

SOME FEATURES OF SOCIAL COMMUNICATION PROCESS AT PREADOLESCENTS WITH MENTAL DEFICIENCIES

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ABSTRACT. During his entire life, a people have a lot of social relationships, based of the social communication process. The social communication is a form of total communication process and has specific manifestations related to ages, gender, social experience, etc.

Therefore, I have made an investigation, on 40 Romanian preadolescents with mental deficiencies. Our investigation has had the following goal: to reveal some features of social communication process at preadolescents with mental deficiencies.

The psychodiagnosis instruments that have been used on this research are: The Social Conversation Questionnaire that has been created for Romanian mental deficiencies pupils by R. Urea in 2008, The Zazzo test of similarities, The verbal associations test.

The results that came through have revealed at people with mental deficiencies some features of, of social conversation level, of verbal functional activism, of flexibility of social communication.

Our conclusions allowed us to create an important set of psychological test that can be use in differential psychodiagnosis process.

Key words: mental deficiencies, social communication, social conversation,

ZUSAMMENFASSUNG. EINIGE MERKMALE DER SOZIALEN KOMMUNIKATION BEI PRETEENAGERS MIT GEISTIGE MÄNGEL. Während seines gesamten Lebens, haben die Menschen viel von sozialen Beziehungen, der sozialen Kommunikation basiert. Die soziale Kommunikation ist eine Form der gesamten Kommunikationsprozess und hat ihren spezifischen Ausprägungen im Zusammenhang mit Alter, Geschlecht, sozialer Erfahrung usw.

Daher habe ich eine Untersuchung gemacht, auf 40 rumänische preadolescents mit geistiger Mängel. einige Merkmale der sozialen Kommunikation bei preadolescents mit geistiger Mängel offenbaren: Unsere Untersuchung hat folgendes Ziel hatte.

Die psychodiagnosis Instrumente, die auf dieser Forschung verwendet wurden, sind: Die Online-Konversation Fragebogen, die für rumänische geistiger Mängel Schüler wurde von R. Urea erstellt im Jahr 2008, Die Zazzo Test von Ähnlichkeiten, die verbalen Assoziationen zu testen.

Die Ergebnisse, die durch bei Menschen mit geistiger Mängel gezeigt haben, kamen einige Features, sozialer Gespräch Ebene der verbalen funktionalen

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Aktivismus, der Flexibilität der sozialen Kommunikation. Unsere Schlussfolgerungen konnten wir einen wichtigen Satz von psychologischen Tests, die Nutzung im differentiellen psychodiagnose Prozess sein können.

Schlüsselwörter: geistige Mängel, soziale Kommunikation, soziale Gespräch

1. Theoretical background

Human's communication is, first of all a social phenomenon. Communication between people defines social relationships, and the way how society is organised.

The social communication is the fundamental way of person's social interaction and is done through the social's symbols and significations and determines specific behaviours.

During the process of social communications there is some information's exchange. Social communication presumes emission, transmission and reception of information and sometime it can be assume as information's transmission. But, in reality, the process of information's transmission only when the message is understand by the receiver and it is follow by a proper response.

Social communication's features depend by the type of social interaction between people, by the people's personality types.

Because of the mental disabilities and the delay in biological normal development, the children have not the proper abilities to a proper response to social stimulus and will develop a social and school maladjustment. These not developed abilities are also in the social communication area and will increase the personal insecurity and in time, it can determine social isolation.

At children with mental disabilities the main goal is to be integrated in the society. For that goal it is necessary that the training process of these people to be focus various aspects, including social communications abilities. But it is important to know the features of social communication at children with mental disabilities

2. Investigation research

The theoretical aspects that we have just presented in a short manner were the reasons that determined us to investigate some of the social communication features because knowing those features we can create proper programs that will develop at pupils with mental handicap the social communication abilities that can facilitate social relationships and integration in society.

Our research had the goal *to investigate at preadolescents with mental handicap the features of social communication in formal group for elaborating the proper individual counselling programs that will facilitate the future labour integration.*

Our objectives were to investigate at preadolescents with mental handicap the following aspects: the social conversation's level, the verbal functional activism, the social communication's flexibility.

We made in our research the following assumption: we assumed that based on the specificity features of mental handicap's personality, we can see different ways of manifestation of social communication skills in formal group that will depend by I.Q and the social communication experience.

We did our research on 30 subjects, aged 10-18 years old, 17 boys and 13 girls from Special School nr.5 Bucharest with I.Q between 50- 75- medium level of mental handicap..

In our research we have used the following psychological instruments: the Social conversation questionnaire, which was created in 2008 by R. Urea for pupils with mental handicap; the Vocabulary Test; the Verbal Association Test. The last two instruments was adapted for romanian pupils with mental handicap and the coefficients of fidelity were: . 675, and . 744.

2.1. Investigation of social conversation level

All the collected data from the social conversation questionnaire were evaluated on three levels: low, medium, high. The data are presented in table nr.1.

Table 1.

The levels of social conversation at our investigated subjects

Number of subjects (%)	Levels of evaluation		
	Low	Medium	High
	55,7	42,2	1,1

The dynamic of social conversation at our investigated subjects is presented in figure nr.1

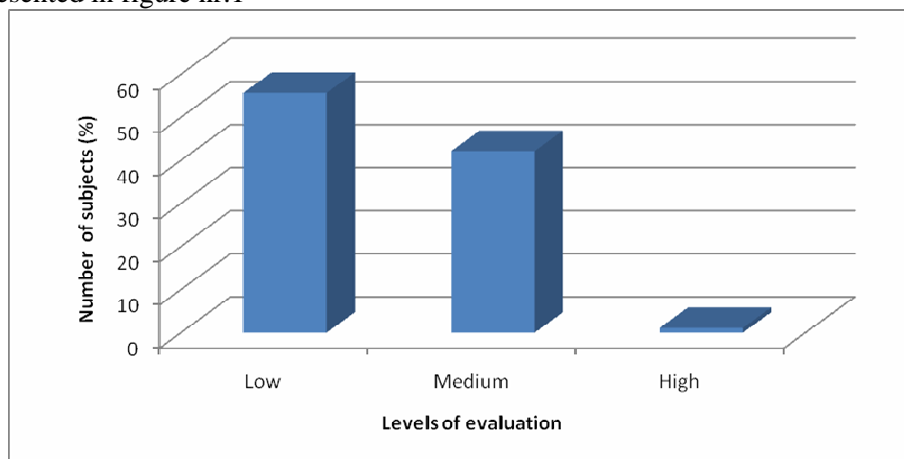


Figure 1. The dynamic of social conversation at our investigated subjects

As we can see, most of our subjects have a low level of social conversation and can explain by the fact that the social conversation strategies are not operative due to a limited social experience communication

The qualitative analyses of the subject's answers allowed us to see some nuances of the social conversation process: if the social conversation is done in school or if the social conversation's partners have the same status, the level of social conversation is medium because the type of messages that are between them is focus on daily activities; if the social conversation is done in large social groups where people have different social status, the level of social conversation is low.

The skeness coefficient (.397) revealed that the task was done by our subjects in an easy manner and the kurtosis coefficient (2.037) revealed that the features that we have found is relevant at our subjects as a group.

The correlation analyses revealed a direct correlation between the social conversation and the I.Q of our subjects ($r = .364$, $p = 0.05$)

2.2. Investigation of verbal functional activism

First of all, we have to define the verbal functional activism. This concept represents the level of performance that a person can reach during the social communication process as an expression of operability of functional vocabulary

The collected data from Zazzo's test of vocabulary were evaluated on there levels: low, medium, high and are presented in table nr.2

Table 2.

The verbal functional activism at our investigated subjects

	Levels of evaluation		
	Low	Medium	High
Nr. of subjects (%)	54,54	36,36	9,1

The dynamic of verbal functional activism at our investigated subjects is presented in figure nr.2

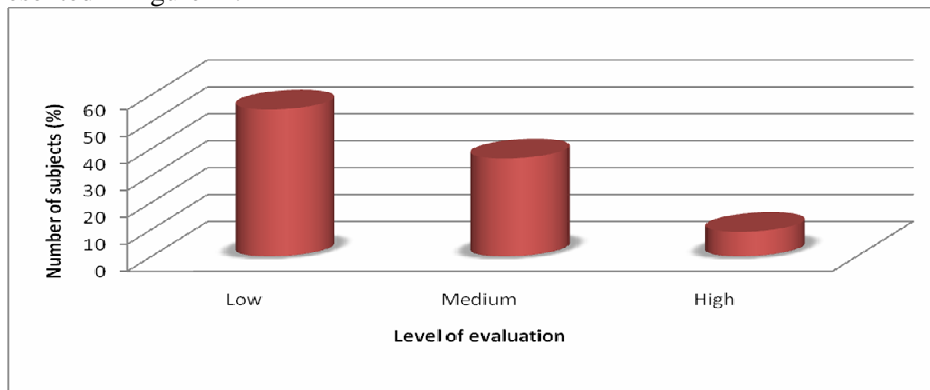


Figure 2. The dynamic of verbal functional activism at our investigated subjects

We can see that at our investigated subjects, the verbal functional activism is at low level and can be associated with the flight of intellectual effort and with the limited area of functional remaining potential. That means that our subjects will be used in social communication process a limited part of vocabulary, especially those words, those verbal structures that had been practiced long enough to guarantee some success in social area.

There are some subjects that have a high level of verbal functional activism. That should be meaning a high level of development in social conversation. But, in reality it is really about the process of tinting of verbal structure in the process of social relationships in a way that are more suitable to a new context which was not practiced. It also mean that those subjects have a larger social communication functional activism) and can avoid in better manner the social blaming

We also revealed the behavioural rigidity on verbal functional activism through the way how they repeated some sentences.

The skeness coefficient (.797) revealed that the task was done by our subjects in an easy manner and the kurtosis coefficient (.211) revealed that the features that we have found are relevant at our subjects as a group.

Based on statistical processing we have found a prediction coefficient which value was 14. That means that, at our investigated subjects we will see some improvements on verbal functional activism after 14 weeks after we will start the therapeutical process.

The corelational analyses have revealed the following corelation: a direct corelation between the verbal functional activism and the social conversation ($r = .296, p = 0.05$); a direct corelation between the verbal functional activism and I.Q ($r = .376, p = 0.05$)

2. 3. *Investigation of social communication flexibility*

The collected data from verbal association test were evaluated on three levels: low, medium, high and are presented in table nr.3

Tabel 3.

The social communication flexibility at our investigated subjects

	Levels of evaluation		
	Low	Medium	High
Nr. of subjects (%)	50, 25	42,00	7,75

The dynamic of social communication flexibility at our investigated subjects is presented in figure nr.3

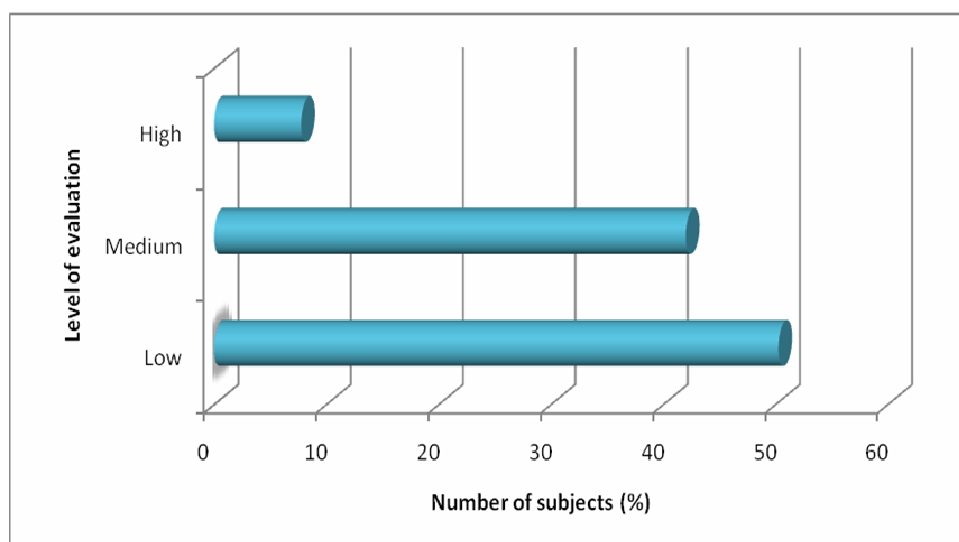


Figure 3. The dynamic of social communication flexibility at our investigated subjects

We can see that most of social communication flexibility is low level at most of our subjects and follow up with a little difference by the subjects that have had the social communication at medium level. This situation is a reflection of the impact of the educational process on the subjects with middle mental handicap and mean that is the expression of verbal behavioural lability.

But, there some subject that had a high level of social communication flexibility and had a value of 75 at the I.Q. That mean that those subjects had operative inductive strategies and can anticipate the partner's reactions and can have proper behaviours suitable to social communication context. In this process of social interaction, the message will be understood by those subjects. But, even they will understand the message due to the features of mental deficiencies, they can't anticipate to play the correct role in social environment.

The skewness coefficient (.002) revealed that the task was done by our subjects in an easy manner and the kurtosis coefficient (.587) revealed that the features that we have found are relevant at our subjects as a group.

Based on statistical processing we have found a prediction coefficient which value was 10. That means that, at our investigated subjects we will see some improvements on social communication flexibility after 10 weeks after we will start the therapeutic process.

The correlational analyses revealed; a direct correlation between social communication flexibility and social conversation ($r = .147$, $p = 0,05$), a direct correlation between social communication flexibility and verbal functional activism ($r = .223$, $p = 0,05$)

3. Conclusions

Our research found, at our investigated subjects the following conclusions as features of social communication process:

1. The social conversation at subjects with middle level of mental handicap is a consequence of a genetic viscosity and his way of revealing is limited to social contexts that give to our subjects a self-security; in other social contexts the process of social conversation use strategies that are not suitable with current moment;
2. The verbal functional activism at subjects with middle level of mental handicap is the expression of insufficient operative structure related to the context's moment. The limited social experience determine poor strategies with limited operative objective criterias.
3. The social communication flexibility at our subjects is mark by the limited thinking process, by the limited operativity of lexico- grammatical structures and determine a limited social competence.

The psychological instruments that we have used in this research for revealing some features of social communication process at preadolescents with mental deficiencies, can also be used in differential diagnosis process of the levels of mental deficiency.

These conclusions confirm the assumption that we have made at the beginning of our research.

REFERENCES

1. Georgescu, M. (2007), *Introducere în psihologia comunicării*, București: Editura Fundației „România de mâine”;
2. Popovici, D. V. (2000), *Dezvoltarea comunicării la copii cu deficiențe mintale*, București: Editura Pro Humanitas;
3. Radu, Gh. (2000), *Psihopedagogia școlărilor cu handicap*, București: Editura Didactică și Pedagogică;
4. Urea, R. (2007). *Specificul lecturii la debilul mintal*, în Revista de ”Protecție socială a copilului”- FICE România 27-28/septembrie 2007;
5. Urea, R. (2002), *Imaginea de sine și percepția socială la debilii mintali*, vol I, Râmnicu Vâlcea: Editura Almarom;
6. Vlad, E. (2002), *Evaluarea în actul educațional terapeutic*, București: Editura Pro Humanitas;