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TO THE QUESTION OF IDENTIFYING THE CONCEPT OF PSYCHOLOGICAL CORRECTION OF SPEECH

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Purpose. The article aims to study the concept of “psychological correction” in the modern research literature and proposes the concept “psychological correction of speech”.

Methods. The article uses theoretical research methods, namely analysis and generalization of the theoretical and methodological foundations of research to determine the state of development of the problem and promising directions for its solution.

Results. We consider it is important for our further research to clear the meaning of the following basic concepts such as communication, personality-oriented approach, medical and psychological correction. In the conditions of martial law in Ukraine, the number of people in need of special help and support at all levels is significantly increasing, in particular with regard to the restoration of speech in case of local lesions of brain structures. Since one of the most common nosological groups, characterized by a high level of disability of working age, is a group of cerebrovascular pathologies associated with local brain damage, accompanied by impaired higher mental functions, there is a need for more detailed study of psychological correction of speech disorders after suffered a stroke in adults. One of the main conditions of speech communication is the feedback provided by the acts of transmission and receipt of the speech message. The rupture of the connection between these mechanisms in local brain lesions, which leads to the destruction of speech activity and makes it impossible to communicate, lies at the heart of aphasia.

Conclusions. We consider the psychological correction of speech as a set of methods of subject-object influence on the client in order to correct speech and thinking disorders that regulate behavior in a particular speech situation.

Key words: *psychological correction, speech, communication, medical and psychological correction, psychological consulting, stroke.*

ДО ПИТАННЯ ВИЗНАЧЕННЯ ПОНЯТТЯ ПСИХОЛОГІЧНОЇ КОРЕКЦІЇ МОВЛЕННЯ

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Метою статті є вивчення поняття «психологічна корекція» в сучасній науковій літературі та надання авторського тлумачення поняття «психологічна корекція мовлення».

Методи. У статті використано теоретичні методи дослідження, а саме аналіз та узагальнення теоретичних і методичних засад дослідження для визначення стану розробленості проблеми та перспективних напрямів її вирішення.

Результати. Вважаємо важливим для нашого подальшого дослідження прояснити зміст таких основних понять, як «спілкування», «особистісно орієнтований підхід», «медико-психологічна корекція». В умовах воєнного стану в Україні значно збільшується кількість людей, які потребують спеціальної допомоги та підтримки на всіх рівнях, зокрема щодо відновлення мовлення в разі локальних уражень структур мозку. Оскільки однією з найпоширеніших нозологічних груп, які характеризуються високим рівнем інвалідності працездатного віку, є група цереброваскулярних патологій, пов'язаних із локальним ураженням головного мозку, що супроводжується порушенням вищих психічних функцій, виникає необхідність більш детального вивчення психологічної корекції порушення мовлення після перенесеного інсульту в дорослих. Однією з головних умов мовленнєвого спілкування є зворотний зв'язок, що забезпечується актами передачі та отримання мовленнєвого повідомлення. Так, зокрема, в основі афазії лежить розрив зв'язку між цими механізмами в разі локальних уражень мозку, що призводить до руйнування мовленнєвої діяльності та унеможлиблює спілкування.

Висновки. Психологічну корекцію мовлення розглядаємо як комплекс методів суб'єктно-об'єктного впливу на клієнта з метою корекції мовленнєвих і мисленнєвих порушень, що регулюють поведінку в конкретній мовленнєвій ситуації.

Ключові слова: психологічна корекція, мовлення, спілкування, медико-психологічна корекція, психологічне консультування, інсульт.

Introduction. Today in Ukraine there is an increase in the prevalence and incidence of cerebrovascular pathology, including acute cerebrovascular disorders. According to P. Voloshyn, T. Mishchenko, Ye. Lekomtseva cerebrovascular diseases in 78% of cases lead to the development of disability and significantly impair the quality of life of patients. 53% of them need outside help, 48% have disabling hemiparesis, 30% develop psychoorganic syndrome (Волошин та ін., 2006). Strokes leave behind a limitation of functionality in the form of movement disorders, sensitivity, coordination, speech and other higher brain functions, which affects the ability to work, and sometimes the ability to self-care. Today, in the conditions of martial law in Ukraine, the number of people in need of special help and support at all levels is significantly increasing, in particular with regard to the restoration of speech in case of local lesions of brain structures.

1. Theoretical substantiation of the problem. Since one of the most common nosological groups, characterized by a high level of disability of working age, is a group of cerebrovascular pathologies associated with local brain damage, accompanied by impaired higher mental functions, there is a need for more detailed study of psychological correction of speech disorders after suffered a stroke in adults.

That is why the *aim of article* is to study the concept of "psychological correction" in the modern research literature and propose the concept "psychological correction of speech". We consider it important for our further research to find out the meaning of the basic concepts.

2. Methodology and methods. The article uses theoretical research methods, namely analysis and generalization of the theoretical and methodological foundations of research to

determine the state of development of the problem and promising directions for its solution.

3. Results and discussions. Competence approach, as a personality-oriented, activity and technological, is an important conceptual framework that defines the modern methodology of updating the content of education in general, and special education in particular. Therefore, the search for effective means of developing communication skills, correction of speech disorders of persons after a stroke becomes especially relevant. Deviations in communicative activity, which are inherent in persons after a stroke, have different manifestations, are differently exposed to psychological and pedagogical influence and give variability to further correctional and developmental work, including psychological correction of personality.

The concept of "communication" is used in the psychological literature in different meanings: as an exchange of thoughts, feelings, experiences L. Vygotskyi (Выготский, 1999), S. Rubinstein (Рубинштейн, 2009); as one of the types of human activity B. Anan'ev (Ананьев, 1977), M. Kagan (Каран, 1988), O. Leontiev (Леонтьев, 2004); as interaction, relations between subjects that have a dialogical nature V. Sokovnin (Соковнин, 1974).

Communication is a process of establishing and developing contacts between people, which is generated by the needs of common activities and includes the exchange of information, the development of the strategy of interaction, perception and understanding of another person.

All levels of communicative interaction are based on a single methodological approach – personal-activity O. Leontiev, which assumes that in the center of communicative activity there are two individuals, whose interaction is realized in activ-

ity and through activity. "Personality, on the one hand, the product of various communications, and on the other hand – the creator of a multi-level communicative world" (Леонтьев, 2004).

The problem of personal approach found its development in the works of S. Rubinstein, who put forward an important position that revealed its essence (Рубинштейн, 2009). In explaining any mental phenomena, the individual acts as a cohesive set of internal conditions through which all external influences are refracted. Everything in the psychology of the personality that is being formed is somehow determined externally, but nothing in its development is derived directly from external influences. External influence gives one or another psychological effect, only refracting through the mental state of the subject through his existing thoughts and feelings. Under the concept of "personal approach" S. Rubinstein understands a qualitative vision of the depth of the inner world of the subject, which reflects any mental phenomenon in the development of personality (Рубинштейн, 2009).

Personality-oriented approach is often established as a key psychological and pedagogical principle of the study of communicative activity of the individual. Personality-oriented approach is a kind of methodological tools, based on a set of initial conceptual ideas, target settings that provide a holistic understanding of the knowledge of the individual, its development. This means that every communicative act must be subordinated to a certain close or distant goal of personal development, so it must be effective and successful.

S. Rubinstein and his followers developed the principle of unity of consciousness and activity, according to which the human psyche is not only manifested but also formed in activity (Рубинштейн, 2009). Thus, different levels and types of consciousness, the psyche in general, develop through certain activities and behaviors: movement, action, deed. It is communicative activity that changes its nature and course. S. Rubinstein revealed the dialectic of psychological activity, identifying the components actively and their relationships. The structure of the entity is a complex relationship of its components in relation to the purpose, motives and conditions of activity (Рубинштейн, 2009).

Scientists who have studied the theory of speech communication (L. Vygotskyi, O. Leontiev, O. Luria), consider it a kind of human activity – speech activity, which exists along with cognitive, game, labor and others (Выготский, 1999; Леонтьев, 2004; Лурия, 1963).

In turn, O. Leontiev, from the standpoint of the theory of speech activity considers communication, and accordingly communication, as a certain side of it, and the activity itself as a condition of communication. At the same time,

mutual informing of communication partners in the process of communication involves the transition to mutual activities (Леонтьев, 2003).

According to A. Bogush, the speech situation is a real life situation, the first stage of the speech act, the implementation of communication, communication under appropriate conditions (Богущ, 2000).

The result of communication activity is expressed in the reaction to the product of this activity of other people and, accordingly, in what motivates them to new (appropriate) activity. In receptive types of speech activity, the result of an impression is an understanding of the semantic content of a speech utterance and subsequent speech or other, non-speech activity. The result of expression is the corresponding speech or non-speech action of another participant in speech communication, regardless of whether this action has external expression or not, it is carried out immediately or after some time (Выготский, 1999).

In the psychological literature, the following three functions of communication are distinguished: informational, which is related to the transfer of information by communication partners to each other; affective, i. e. mutual exchange of emotions; and regulatory, that is the influence of one communication partner on another, which should cause the latter to change either his behavior, or his emotional state, or his personality properties.

The study of speech situations and typical speech behavior became the basis for the development of situational methods implemented in correctional pedagogy. This question is also relevant for our study from the point of view of methodical organization of the process of restoration of speech function in aphasia.

After the initial orientation in the problem situation, the stage of formation of the speech intention comes, where the speaker has an image of the result, but does not yet have a plan for its implementation. At this stage, thanks to the clear selection of the communicative task, secondary orientation takes place in the conditions of this task.

The most difficult and responsible stage is the creation of an internal program of speech action, in which the speech intention is mediated by the code of personal "meanings" fixed in certain subjective code units. At this level, the selection of means and ways of forming and formulating one's own thoughts in the process of speech communication is realized. There is planning, programming and internal organization of speech activity using various language means and methods.

According to the hypothesis of our study, on the effectiveness of the process of psychological correction of speech disorders after stroke



in adults, provided that the psychologist creates a correctional and developmental comfortable environment in the institution to ensure the effectiveness of the correction of speech disorders, etc.

One of the main conditions of speech communication is feedback provided by acts of transmission and reception of a speech message. The disconnection between these mechanisms in case of local brain lesions, which leads to the destruction of speech activity and makes speech communication impossible, is the basis of the occurrence of aphasia.

As noted by I. Martynenko, on the basis of a theoretical analysis of scientific sources, it was found that non-verbal means are a necessary condition for full-fledged communication (Мартиненко, 2017). At the preverbal stage of an individual's development, they are the main means of communication and contribute to the formation of psycholinguistic mechanisms that cause the emergence of speech. In the process of communication, non-verbal means perform both a leading and a supplementary role relative to verbal ones. Non-verbal means for emotional coloring, expressiveness, accuracy of speech communication acquire special importance. According to the scientists' conclusions, the use and understanding (interpretation) of gestures, facial expressions, pantomimes, prosody not only clarifies the content of a speech message, but also allows you to encourage communication, predict its course, and respond adequately. Success in encoding and decoding various non-verbal signs is not only a guarantee of effective social perception, but also of the entire process of interpersonal communication.

Psychology is the science of the soul, the inner and mental world of man, namely that part of it, which is called practical, is designed to help people solve vital problems. Unfortunately, our society does not yet have a sufficiently developed psychological culture, i.e. taking care of one's mental health, the ability to get out of a crisis, to help one's relatives. However, the need for mental health care is more pressing than ever today the world in general, and in Ukraine in particular.

Psychocorrection is a system of measures aimed at correcting the shortcomings of psychological development or human behavior through special measures of psychological influence. Psychocorrection differs from psychological development in that it deals with already formed personality traits or behaviors and is aimed at processing them, while the main task of development is to form psychological qualities in a person with insufficient development.

Speaking of people with speech disorders after suffered a stroke in adults, medical and psychological correction – a system of psychological measures aimed at ensuring the full or maximum

possible private and social existence of the individual in the presence of any diseases or to prevent them from occurring or exacerbating existing diseases (Караяни, Сыромятников, 2006: 123–131).

According to R. Chapey psycholinguistic approaches to language recognize its three integrated and interrelated components: cognition, language, and communication, as well as the integration of language content, form, and use (Chapey, 2008). Content involves meaning. Language refers to the structures of language or the rule-based systems of phonology, morphology, syntax, and semantics. Communication involves the use, purpose, or function that a particular utterance or gesture serves at any one time and its contextual realization. Cognition involves the acquisition of knowledge of the world, and the continued processing of this knowledge. Cognition refers to all of the mental processes by which information is transformed, reduced, elaborated, stored, recovered, and used.

In a psycholinguistic framework, aphasia may be defined as an acquired impairment in language content, form, and use and the cognitive processes that underlie language, such as memory and thinking (convergent, divergent, and evaluative thinking). The impairment may be manifested in listening, speaking, reading, writing, and sign language, although not necessarily to the same degree in each. Aphasia may be seen as an impairment in problem solving and information processing. Problem-solving and information processing both involve the use of all five cognitive operations (recognition/understanding; memory; and convergent, divergent and, evaluative thinking); the four types of content (figural, symbolic, semantic (content, form, and use)), and behavioral (use/pragmatics); and the five products or associations (units, classes, relations, systems, and transformations). Intervention focuses on the stimulation of these abilities, but especially on the stimulation of the cognitive processes underlying language comprehension and production. A solid rationale for language intervention in adult aphasia is based on the notion that language is essential to one's human essence and that treatment can affect a change in a patient's communicative competence (Chapey, 2008).

As one of the types of psychological care, medical correction (hereafter – MC) is aimed at correcting the peculiarities of the psychological development of a person who does not correspond to the accepted optimal model; formation of necessary psychological features that will promote its socialization and adaptation to modern living conditions. Along with MC, there is the concept of "psychological correction" (hereafter – PC), their tasks are virtually identical: the correction of disorders of the cognitive-emotional

sphere of the individual or his behavior, but in the implementation of MC provides medical care. The term PC became widespread in the early 1970s. There are still debates about whether a psychologist can engage in psychotherapeutic (therapeutic) activities. There are treatment (psychotherapy) and rehabilitation from the correction of certain psychological problems and psychoprophylaxis at all stages, especially during the implementation of secondary and tertiary prevention. However, the question of the relationship between the concepts of “psychotherapy” and “psychological correction” remains unresolved. At present, psychologists are trained in Ukraine, who professionally provide medical and psychological care. It should be noted that the biopsychosocial paradigm of the etiopathogenesis of mental disorders takes into account the influence of all factors (biological, psychological and social) on the development of these disorders. The importance of the psychological factor in the etiopathogenesis of a disease determines the tasks and methods of MC.

Medical correction is a form of influence on the psyche, and through it on the whole body. Patients are provided with professional care by psychological means, solving their psychological problems during medical care for any disease. MC's psychological approaches cover the following concepts: interpersonal interaction, psychological means, psychological problems and conflicts, cognitive processes, relationships, attitudes, emotions, etc.

Psycho-corrective influence in medical correction is a type of clinical and psychological intervention, which is characterized by certain goals, choice of means of influence, functions, theoretical validity, empirical verification and professional actions.

There are the following groups of methods of influence in MC: methods of strengthening the regulation of mental functions, the development of emotional self-control, improving mental self-regulation in terms of actualization of the psychophysical state of man and the existing disease; methods aimed at finding a solution to a specific problem during the initial diagnosis of a serious illness, complications or unexpected recurrences; methods of general correction of personal values, worldview and attitude to one's life (during or after treatment of the disease).

According to the method of corrective effects medical correction can be directive or non-directive. The theoretical basis of MC is scientific psychology, psychological theories and concepts that reveal the psychological meaning of the concepts of “norm” and “pathology” and form a system of methods of influencing the patient's psyche.

There are three main areas in psychotherapy, which are theoretical and practical basis of MC: psychodynamic, behavioral and “experience”

approach. This corresponds to three main areas of psychology: psychoanalysis, behaviorism and existential-humanistic psychology. Each of them is characterized by its own approach to understanding the personality, personality disorders and interpretation of the psychogenesis of diseases or morbid conditions and the logically related system of psychological influence.

MC is aimed at emotional support and attention to the patient's experiences; expansion of consciousness and increase of psychological competence of the patient; correction of the attitude to the disease and the problems caused by it, which affect the patient's condition (from “deadlock” to “choice of solution”); increasing stress and crisis tolerance; development of realism and pluralism of worldview; formation of skills of full existence in case of illness. The choice of tasks and methods of MC depends on the features of the disease or disorder to which it is applied: mainly functional or organic nature of somatic or mental pathology; reversibility of painful phenomena. When correcting or preventing disorders, e. g, mental disorders, the MC should take into account both environmental factors, etiological and pathogenic factors of the disorder, and psychological characteristics of man, due to his constitution and personal characteristics.

The implementation of medical correction involves establishing contact with the patient, giving him the opportunity to speak out, emotional support, information about the disease, in particular, emphasizing not only the negative aspects, but also the positive ones. It is necessary together with the patient to achieve a change in his attitude to the disease and life problems; to form a list of possible solutions; to make a choice of the decision, to define strategy of behavior, optimum from the point of view of the patient, but also effective according to the doctor; to accompany the patient in mastering the chosen strategy of behavior or making decisions about specific life circumstances; complete the course of MC summarizing the work with the patient. The effectiveness of MC depends on the quality of the content of measures, their timeliness, adequacy and relevance of the patient's condition, his individual. features and lifestyle.

Psychological counseling is a type of psychological assistance based on organized interaction (conversation) between a psychologist and a client with observance of parity non-directive conditions of cooperation, respect for the client's personality, belief in the so-called “internal resource” (potential) of each person to solve the psychological difficulties of the client. This is the provision of psychological assistance to people who are within the psychological norm in the adaptation, development and expansion of personal potential.



In modern world psychology, two concepts should be distinguished. The term “consulting” is used to describe counseling on a wide range of social issues, usually related to the professional sphere. The term “counseling” – counseling, mentoring, psychological assistance is used to describe to reflect the meaning of psychological assistance, in particular counseling in the field of mental life.

Psychological correction is a set of methods of subject-object influence on the client in order to correct “flaws” in the way of thinking or behavior of the latter.

The following approaches to the definition of psychocorrection should be mentioned: psychological correction as a way to prevent neuropsychiatric disorders in children A. Spivakovskaya (Спиваковская, 1988); a method of psychological influence aimed at creating optimal opportunities and conditions for the development of personal and intellectual potential of the child G. Burmenska, O. Karabanova, A. Leaders, (Бурменская и др., 1990), or as a set of techniques used by a psychologist to correct the psyche or behavior of a mentally healthy person R. Nemov (Немов, 2008).

Conclusions. The research shows that it is established that the basic structural component of speech communication is a speech utterance, which is a speech action, which has features similar to any other action, namely: motivation and purposefulness, hierarchical organization.

One of the main conditions of speech communication is the feedback provided by the acts of transmission and receipt of the speech mes-

sage. The rupture of the connection between these mechanisms in local brain lesions, which leads to the destruction of speech activity and makes it impossible to communicate, lies at the heart of aphasia.

As for the field of our investigation, the central defect in all forms of aphasia is a violation of the communicative function of speech, which in difficult cases leads to the complete inability of patients to verbally communicate, to a change in the social and family status of the patient, his attitude to both his personality and the surrounding reality, that’s why we studied such basic concepts as communication, personality-oriented approach, medical and psychological correction.

Summarizing what has been stated gives reason to state that the effectiveness of communicative activity is largely determined by the degree of mastery and representation in communicative interaction of various means of communication: both speech and non-verbal. These tools not only allow you to solve communicative tasks through the performance of communicative actions, but also ensure the implementation of the interactive, perceptive and informational aspects of communication. Communicative means determine the success of the operational component of this activity and serve to implement the main functions of communicative activity.

Therefore, we consider the psychological correction of speech as a set of methods of subject-object influence on the client in order to correct speech and thinking disorders that regulate behavior in a particular speech situation.

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