

UDRUŽENJE ZA PODRŠKU I KREATIVNI RAZVOJ DJECE I MLADIH  
EDUKACIJSKO-REHABILITACIJSKI FAKULTET  
UNIVERZITETA U TUZLI

**UNAPREĐENJE KVALITETE ŽIVOTA  
DJECE I MLADIH**

Tematski zbornik  
II DIO

*VI međunarodna naučno-stručna konferencija  
„Unapređenje kvalitete života djece i mladih“  
19. - 21. 06. 2015. godine, Ohrid, Makedonija*

ISSN 1986-9886

Tuzla, 2015.

## UNAPREĐENJE KVALITETE ŽIVOTA DJECE I MLADIH

### Izdavač:

Udruženje za podršku i kreativni razvoj djece i mladih

### Suizdavač:

Edukacijsko-rehabilitacijski fakultet Univerziteta u Tuzli

### Urednici:

dr. sc. Svetlana Kaljača, vanredni profesor

dr. sc. Milena Nikolić, docent

### Organizacioni odbor:

dr. sc. Medina Vantić-Tanjić, vanredni profesor, predsjednik

Goran Petrušev

Dr Valentina Dukovska

dr. sc. Lejla Junuzović-Žunić, vanredni profesor

Marinela Šćepanović

### Naučni odbor:

*dr. sc. Zamir Mrkonjić, vanredni profesor*

Univerzitet u Tuzli Edukacijsko-rehabilitacijski fakultet

Bosna i Hercegovina

*dr. sc. Vesna Bratović, docent*

Univerzitet u Tuzli Edukacijsko-rehabilitacijski fakultet

Bosna i Hercegovina

*dr. sc. Ranko Kovačević, vanredni profesor*

Univerzitet u Tuzli Edukacijsko-rehabilitacijski fakultet

Bosna i Hercegovina

*dr. sc. Nenađ Glumbić, redovni profesor*

Univerzitet u Beogradu Fakultet za specijalnu edukaciju i rehabilitaciju

Srbija

*dr. sc. Jasminka Zloковиć, redovni profesor*  
Sveučilište u Rijeci, Filozofski fakultet, Odsjek za pedagogiju  
Hrvatska

### Recenzenti:

*dr. sc. Medina Vantić-Tanjić, vanredni profesor*

Univerzitet u Tuzli Edukacijsko-rehabilitacijski fakultet

Bosna i Hercegovina

*dr. sc. Jachova Zora, redovni profesor*

Institute of Special Education and Rehabilitation, Faculty of Philosophy,  
University "Ss. Cyril and Methodius", Skopje, Republic of Macedonia.

*dr. sc. Risto Petrov, redovni profesor*

Skopje, Republic of Macedonia

*dr. sc. Ana Poposka*

JZU Zvod za rehabilitacija na sluh, govor i glas, Skopje, Macedonia

*dr. sc. Mirela Duranović, vanredni profesor*

Univerzitet u Tuzli Edukacijsko-rehabilitacijski fakultet

Bosna i Hercegovina

*dr. sc. Slavica Golubović, redovni profesor*

Univerzitet u Beogradu Fakultet za specijalnu edukaciju i rehabilitaciju

Srbija

*dr. sc. Amela Teskeredžić, vanredni profesor*

Univerzitet u Tuzli Edukacijsko-rehabilitacijski fakultet

Bosna i Hercegovina

**Štampa:**  
OFF-SET, Tuzla

**Naslovna strana:**  
OFF-SET, Tuzla

**Godina izdanja:**  
2015.

**Tiraž:**  
150

## SADRŽAJ

Predgovor .....15

### **TEMA I** **UNAPREĐENJE KVALITETE ŽIVOTA DJECE PREDŠKOLSKOG I** **ŠKOLSKOG UZRASTA**

Kajtaž M, Kresonja I.  
ULOGA NASTAVNIKA U PREVENCIJI GRAFITOMANIJE .....19

Karakaš S, Paklarčić M, Kukić E.  
RAZLIKE U VRIJEDNOSTIMA WHR INDEKSA U ODNOSU NA  
PREHRAMBENE I ŽIVOTNE NAVIKE KOD DJEVOJČICA ŠKOLSKOG  
UZRASTA .....31

Adamović T, Todorović S, Sovilj M.  
MOTORIČKA SPRETNOST KAO ZNAČAJAN FAKTOR GOVORNO-  
JEZIČKOG RAZVOJA DECE PREDŠKOLSKOG UZRASTA .....41

Rosić V.  
ULOGA KATOLIČKOGA VJERONAUKA U PRENOŠENJU VREDNOTA ...49

Mladineo Brničević M, Jukić J, Soldić AM, Zagorac N.  
NEKE MORFOLOŠKE ZNAČAJKE UČENIKA I UČENICA STARIH 11-12  
GODINA .....60

Drežnjak M, Humo Z, Pajić E, Bijedić-Bešo B.  
PROJEKT STARIJI BRAT STARIJA SESTRA U FUNKCIJI UNAPRIJEĐENJA  
KVALITETE ŽIVOTA DJECE IZ MARGINALIZIRANIH PORODICA .....70

Rakić A, Čmerić G, Stojadinović Rudnjanin D.  
JEDNAKE ŠANSE DECE MARGINALIZIRANIH GRUPA U PREDŠKOLSKOJ  
USTANOVI .....79

Čar Mohač D.  
MALA SPORTSKA ŠKOLA .....85

Vlastelić A, Stolac Di, Stolac Du.  
JEZIK REKLAMA ZA DJECU PREDŠKOLSKE DOBI .....92

Jovanovska A, Markoska Milenkovska V. АНАЛИЗА НА ИНКЛУЗИВНИОТ ПРОЦЕС ОД ГРАДИНКА ВО УЧИЛИШТЕ .....	105
Sterjadovska Stojčevska B, Sazdova D. ДЕТЕТО – ГРАДИТЕЛ НА ЧОВЕКОТ .....	107
Simjanovska M, Veljanoski N, Grble S. СОМАТСКИ СТАТУС КАЈ УЧЕНИЦИ ОД ПРВО ДО ПЕТТО ОДДЕЛЕНИЕ И ПРИМЕНА НА КОРЕКТИВНО - ПРЕВЕНТИВНИ ВЕЖБИ .....	113
Ibrahimagić A, Vantić-Tanjić M, Duranović M. JEZIČKE VJEŠTINE ROMSKE DJECE .....	117
Gudelj Ceković I, Čavala M, Zagorac N, Gracin A, Saratlija P. RELACIJE PLANTOGRAMA SA SOMATOTIPIROM KOD DVANAESTOGODIŠNJIH DJEČAKA I DJEVOJČICA .....	133
Georgievaska V, Dodevaska I, Dvojakov I, Gorgionska Marčevki A, Naksovaska J, Trifunovski Lj. ПРОГРАМИ ЗА ПОДДРШКА НА ДЕЦА КОИ ЖИВЕАТ ВО СОС ЗГРИЖУВАЧКИ СЕМЕЈСТВА .....	145

## ТЕМА II

### UNAPREĐENJE KVALITETE ŽIVOTA MLADIH

Krišto I, Begić A. DJECA I MLADI U SUKOBU SA ZAKONOM .....	159
Gološ E. UTJECAJ SADRŽAJA LEKTIRE NA KVALITET ŽIVOTA SREDNJOŠKOLACA .....	170
Milovanović R, Budimir-Ninković G, Janković A. VASPITNI STIL RODITELJA I MENTALNO ZDRAVLJE ADOLESCENATA .....	180
Babić N, Pudić K. PREVENCIJA NASILJA U PORODICI .....	189

Bjelan-Guska S, Šušnjara S. KREIRANJE NASTAVNIH AKTIVNOSTI U FUNKCIJI POTICANJA KVALITETE ŽIVOTA STUDENATA – PRILOG VISOKOŠKOLSKOJ METODICI .....	196
--	-----

Ćosić M. ĐAČKI DOM – MJESTO OSTVARIVANJA ODGOJNOG PROCESA .....	205
--	-----

Vujović T. STRUKTURALNE RAZLIKE IZMEĐU MALOLJETNIH DELINKVENATA I PSIHIJATRIJSKI LIJEČENIH ADOLESENATA U VRSTI I INTENZITETU ISPOLJAVANJA PSIHOLOGIJE RODITELJA .....	216
--	-----

Dimitrievska V, Simonovska S. ПЕРЦЕПЦИЈА ЗА КВАЛИТЕТОТ НА ЖИВОТ КАЈ СТУДЕНТИТЕ ОД УКИМ .....	227
--	-----

Selimović H, Tomić R, Selimović N, Selimović Z. ULOGA OBITELJI U PREVENCIJI SOCIOPATOLOŠKIH MANIFESTACIJA KOD DJECE I MLADIH .....	237
--	-----

Klapan A, Čerkez N, Vekić T. IZOSTAJANJE UČENIKA S NASTAVE .....	247
---	-----

## ТЕМА III

### UNAPREĐENJE KVALITETE ŽIVOTA DJECE I MLADIH S POSEBNIM POTREBAMA

Ibrahimagić A, Junuzović-Žunić L, Duranović M, Radić B. PROCJENA I TRETMAN JEZIKA I UČENJA DJECE SA POREMEĆAJEM AUTISTIČNOG SPEKTRA .....	261
---	-----

Fulgosi-Masnjak R, Barnjak A, Masnjak L. STAVOVI OSNOVNOŠKOLSKIH UČITELJA SREDNJEBOŠANSKOG KANTONA PREMA EDUKACIJSKOJ INKLUZIVI UČENIKA S TEŠKOĆAMA .....	274
--	-----

Jelinić J. IZRADBA PRIPREME NASTAVNOG SATA ZA RAD S UČENICIMA S TEŠKOĆAMA (ISKUSTVA IZ NASTAVNE PRAKSE) .....	287
---	-----

Bulić D, Matijaš T, Karlovčan G, Not T. KVALITETNIJI ŽIVOT UZ SENZORNU INTEGRACIJU, NEUROFEEDBACK I SENZOMOTORNУ STIMULACIJU .....	293	Poposka A. КВАЛИТЕТ НА ВЕРБАЛНА КОМУНИКАЦИЈА КАЈ ДЕЦА СО СПЕЦИФИЧНО ЈАЗИЧНО РАСТРОЈСТВО .....	387
Marković Pavlović M, Dautbegović A, Zvizdić S. ORGANIZACIJA RADA U KONTEKSTU PRUŽANJA PODRŠKE STUDENTIMA SA POSEBNIM POTREBAMA .....	299	Simonovska F, Petrov R. ВРАБОТУВАЊЕ ВО ЗАШТИТНИ ДРУШТВА НА ЛИЦА СО ИНВАЛИДНОСТ СО РАЗЛИЧНА ВЕРСКА И ЕТНИЧКА ПРИПАДНОСТ .....	395
Lakovnik V, Masnjak M, Masnjak L. PRIKAZ PREVALENCIJE STUPNJA UHRANJENOSTI UČENIKA SA INTELEKTUALNIM TEŠKOĆAMA U HRVATSKOJ .....	311	Agai A, Petrov R, Georgievskа S. СПОСОБНОСТИТЕ НА ВОЗРАСНИТЕ ЛИЦА СО УМЕРЕНА ИНТЕЛЕКТУАЛНА ПОПРЕЧЕНОСТ ЗА ЖИВЕЕЊЕ ВО ЗАЕДНИЦА .....	405
Todorović S, Adamović T, Đoković S. UTICAJ DUŽINE POSTOPERATIVNE GOVORNO-JEZIČKE REHABILITACIJE NA RAZUMEVANJE VERBALNIH NALOGA DECE SA KOHLEARNIM IMPLANTOM .....	320	Trajkovska S, Petrov R. СПОСОБНОСТА ЗА САМОЗАСТАПУВАЊЕ НА ЛИЦАТА СО ИНТЕЛЕКТУАЛНА ПОПРЕЧЕНОСТ .....	419
Vukić M, Jeličić Dobrijević LJ, Sovilj M. HOLISTIC APPROACH IN DIAGNOSTICS AND TREATMENT OF DEVELOPMENTAL SPEECH AND LANGUAGE DISORDERS: A CASE STUDY .....	329	Petrov R, Lazova-Zdravkovska S. СЕСУАЛНОТО И РЕПРОДУКТИВНО ЗДРАВЈЕ КАЈ ЛИЦАТА СО ПОПРЕЧЕНОСТ .....	429
Radovanović Z. СОЦИЈАЛНЕ СПОСОБНОСТИ АДОЛЕСЦЕНАТА СА ЛАКОМ ИНТЕЛЕКТУАЛНОМ ОМЕТЕНОЌУ И МОГУЌНОСТ УКЛУЌИВАЊА У ДРУШТВЕНУ СРЕДИНУ .....	336	Keskinova A, Ajdinski G, Buniamin M. КВАЛИТЕТ НА ЦРТЕЖ КАЈ УЧЕНИЦИТЕ СО ЛЕСНА ИНТЕЛЕКТУАЛНА ПОПРЕЧЕНОСТ .....	443
Čošić N, Jakovčev M, Prohaska M. RODITELJSKA PODRŠKA - KLJUČ CJELOVITOG PROVOĐENJA INDIVIDUALNOG PROGRAMA .....	348	Kekenovska I, Trajčova M. ПРИМЕНА НА СЕНЗОРНАТА ИНТЕГРАЦИЈА ВО РАБОТА СО ДЕТЕ СО РАЗВОЈНО НАРУШУВАЊЕ (приказ на случај) .....	455
Salaj I. OBRAZOVANJE DJECE S TEŠKOĆAMA U RAZVOJU U OKVIRU REFORME HRVATSKOG OBRAZOVNOG SUSTAVA .....	357	Kostić-Ivanović V, Trošanska J, Kalemđžievskа A. СЕМЕЕН КВАЛИТЕТ НА ЖИВОТ: СПОРЕДБА ПОМЕЃУ СЕМЕЈСТВА НА ДЕЦА СО ИНТЕЛЕКТУАЛНА ПОПРЕЧЕНОСТ И СЕМЕЈСТВА НА ДЕЦА СО ОШТЕТЕН ВИД .....	466
Karić E, Poljić A, Jakovljević M. INTERPERSONALNA KOMUNIKACIJA U INKLUZIVNOJ NASTAVI .....	373	Trajčova M, Kekenovska I. ТЕРАПЕВТСКО СЛУШАЊЕ И СЕНЗОРНА ИНТЕГРАЦИЈА, КОМПЛЕМЕНТАРНИ МЕТОДИ ВО ТРЕТМАН НА ДЕЦА СО РАЗВОЈНИ НАРУШУВАЊА .....	476
Čolić G, Prica Obradović N. PREVALENCIJA RIZIKO FAKTORA KOD DECE SA MOTORIČKIM GOVORNIM POREMEĆAJIMA .....	383	Trajčova M, Kekenovska I. СТИМУЛАЦИЈА НА РАЗВОЈОТ ПРЕКУ МЕТОДОТ НА ИНТЕГРАЦИЈА НА ПРИМИТИВНИ РЕФЛЕКСИ И СЕНЗОРНА ИНТЕГРАЦИЈА .....	487

Ivaņova I, Topuzovska G, Ivanov Z. CROSSFIT И УНАПРЕДУВАЊЕ НА КВАЛИТЕТОТ НА ЖИВОТ НА ДЕЦАТА ОД ПРЕДШКОЛСКА И ШКОЛСКА ВОЗРАСТ .....	497
Keskinova A, Ajdinski G, Buniamin M. КВАЛИТЕТ НА ЖИВОТ НА СЕМЕЈСТВОТО НА ДЕТЕ СО ИНТЕЛЕКТУАЛНА ПОПРЕЧЕНОСТ .....	502
Telovska N. ЗНАЧЕЊЕТО НА ПРОЦЕНКАТА НА ИСКУСТВОТО СО ПЕЛТЕЧЕЊЕ КАЈ ДЕЦАТА .....	513
Telovska N. APPLICATION OF THE INTERNATIONAL CLASSIFICATION OF FUNCTIONING, DISABILITY AND HEALTH STRUCTURE TO PERSON WHO STUTTER: A CASE REPORT .....	520
Vasilevska Petrovska I. ИМПЛЕМЕНТАЦИЈА НА СОЦИО-ЕМОЦИОНАЛНИ ИНТЕРВЕНЦИИ ВО ЕДУКАТИВНИОТ ТРЕТМАН НА ДЕЦАТА СО АУТИСТИЧЕН СПЕКТАР НА НАРУШУВАЊА ВО МАКЕДОНИЈА .....	525
Dukovska V, Duma F. ИНДИВИДУАЛЕН СЕМЕЕН СЕРВИСЕН ПЛАН (IFSP) И РАНА ИНТЕРВЕНЦИЈА .....	537
Dimitrijoska S. МАПИРАЊЕ НА СТРУЧНИТЕ ОРГАНИ КОИ ДАВААТ НАОД И МИСЛЕЊЕ ЗА ВИДОТ И СТЕПЕНОТ НА ПОПРЕЧЕНОСТА ВО ФИЗИЧКИОТ ИЛИ ПСИХИЧКИОТ РАЗВОЈ .....	542
Petrovska N, Kikerekova T, Jakovčevska L, Vukelj V, Bogatinova T. УЛОГАТА НА ДРЖАВНИОТ СОВЕТ ЗА ПРЕВЕНЦИЈА НА ДЕТСКОТО ПРЕСТАПНИШТВО ВО ГРАДЕЊЕ НА ПРЕВЕНТИВНАТА ПОЛИТИКА ВО РЕПУБЛИКА МАКЕДОНИЈА .....	553
Milenkovska B, Sterjadovska Stojčovska B, Sazdova D, Stefanovska A, Božinovski M, Bogdanovska S. ЛЕТНИТЕ КАМПОВИ ВО ФУНКЦИЈА НА СОЦИЈАЛНАТА ИНТЕГРАЦИЈА .....	563
Slavnić S, Kovačević J, Radovanović J, Jachova Z. THE QUALITY OF LIFE OF DEAF AND HARD OF HEARING STUDENTS IN BOARDING SCHOOLS .....	569

Petrušev G, Dvojakov I, Tomšić D. ОПРАВДАНОСТ ЗА ПРОМЕНА НА МОДЕЛОТ НА ПРОЦЕНА НА ЛИЦАТА СО ПОПРЕЧЕНОСТ ВО Р.МАКЕДОНИЈА .....	579
Jachova Z, Karovska Ristovska A, Naumoska K, Filipovska M. QUALITY OF LIFE OF DEAF ADOLESCENTS .....	581
Ramo AN, Petrov R. ИНДИВИДУАЛНИ ОБРАЗОВНИ ПЛАНОВИ ЗА ДЕЦА СО ИНТЕЛЕКТУАЛНА ПОПРЕЧЕНОСТ ВО Р.ТУРЦИЈА .....	595
Karovska Ristovska A, Rashikj-Canevska O, Stanojkovska-Trajkovska N, Jovanovska I, Ajdinski G. QUALITY OF LIFE IN PERSONS WITH INTELLECTUAL DISABILITIES IN DAY-CARE CENTERS .....	606
Tomeska SM, Spasov D. СОРАБОТКАТА СО РОДИТЕЛИТЕ НА ДЕЦАТА СО ПОСЕБНИ ПОТРЕБИ ОПФАТЕНИ СО ИНКЛУЗИВНА ПРОГРАМА .....	618
Nikolić S. LEKSIČKA RAZVIJENOST GLUVE I NAGLUVE DECE OSNOVNOŠKOLSKOG UZRASTA .....	629

## SLOBODNE TEME

Begić A, Krišto I, Milinković J. BIRELIGIJSKI I BIKULTURALNI BRAČNI PAROVI I DJECA .....	633
Terzić F. STRATEGIJE ZA UČENJE UČENJA U JEZIČKO-KOMUNIKACIJSKOM OBRAZOVNOM PODRUČJU .....	643
Perunović Samardžić J. UNAPREDJENJE KVALITETA LJUDSKIH RESURSA U VASPITNO- OBRAZOVNIM USTANOVAMA KROZ DOZIVOTNO UČENJE .....	656
Rajić D, Milić Z. SVETSKI PRVAK IZ BERLINA .....	665
Veljić Č, Đečević M. ZASTUPLJENOST METODSKIH KOMPLEKSA SOCIJALNOG RADA U USTANOVAMA SOCIJALNE ZAŠTITE U CRNOJ GORI .....	672

## PREDGOVOR

Zbornik Unapređenje kvalitete života djece i mladih publikovan je kao rezultat VI Međunarodne naučno-stručne konferencije „Unapređenje kvalitete života djece i mladih“ održane 19.-21.06.2015. godine u Ohridu, Makedonija. Radovi objavljeni u Zborniku posvećeni su kvaliteti života djece predškolskog i osnovnoškolskog uzrasta, kvaliteti života mladih i kvaliteti života djece i mladih s posebnim potrebama.

Još od prve konferencije slijedimo naš cilj a to je uputiti poticaj i izazov stručnjacima svih profila koji su na bilo koji način vezani za rad sa djecom i mladima, da pokušaju doprinijeti njihovoj boljoj kvaliteti života.

Zbog velikog broja učesnika ove godine štampana su dva dijela Zbornika, sa istim poglavljima:

- Plenarna izlaganja
- Tema I – Unapređenje kvalitete života djece predškolskog i školskog uzrasta
- Tema II – Unapređenje kvalitete života mladih
- Tema III – Unapređenje kvalitete života djece i mladih s posebnim potrebama
- Slobodne teme

Organizacioni odbor

Клучни зборови: проценка, попречност, меѓународна класификација на функционирање

## ABSTRACT

*Introduction:* In Macedonia, according to the Rules for specific needs assessment of individuals with disabilities in physical and mental development, adopted in 2000, assessment is based on a medical model. Since the tendency to identify children with disabilities is regardless of their eligibility for benefits, a new approach to the evaluation, in compliance with the International Classification of Functioning (ICF) and the accompanying version Children and Youth (ICF-DM) is needed. *Methodology:* The papers subject is about the proposed changes, as well as insight into the new proposed model for assessing the specific needs of people with disabilities in physical and mental development. The purpose of the paper is establishing justification for changing the current assessment model. Through the qualitative analytical approach a set of characteristics considering this model are defined. In order to improve the assessment results, the education law and the process of inclusion alignment is needed. An early age assessment is to be conducted, including continuous developmental monitoring, and a review of the assessment at the age of 2. Additionally, the accreditation of the results is to be achieved, through standardization of assessment tests. *Conclusion:* The new approach for the identification of individuals with disabilities will help to overcoming the dilemma between using very restrictive criteria for regulating access to insufficient resources, and the need to identify all children with disabilities as early as possible.

**Key words:** assessment, disability, international classification of functioning

## QUALITY OF LIFE OF DEAF ADOLESCENTS

### КВАЛИТЕТ НА ЖИВОТ НА ГЛУВИ АДОЛЕСЦЕНТИ

Zora JACHOVA, Aleksandra KAROVSKA RISTOVSKA,  
Kristina NAUMOSKA, Maja FILIPOVSKA

<sup>1</sup>Institute of special education and rehabilitation, Faculty of Philosophy, University "Ss. Cyril and Methodius" – Skopje, R. Macedonia

## ABSTRACT

*Introduction:* According to WHO (1997) quality of life means an individual perception of life situation in context of the culture and system values in which the persons live in correlation with their goals, expectations, standards and concerns. During the period of adolescence major and fast developmental changes occur and very little is known how this changes impact the quality of life of youth with hearing impairments. *Aim:* The aim is to determine the impact the hearing impairment has on the quality of life of adolescents and the way in which deaf adolescents perceive their physical and mental well-being. *Method:* In this quantitative study, four aspects of the quality of life were analyzed: social, physical, emotional and family aspect. Deaf students at the age 14 to 18 from DUCOR "Partenija Zografski" – Skopje were included, all with normal intellectual status. For this research standardized questionnaire for measuring the quality of life of deaf adolescents was used (Streufert, 2008, p.36). *Results:* Most of the deaf adolescents (58%) do not feel ashamed when meeting new people, but sometimes have problems in these situations (55%) and in the interaction with their friends (42%). The hearing impairment does not represent a barrier to attend cinema (55%) or parties (45%), as well as sport activities (74%). *Conclusion:* Generally speaking, the adolescents with hearing impairments have a good quality of life. Even though they feel different from others, it does not hinder their interaction with the people from the surrounding. However, the results show the problem the adolescents have in communication with persons they meet in the broader environment.

**Key words:** quality of life, deafness, adolescence.

## АПСТРАКТ

*Вовед:* Според СЗО (1997), под квалитет на живот се подразбира индивидуалната перцепција за животната ситуација во контекст на културата и вредносните системи во кои индивидуите живеат и во релација со нивните цели, очекувања, стандарди и грижи. Во текот на адолесценцијата настануваат големи и брзи развојни промени, но



сепак малку се знае за тоа како овие промени влијаат врз квалитетот на живот на младите луѓе со оштетување на слухот. *Цел:* Целта е да се одреди влијанието на оштетувањето на слухот врз квалитетот на живот на адолесцентите и начинот на кој глувите адолесценти ја перципираат својата физичка и духовна добросостојба. *Методологија:* Оваа студија е квантитативна студија во рамките на која беа разгледувани четири аспекти на квалитетот на живот: социјален, физички, емоционален и семеен аспект. Во истражувањето беа вклучени глуви ученици од ДУЦОР „Партение Зографски“-Скопје на возраст од 14-18 години, со уреден интелектуален статус. Во рамките на истражувањето беше користен стандардизиран прашалник за мерење на квалитетот на живот на глуви адолесценти (Streufert, 2008, стр. 36). *Резултати:* Најголемиот дел од глувите адолесценти (58%) не чувствуваат срам кога запознаваат нови луѓе, но понекогаш имаат проблеми при запознавањето (55%) како и во интеракцијата со пријателите (42%). Оштетениот слух не претставува пречка за помалку да посетуваат кино (55%) или забави (45%), како и да учествуваат во спортски активности (74%). *Заклучок:* Адолесцентите со оштетен слух генерално имаат добар квалитет на живот. И покрај тоа што се чувствуваат различни од другите, тоа не им го отежува значително остварувањето на интеракција со луѓето од средината. Сепак, резултатите укажуваат и на проблемот на адолесцентите во комуникацијата со лицата од пошироката средина со кои се среќаваат.

**Клучни зборови:** квалитет на живот, глувост, адолесценција.

## INTRODUCTION

The WHO defines this concept in a very broad manner: “Quality of life is defined as individuals' perceptions of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards, and concerns” (The World Health Organization Quality of Life Assessment Instrument [WHOQOL], 1995, p. 1403). During adolescence fast and large developmental changes occur, but still there is little knowledge about the manner in which these changes affect the quality of life of young people with hearing impairments. Other authors, including Mattejat and Renschmidt (2006), have tried to make this definition more precise. The latter see HRQoL as “the subjective perception and evaluation of the most important aspects of one's own life situation, in particular, one's own state of health and ability to function as well as to integrate socially and participate in all aspects of life appropriate to one's age” (Mattejat & Renschmidt, 2006, p. 12). Apart from the key qualities of one's state of health (physical, mental, social), this definition in the main addresses the issue of the different areas of everyday life that reflect HRQoL. For children and young people, these are, aside from the family domain, primarily the domains of school and leisure. Hearing tests do not provide a complete picture of the impact of an individual's hearing loss. While hearing tests can provide quantifiable information regarding the status of an individual's hearing loss, they cannot provide information regarding the effect of the hearing loss on a person's everyday function, or the handicap imposed by the hearing loss (Ventry & Weinstein, 1982).

Quality of life (QOL) refers to an individual's perceived physical and mental well-being (Parmet et al., 2002). Many factors that influence and contribute to a person's quality of life exist. A health-related quality of life (HRQOL) is concerned with those factors which influence a person's quality of life that can be affected by illness and their treatment. For example, a person's quality of life may be adversely affected by increased dependence on others due to pain brought on by an illness (Parmet et al., 2002). Numerous studies have revealed that adults with hearing loss have poorer mental health, physical and social functioning, and overall quality of life (Strawbridge et al, 2000; Dalton et al, 2003; Chisholm et al., 2007). The purpose of creating a quality of life measure is to assess the physical, emotional, and social dimensions of hearing loss. The advantage of using a generic health-related quality of life (HRQOL) questionnaire is that it allows for rating the quality of life of individuals and making comparisons across illnesses. Generic HRQOL questionnaires are not intended for a specific health condition but are nonspecific; they may lack validity or sensitivity to specialized subgroups.

## METHODOLOGY

The purpose of this research was to determine the impact the hearing impairment has on the quality of life of adolescents and the way in which deaf adolescents perceive their physical and mental well-being. This study had a quantitative character in which four aspects of the quality of life were analyzed: social, physical, emotional and family aspect. Each question was targeted for a specific area. The sample was consisted of 30 students with impaired hearing on the age from 14 to 18 from the state school center for education and rehabilitation “Partenija Zografski” – Skopje, all of them had normal intellectual status. For this research standardized questionnaire for measuring the quality of life of deaf adolescents was used (Streufert, 2008, p.36). The questioner was consisted of 28 questions.

The following hypotheses were made:

X0 – Deaf adolescents generally have a lower quality of life.

X1 – Deaf adolescents have negative experiences in the social participation in activities with hearing persons.

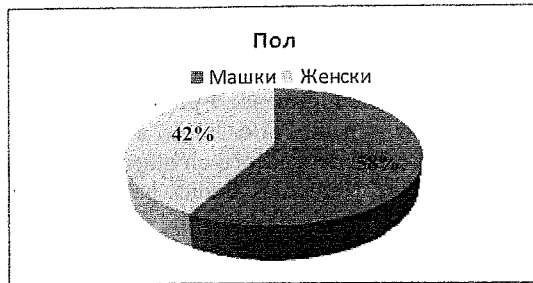
X2 – Deaf adolescents do not have problems in the performance of physical activities.

X3 – Deaf persons emotionally cope well with the hearing impairments.

X4 – Deaf adolescents are well accepted in their own families.

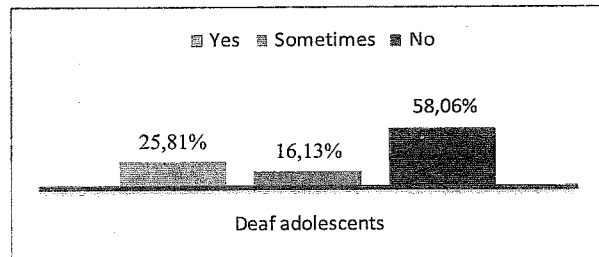
## RESULTS

Before undertaking the statistical analyses of the gained information we made a gender distribution analyses. The data is shown below.



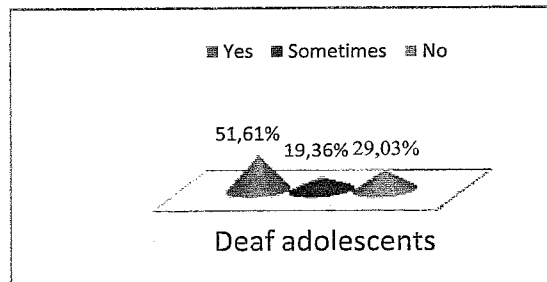
Graph 1. Gender distribution

Graph 2 shows that from a total of 30 deaf adolescents, 58% are male while 42% are female.



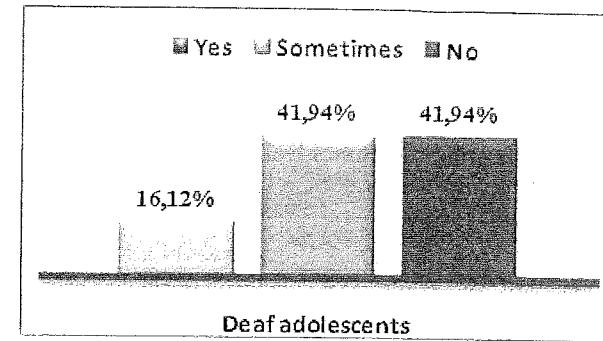
Graph 2. Do you feel ashamed when you meet new people because of your hearing?

From graph 2 we can notice that the largest number of deaf adolescents, 58,06% do not feel ashamed when meeting new persons taking into perspective their hearing impairment, 25,81% feel ashamed when they meet new persons, while 16,13% sometimes feel ashamed.



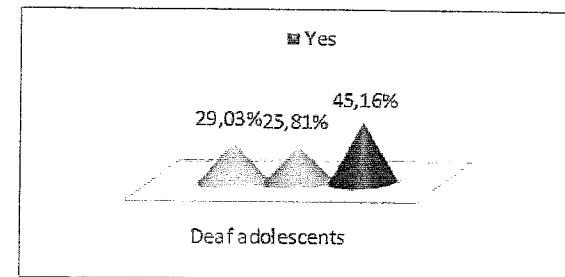
Graph 3. Does the hearing loss make you feel different from all the other people?

From graph 3 we can conclude that more than half of the adolescents, 51,61% feel that their hearing loss makes them different from all the others, 19,36% sometimes feel different because of the hearing, while 29,03% do not feel different from the others taking into consideration their hearing loss.



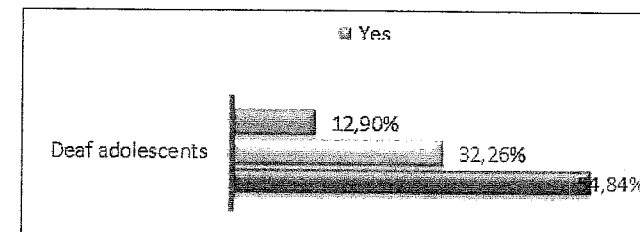
Graph 4. Do you have problems in the interaction with your friends because of the hearing loss?

From graph 4 we can see that 16,12% of the adolescents have problems in the interaction with their friends because of the hearing loss, 41,94% sometimes have problems, and the same percentage (41,94%) believe that they do not have problems in the interaction with their friends.



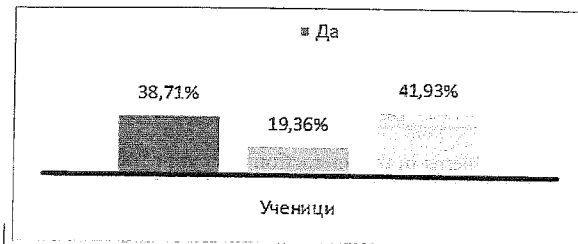
Graph 5. Do you have problems with watching TV or movies because of the hearing loss?

From the graph 5 above, we can see that the largest part of the deaf adolescents do not have problems during watching TV or movies, 25,81% from the deaf adolescents sometimes have problems, while in 29,03% of the adolescents we can see that they show problems while watching TV or movies because of their hearing,



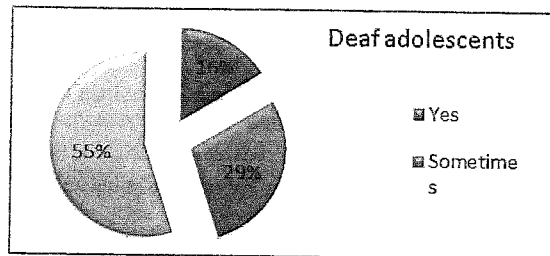
Graph 6. Does your hearing make you feel nervous?

Regarding this question, more than half from the adolescents, 54,84% answered that their hearing does not make them feel nervous, 32,26% of the adolescents because of the impaired hearing sometimes feel nervous, and in a small number of them (12,90%) the hearing impairment does not cause nervousness.



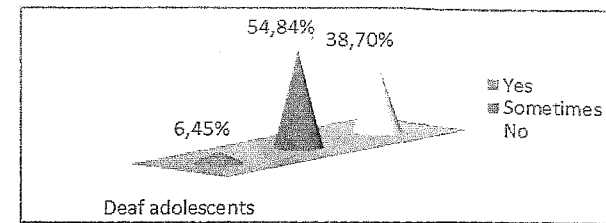
Graph 7. Do you speak less with your friends than you would like because of your hearing?

Graph 8 shows that 38,71% of the examinees talk less with their friends than they would prefer because of their hearing, 19,36% sometimes talk less, while the largest part of them 41,93% do not have communication problems with their friends.



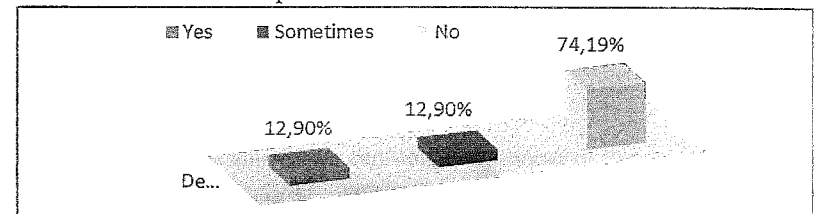
Graph 8. Do you have problems in the interaction with your family (parents, brother, sister) because of your hearing?

From the data shown in graph 8, we can notice that 16% of the examinees do not have problems in the communication with their family because of their hearing, 29% of them sometimes have communication problems, while the largest part of them 55% do not have communication problems with their family.



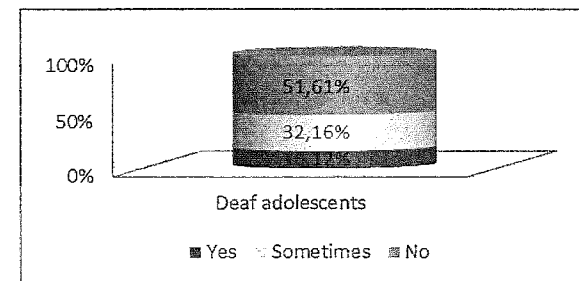
Graph 9. Do you have problems in restaurants because of your hearing?

From graph 9 we can see that a small number of the adolescents, 6,45% have problems in restaurants, more than half 54,84% sometimes have problem, while 38,70% of them do not have problems in restaurants.



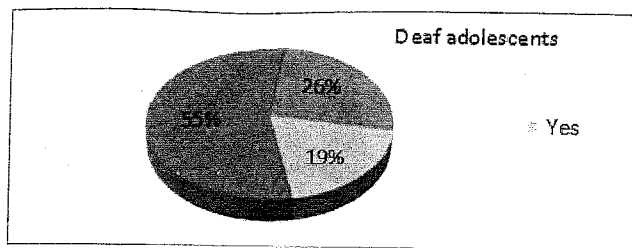
Graph 10. Do you participate less in sport activities or other types of activities in relation to your friends because of your hearing?

Graph 10 shows that in the largest part of the adolescents 74,19% the impairment in the hearing does not affect their participation in any sport or other activity in relation to their friends, in 12,90% of the adolescents, the hearing impairment affects their participation and in the same percentage (12,90%) the hearing impairment sometimes affects their participation in some activities.



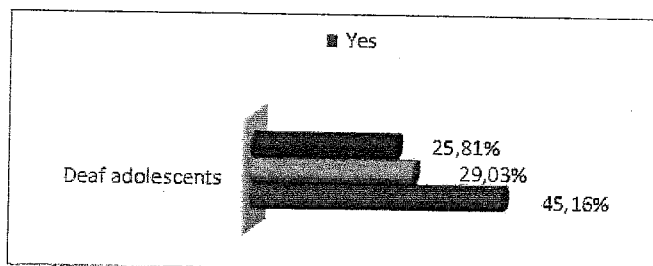
Graph 11. Do you feel rejected when you are in a group of people because of the hearing?

According to graph 10, we can notice that a small number of the students 16,12% feel rejected when they are in a large number of people, while a large number of the examinees 51,61% do not feel rejected, and in 32,16% of the adolescents this feeling occurs sometimes.



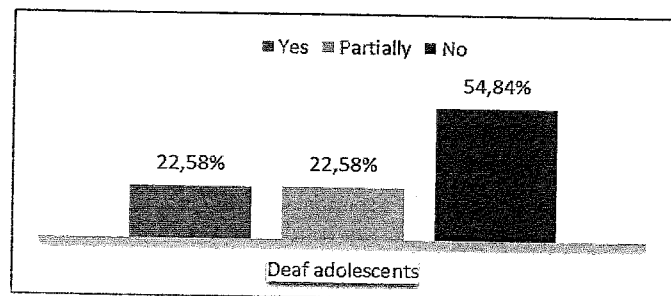
Graph 12. Do you have problems in meeting new people because of your hearing impairment?

From the results shown in the table 11, we can notice that more than half of the adolescents (55%) sometimes have problems in meeting new people, 26% from them don't have problems, while the rest 19% have problems in meeting new people because of the hearing.



Graph 13. Do you go less to parties than you would like because of the hearing?

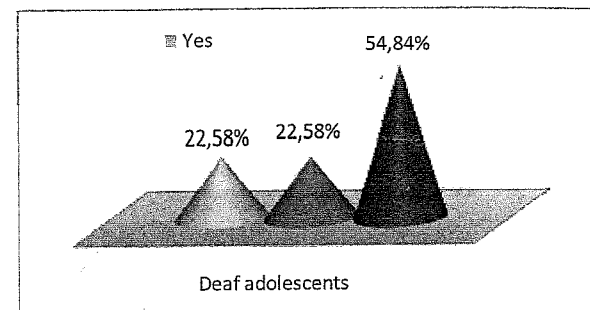
From the graph shown above, we can notice that 25,81% of the adolescents go less to parties than they would like, in 29,03% the hearing influences partially in the attendance to parties, while in 45,16% of the adolescents the hearing is not a problem for the party attendance.



Graph 14. Do you go less to the movies than you would prefer because of the hearing?

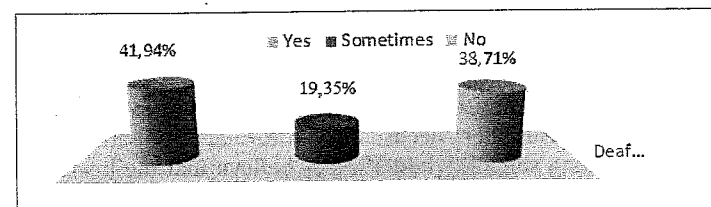
From the data shown we can notice that in the largest part of the students 54,84% the impairment does not affect their attendance to the movies, 22,58% go less to

the movies because of the hearing, and the same percentage (22,58%) believe that the hearing impairment partially influences their desire for the cinema attendance.



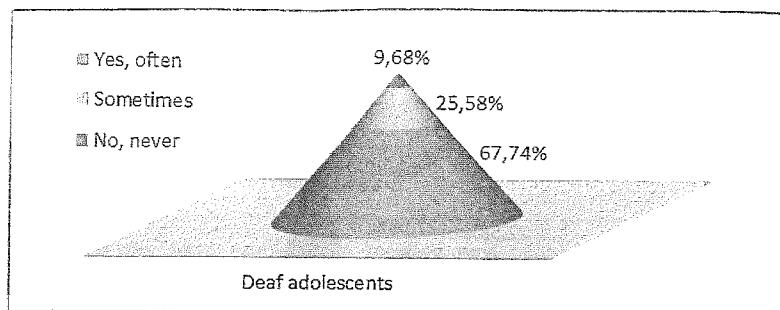
Graph 15. Do you have communication problems in your family (grandfather, grandmother, aunt, uncle, cousins)?

According to the results shown we can notice that most of the students 54,84% do not have problems in the communication with their family, 22,58% sometimes have communication problems, while the same number of students 22,58% have communication problems.

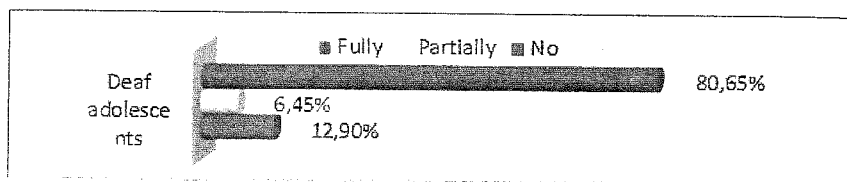


Graph 16. Do you have difficulties with the employees from the public institutions (market, post office, bank)?

According to the results we can notice that 41,94% have difficulties in the communication with the employees from the public institutions, 19,35% sometimes have difficulties, while 38,71% do not have difficulties.

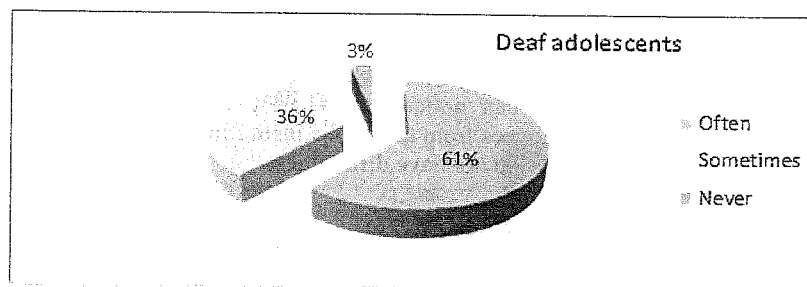


Graph 17. Do you socialize with persons that are not hearing impaired?  
 According to the data shown on the table, we can notice that the largest number of deaf adolescents 67,74% socialize with persons that are not hearing impaired, 25,58% sometimes socialize with them, while a small number of them 9,68% do not socialize with hearing persons.



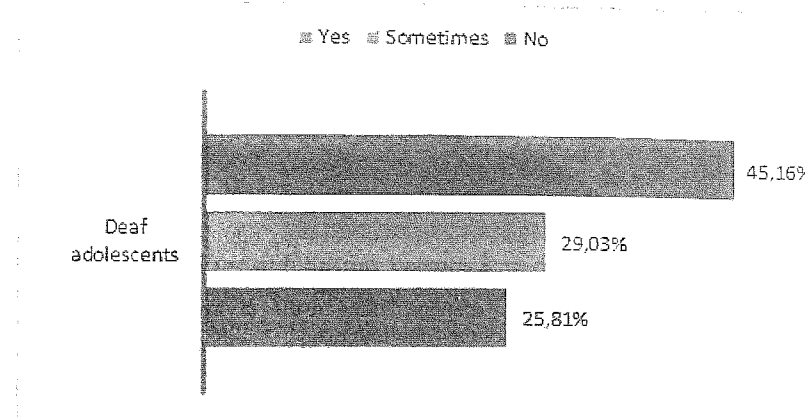
Graph 18. Do you believe that the boarding school satisfies your needs?

From the data shown we can notice that 80,65% of the adolescents fully agree that the boarding school satisfies their needs, 6,45% are partially satisfied from the conditions in the boarding school, while 12,90% believe that the boarding school does not satisfy their needs.



Graph 19. How often do you organize parties in the dormitory?

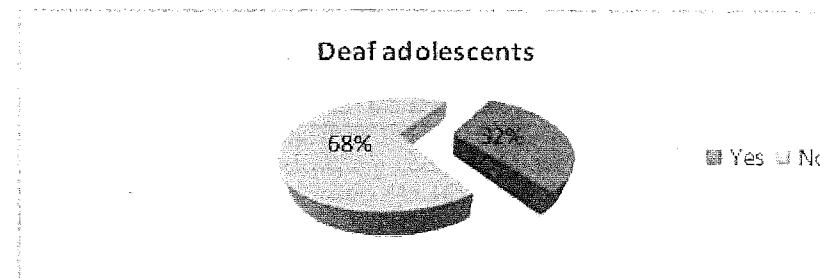
The results show that 61% of the deaf adolescents confirmed that they often organize parties, 36% of them only sometimes, and only 3% never organize parties.



Graph 20. Do you miss your family and the time spent with them?

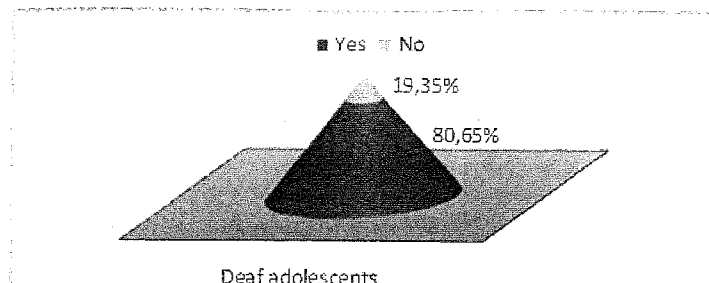
Graph 20 shows that most of the adolescents (45,16%) miss their families and the time spent with them. 29,03% said that only sometimes miss the family and 25,81% do not miss their family.

It is noticeable the largest part of the deaf adolescents (61,29%) always collaborate in doing the schoolwork, 38,71% sometimes collaborate with the peers and none of them (0%) stated that there is no collaboration among the students.



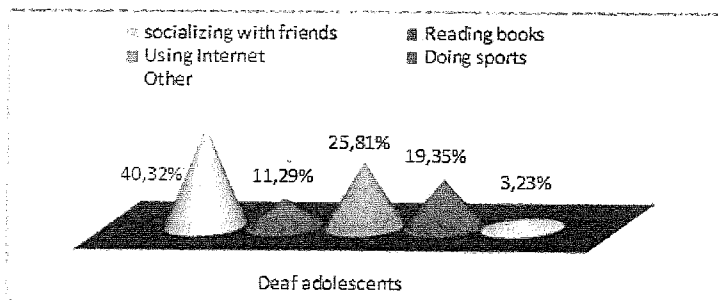
Graph 21. Do you have difficulties using the public transport?

According to graph 22, 32% of the deaf adolescents have some difficulties using the public transport, but 68% stated they have no such difficulties.



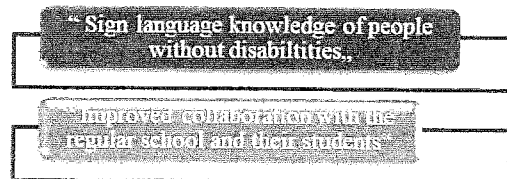
**Graph 22.** Do you think you would manage better in the environment if more people without hearing loss have knowledge of the Sign Language?

The results suggest that 80,65% of the deaf adolescents believe they would manage better in the environment if more people have the knowledge of Sign Language. Only 19,35% think that the knowledge of Sign Language would not change the situation.



**Graph 23.** How do you spend your free time?

According to graph 23, the deaf adolescents spend most of their free time socializing with their friends (40,32%), use the Internet (25,81%), practice sports (19,35%), read books (11,29%) and the rest 3,23% have some other activities during their free time.



## DISCUSSION

According to the results, the general hypothesis 'deaf adolescents generally have a lower quality of life' is rejected. There are positive results in almost all research aspects of the quality of life. Recently made studies regarding the quality of life of deaf adolescents show significantly lower scores, which do not correlate with the results gained in our research (Škrbić et al., 2013; Fellingner et al., 2005). The first hypothesis about the deaf adolescents having negative experiences in the social participation in activities with hearing persons is rejected. In all aspects concerning the social part of quality of life, deaf adolescents had no significant problems. 67.64% of the deaf adolescents very often socialize with persons with hearing impairments and 51.61% said that they never feel rejected when they are in a group of people. Also, the hearing impairment does not prevent them go less to parties (45,15%) or cinema (54,84%). Even though the overall finding of Fellingner et al. (2005) indicated poorer quality of life, the results in the social domain showed similarities to the general population. Just like in our research, the hearing impairment does not affect the aspect of social relationships. The second hypothesis regarding the performance of physical activities is confirmed. The percent of 74.19% of deaf adolescents said that they do not participate less in sport activities because of their hearing. Because the results of the questions referring to the emotional coping with the deafness indicate both positive and negative results, we can partially confirm the third hypothesis. 51.61% of the adolescents stated that the hearing loss makes them feel different from all other people. Anyway, 54.84% never feel nervous because of their hearing loss and 58.06% never feel shy when meeting new people. These results showing the self-esteem of the deaf adolescents overlap with the results of Warner-Czyz et al. (2015). The 50 adolescents with hearing impairment included in their research rated their global self-esteem significantly more positively than the hearing peers. The fourth hypothesis is confirmed. The deaf adolescents are accepted by their family and want to spend more time with the family members (45.16%) and 55% do not have difficulties in the interaction with them. Regarding the interaction and communication with the closest family members, a study of Kushalnagar et al. (2011) showed that as much as the deaf adolescents had smooth communication with their parents (understand everything they say) they reported a higher perceived quality of life.

## CONCLUSION

In general, the adolescents with hearing impairments in our research have a good quality of life. Very high results are gained in three of the examined aspects of quality of life (social, physical and family aspect). The emotional aspect is the only part where different results were obtained (positive and negative). Even though the deaf adolescents feel different from others, that do not hinder their interaction with the people from the surrounding. However, the results show the problem the

adolescents have in communication with persons they meet in the broader environment (restaurants, banks, supermarkets).

## REFERENCES

1. Chisolm, T.H.; Johnson, C.E.; Jeffrey L. Danhauer, J.L.; Lural J.P.; Portz, L.J.P.; Abrams, H.B.; Lesner, S.; McCarthy, P.A.; Newman, C.W. (2007). A Systematic Review of Health-Related Quality of Life and Hearing Aids: Final Report of the American Academy of Audiology Task Force on the Health-Related Quality of Life Benefits of Amplification in Adults. *Journal of American Academy of Audiology* 18 (151-183).
2. Dalton D.S.; Cruickshanks K.J.; Klein B.E.; Klein R.; Wiley T.L.; Nonhdahl D.M. (2003). The impact of hearing loss on quality of life in older adults. *Gerontologist*, 43, 661-668.
3. Fellinger, J., Holzinger, D., Dobner, U., Gerich J., Lehner, R., Lenz, G., Goldberg, D. (2005). Mental distress and quality of life in a deaf population. *Social psychiatry and psychiatric epidemiology*. 40 (9), 737-742.
4. Kushalnagar, P., Topolski, T.D., Schick, B., Edwards, T.C., Skalicky, A.M. and Patrick, D.L. (2011). Mode of Communication, Perceived Level of Understanding, and Perceived Quality of Life of Youth Who Are Deaf or Hard of Hearing. *Journal of Deaf Studies and Deaf Education*. 16 (4), 512-523.
5. Matzejat F, Renschmidt H. ILK. Inventar zur Erfassung der Lebensqualität bei Kindern und Jugendlichen. 2006. [ILC. Inventory of Life Quality of Children and Youth]. Bern, Switzerland: Huber.
6. Parmet, S.; Lynn, C.; Glass, R.M. (2002). Quality of Life. *The Journal of the American Medical Association*, 288 (23), 3070.
7. Škrbić, R., Milankov, V., Veselinović, M. i Todorović, A. (2013). Impact of Hearing Impairment on Quality of Life of Adolescents. *Medicinski pregled*. 66 (1-2), 32-39.
8. Strawbridge, W.J.; Wallhagen, M.I.; Shema, S.J.; Kaplan, G.A. (2000) Negative consequences of hearing impairment in old age: a longitudinal analysis. *Gerontologist*, 40, 320-326.
9. Ventry, I.M.; Weinstein, B.E. (1982). The Hearing Handicap Inventory for the Elderly: a New Tool. *Article. Ear & Hearing*. 3(3),128-134.
10. Warner-Czyz, A.D., Loy, B.A., Evans, C., Wetsel, A. & Tobey, E.A. (2015). Self-Esteem in Children and Adolescents With Hearing Loss. *Trends in Hearing*. 19, 1-12.
11. World Health Organization. (2008). Convention on the rights of persons with disabilities. Retrieved September 17, 2009, from <http://www.un.org/disabilities/convention/conventionfull.shtml>.

## ИНДИВИДУАЛНИ ОБРАЗОВНИ ПЛАНОВИ ЗА ДЕЦА СО ИНТЕЛЕКТУАЛНА ПОПРЕЧЕНОСТ ВО Р.ТУРЦИЈА

### INDIVIDUAL EDUCATION PLANS FOR CHILDREN WITH DISABILITIES IN R.TURKEY

Нергис РАМО АКЃУН<sup>1</sup>, Ристо ПЕТРОВ<sup>2</sup>

<sup>1</sup> Центар за Специјална Едукација и Рехабилитација, Чанаккале, Р.Турција

<sup>2</sup> Редовен професор во пензија, Филозофски факултет, Скопје, Р. Македонија

#### АПСТРАКТ

Стручниот тим од Центрите за насочување и следење во Р.Турција по детална процена на децата со интелектуална попреченост изработуваат Индивидуален образовен план. Реализацијата на активностите наведени во овие планови, се изведуваат во Центрите за Специјална Едукација и Рехабилитација. Извештајот за Индивидуалните образовни планови има за цел да ги претстави програмите за едукација на децата со интелектуална попреченост инклузирани во редовните училишта во Р.Турција. За потребите на овој извештај ги анализираме подрачјата предвидени за дополнителна едукација на децата со интелектуална попреченост одредени од Министерството за Образование на Р.Турција. Секое подрачје го анализираме според поставената цел, очекуваните достигнувања, одредениот број на часови, содржината на подрачјето како и начинот на оценување на постигнувањата. Едукативните програми за индивидуална поддршка на децата со интелектуална попреченост во Р.Турција се составени од девет подрачја. Целта на секое подрачје е одредена според очекуваните резултати за секое дете. Содржината на овие подрачја е поделена во најмногу 12 под-групи во кои се опфатени очекуваните достигнувања според активностите. Бројот на предвидени часови варира од 100 до 360 во зависност од индивидуалните разлики кај децата. Оценувањето на успешноста во постигнувањата на детето се одредува на два начини: преку да/не одговори на поставени прашања од подготвен формулар; и преку оценување на активноста со опис на реализацијата. Индивидуалните образовни планови во Р.Турција претставуваат организирана поддршка за децата со интелектуална попреченост вклучени во редовното образование. Успешноста на учениците се оценува преку усвојување на знаењата предвидени за девет подрачја, поделени според нивната содржина на одреден број активности.

**Клучни зборови:** Индивидуални Образовни Планови, Интелектуална попреченост, Р.Турција.

#### ABSTRAKT

The team of experts from the Centers for guiding and monitoring in R. Turkey after detailed assessment of children with intellectual disabilities makes an individual education