scale (Prikhozhan and Tolstykh, 2005)			
	Directions of reactions in a frustrating situation: extrapunitive, Intrapunitive, impunitive	S. Rosenzweig's frustration			
	Types of reactions in a frustrating situation: obstacle-dominant ant reactions, self-protective,	tolerance test. Rosenzweig (Dermanova, 2002)			
	necessary-supportive				

Components and parameters of adolescents' SPC

Name of the components of the SPC	Parameters to be studied	Methods			
	Instrumental-operational competence	Social and psychological competence of an adolescent			
	Conforming behaviour				
	Protest behaviour	M.E. Weiner questionnaire (Weiner,			
Instrumental and	Hyperactive behaviour				
operational	Demonstrative behaviour	2004)			
	Social disorientation				
	Aggressive behaviour				
	Development of communication	A.M. Prikhozhan Social Competence Scale			
	Self-esteem	Dembo-Rubinstein self-esteem diagnostic technique modified			
	Claim level	by A.M. Prikhozhan			
	The value of "I"	Symbolic tasks to identify the "Social Self" according to B. Long			
Personal-resource organisation	Social interest	R. Ziller, Henderson (Kikina and Ovsyannikova, 2007)			
	Self-confidence	A.M. Prikhozhan Social			
	Self-activity	Competence Scale			
	Personal-resource organisation of the SPC	Social and psychological competence of an adolescent			

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Due to the multidimensional values, standardisation of the data was required, after which their analysis was carried out using the k-means method, which made it possible

to divide the observations (from *R* space  ${}^{nR^{n}}$ ) into 4 clusters, i.e. **types of SPC**, by dividing them into 4 clusters. The Euclidean distance was used as a measure of proximity. Significant differences between the types were found for all parameters except for 6, 13, 14. The results of intergroup and intragroup dispersions of features during clustering are presented in Table 2.

## Table 2

Results of analysis of intergroup and intragroup variance of traits during clustering

No. n/a	Parameters	Intergroup sum of squares <sup>1</sup>	Step free intergr.	Intragroup sum of squares	Steppe's free inside gr.	F	р	Methods
1	Extrapunitive reactions	<u>26,1157</u>	3	266,8843	290	9,4592	0,000006	
2	Intro- spunitive orientation of reactions	<u>11,0775</u>	3	281,9225	290	3,7983	0,010713	Frustratio
3	Impunitive orientation of reactions	<u>55,0620</u>	3	237,9380	290	22,3700	0,000000	n Tolerance
4	Obstacle fixation	<u>29,2238</u>	3	263,7762	290	10,7097	0,000001	Frustration Tolerance Test S. Rosenzweig
5	A fixation on self-defence	<u>25,4612</u>	3	267,5388	290	9,1996	0,00008	senzweig
6	Fixation on fulfilment of a need	3,7361	3	289,2639	290	1,2486	0,292365	
7	Self-esteem	<u>91,2224</u>	3	201,7776	290	43,7024	0,000000	Meti Dembo-F esteem
8	Claim level	<u>61,1452</u>	3	231,8548	290	25,4931	0,000000	Methodology Dembo-Rubinstein self- esteem diagnostics

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No. n/a	Parameters	Intergroup sum of squares <sup>1</sup>	Step free intergr.	Intragroup sum of squares	Steppe's free inside gr.	F	р	Methods
9	Social interest	4,7175	3	288,2825	290	1,5819	0,193876	Symbo
10	The value of "I"	6,5158	3	286,4842	290	2,1986	0,088365	Symbolic tasks
11	Self- confidence	<u>153,7799</u>	3	139,2201	290	106,776	0,000000	A.7
12	Autonomy	<u>155,1381</u>	3	137,8619	290	108,780	0,000000	A.M. Prikhozhan Social Competence Scale
13	Arbitrariness	<u>133,4212</u>	3	159,5788	290	80,8215	0,000000	izhan S ince Sc
14	Develop- ment of communi- cation	<u>164,4750</u>	3	128,5250	290	123,705	0,000000	ocial
15	Conforming behaviour	<u>50,8786</u>	3	242,1214	290	20,3132	0,000000	
16	Protest beha- viour	<u>206,7419</u>	3	86,2581	290	231,689	0,000000	
17	Hyperactive behaviour	<u>174,2626</u>	3	118,7374	290	141,870	0,000000	M.E. Weiner d
18	Demon- strative behaviour	<u>130,5143</u>	3	162,4857	290	77,6461	0,000000	M.E. Weiner questionnaire
19	Social disorien- tation	<u>154,9075</u>	3	138,0925	290	108,437	0,000000	
20	Aggressive behaviour	<u>144,7434</u>	3	148,2566	290	94,376	0,000000	

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No. n/a	Parameters	Intergroup sum of squares <sup>1</sup>	Step free intergr.	Intragroup sum of squares	Steppe's free inside gr.	F	р	Methods
21	Cognitive- emotional competence	<u>109,0596</u>	3	183,9404	290	57,3144	0,000000	Social and
22	Emotional- regulatory competence	<u>124,9579</u>	3	168,0421	290	71,8823	0,000000	l psychological cc an adolescent
23	Instrumental- operational competence	<u>113,9780</u>	3	179,0220	290	61,5448	0,000000	psychological competence an adolescent
24	Personal resource competence	<u>104,7154</u>	3	188,2846	290	53,7616	0,000000	oetence of

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*Note.* <sup>1</sup>- Significant differences are highlighted in the table.

# Discussion

Figure 1 presents the types of adolescents' SPC.

### Figure 1

Types of socio-psychological competence of adolescents



### Adaptive type of SPC

**The first type** is characterised by a high level of arbitrariness and a harmonious (relatively even representation of reaction types and directions) response profile in a frustrating situation. Negative types of behaviour (hyperactive, demonstrative, aggressive, protest and social disorientation) are not characteristic of adolescents with this type of SPC.

Personal-resource organization of SPC is characterised by high indicators of selfesteem, pretensions and self-confidence. In the process of interaction, the adolescent is able to show independent activity, take responsibility for himself. Adolescents with this type of behaviour have the highest social interest and recognition of the value of "I". These are the most successful teenagers in interpersonal interaction, characterised by strong resources that guarantee their successful adaptation.

This type, which is characterised by the greatest maturity of the SPC and balance between components, was called **adaptive and** was found in 98 adolescents, including 35 with normal development, 31 with hearing impairment, 18 with visual impairment and 14 with mental retardation. The presence in this group of adolescents with mental retardation is most likely explained by the quality of relations with their social environment, characteristic features of the social resource environment, which may fulfil a compensatory function. Analysis of the social history of these adolescents shows that most of them are brought up in complete families with a relatively favorable psychological climate, i.e. close adults are the agents of adaptability.

### Partially adaptive type of SPC

**The second type** is characterised by readiness to recognize a frustrating situation as unimportant and passing overtime. Adolescents are generally successful in communication, sufficiently independent and able to manage their behaviour in interpersonal interaction. However, they have a personality-resource deficit, which is expressed in low self-esteem and pretence levels. They are characterised by a certain impressionability and insecurity. Active negative types of behaviour (hyperactive, aggressive, protest) are not characteristic of them, but they may have tendencies to demonstrative actions.

This type, labelled as **partially adaptive**, was found in 64 adolescents, including 31 with normal development and 24 with visual impairment. This type was not characteristic of adolescents in the other two groups, although it was found in a small number of respondents with mental retardation (n = 5) and hearing impairment (n = 4).

A certain proportion of adolescents with mental retardation among the

representatives of the first and second types can also be explained not by the identity of the quality of SPC with the quality of competence of adolescents of other groups, but by the specificity of the assessment of most parameters by experts who were oriented in scoring not on age but on group norms. It is clear that the group of mentally retarded is very heterogeneous and among them one can find relatively adaptive and successful in interpersonal interaction, against the background of others characterised by signs of obvious maladaptation. Children with disabilities have reduced abilities to adaptation, but even with a lack of competence in this area, the group of these individuals, firstly, is characterised by heterogeneity (Korobeinikov, Babkina, 2021) with a significant scatter of data on the degree of adaptability-maladaptability, and secondly, they will certainly have preserved or relatively preserved properties (Korobeinikov, 2002; Koroleva, 2022), which constitute the resource of adaptability.

## Partially maladaptive type of SPC

**The third type of** SPC is characterised by the highest indicators of ego-protective reactions, which characterize low frustration tolerance, personality weakness, and the need for protection. Adolescents of this type are characterised by the instrumental-operational immaturity of SPC, which is expressed in difficulties in mastering available non-verbal means of communication, underdeveloped ability to initiate communication, limited ability to solve conflict situations with peers, to foresee the consequences of their behaviour. The most pronounced tendency of this type is a high level of conformist behaviour, indicating, on the one hand, a desire for unquestioning adherence to instructions, which can have a very positive connotation, but, on the other hand, it also indicates insecurity, inherent passivity, avoidance of collective games and tasks. The personal-resource organisation of SPC is an area of deficit: the level of self-confidence and independent activity is rather low.

This type, labelled as **partially maladaptive**, is quite characteristic of adolescents and was found in 69 respondents, among whom adolescents with mental retardation (n = 34) and visual impairment (n = 26) predominate. This type was least characteristic of adolescents with hearing impairment (n = 5) and respondents with normal development (n = 4).

# Maladaptive type of SPC

For adolescents of the fourth type of SPC, frustration becomes a condition of a special attitude to social reality, in which the subject is not given the opportunity to realize

internal needs, i.e. an obstacle has a special significance regardless of whether it is viewed negatively or positively. All this is accompanied by the activation of negative types of behaviour (hyperactive, demonstrative, aggressive, protest and social disorientation) and a low level of conformism. At the same time, the level of self-esteem and self-confidence is quite high, and there may be a tendency to display independent activity, but often of a negative nature. Adolescents find it difficult to control speech and emotions in situations of interaction, to regulate their activities, to observe norms and rules in the process of communication, are characterised by immaturity of personal resources, expressed maladaptability.

This type, labelled **maladaptive**, was found in 63 respondents, predominantly among adolescents with mental retardation (n = 32), and less frequently among adolescents with hearing impairment (n = 19) and normal development (n = 10). This type is least characteristic of respondents with visual impairment (n = 3).

While there are common manifestations of maladaptive behaviour, its genesis differs between adolescents with mental retardation and adolescents of other groups. Most symptoms (difficulties in controlling speech, emotions and behaviour, etc.) in mental retardation are the result of a primary defect, while in sensory deficiency and normal development these deficits are more likely to be socially conditioned.

Social skills deficits characteristic of adolescents with a maladaptive type of SPC affect all levels of their social interaction and can "negatively impact several important domains, including academic performance, interpersonal relationship, behaviour, mental health and adult life outcomes", as noted in foreign studies (Silveira-Zaldivara, Ozerki & Ozersk, 2021, p.341).

Thus, adolescents with socio-psychological competence of maladaptive and partially maladaptive types of SPC need targeted psychological and pedagogical support aimed at developing their social skills in order to achieve an acceptable level of social adaptation.

### Conclusions

The theoretical and empirical study allowed us to draw the following conclusions:

- Socio-psychological competence as an individual's ability to interpersonal interaction determines the variability of her adaptation in society;
- The development of social skills of modern adolescents with disabilities is weakened both by the specific conditions of their growing up in a digital society and the conditions of abnormal development of personality, which actualises the problem of managed development of their social and psychological competence;

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- The development of a typology of socio-psychological competence based on the dyadic characteristics of "adaptability-maladaptability" allows, depending on the attribution to one of the four types, to determine and predict the success of social adaptation of adolescents with disabilities;
- Both adolescents with disabilities and adolescents with normal development can be categorised as highly adaptive and maladaptive, which confirms the significant heterogeneity of the characteristics of socio-psychological competence within each group and is determined by both social factors and the level of intellectual development of the individual;
- Adaptive types of SPC, characteristic mainly of adolescents with sensory deficiency and adolescents with normal development, allow flexible action in situations of communication, change their behaviour when it is ineffective, control themselves and deeply understand and adequately assess their capabilities;
- Non-adaptive types of SPC are most inherent in adolescents with mental retardation, characterised by uneven development of traits, a clear deficit of internal and external resources, and the presence of non-constructive types of interaction.

The results of this study can be used in the development and implementation of individual correctional programmes for the development of social and psychological competence of adolescents with disabilities, for building a system of their controlled support in the process of education and upbringing.

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# Information on conflict of interest

The author declares no conflict of interest.