

PSYCHOLOGICAL AND LEARNING PROBLEMS OF IMMIGRANT CHILDREN FROM THE FORMER SOVIET UNION

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There are characteristic patterns of psychological and learning problems in immigrant children from the former Soviet Union. The breakdown of traditional support systems, as well as erroneous school placement, contributes to these problems. Fortunately, the use of proper diagnostic procedures, culturally sensitive counseling, and group activities for adolescents can alleviate even the most serious psychological and learning problems.

Learning problems and the problems of psychological adjustment in immigrant children have, at least since the 1960s, attracted considerable attention from researchers. The pertinent studies, however, almost without exception focus on immigrant children from Third World countries who made a dramatic transition from a traditional preindustrial culture to a developed industrial one (Gottesmann, 1988). In this article, we focus on the unique situation of mass immigration (aliyah) from one industrialized country (Russia and other parts of the former Soviet Union) to another (Israel). This wave of immigration is characterized by three exceptional features: its size, the educational level of immigrants, and the preservation of cultural ties with the country of origin.

1. *Size:* From 1989 through 1992 approximately 400,000 new immigrants from Russia arrived in Israel, which had a population of 4.5 million.
2. *Education:* The immigrants' level of education is exceptionally high; almost 50% of them are college educated.
3. *Cultural ties:* Political changes in Russia make it possible for the immigrants to preserve personal, social, and cultural ties with their country of origin. Russian television programs are received in Israel via satellite and cable networks, and Russian books and newspapers are readily avail-

able. In addition, there are over a dozen Russian-language periodicals in Israel with a combined weekly circulation of 1 million copies. There is a Russian-language radio station and a half-hour Russian-language news program on Israeli television as well.

All too often, the problems of immigrant adjustment are associated with such gross sociocultural categories as educational level and the "distance" between the native culture of immigrants and the culture of the receiving country. Current immigration from Russia provides ample evidence that these sociocultural parameters are not sufficient for predicting the problems of adjustment. A much finer mechanism of cultural transition within the immigrant group and the relationships between this group and Israeli society must be taken into account in order to understand the factors causing psychological and learning problems in immigrant children. One such important factor is the availability of mediated learning experience (Feuerstein, 1990; Feuerstein et al., 1990), which is crucial for successful adjustment and adaptation. Unlike direct exposure to new information, mediated learning presupposes the presence of an active human mediator, usually a parent, a teacher, or a more competent peer, who selects, interprets and adjusts information to the needs of the child. Children who were deprived of me-

diated learning were found to display a variety of cognitive and behavioral problems (Feuerstein, 1990).

The problems of immigrant children are dependent, on the one hand, on their psychological and learning conditions before emigration and, on the other hand, on the experiences of the immigrant families after their arrival in Israel. Therefore, this article begins with a brief description of Russian psychological and special education services and then examines immigrant experiences with corresponding services in Israel. Finally, it reports on the psychological problems of immigrant children identified during our clinical work with this population.

PSYCHOLOGICAL AND SPECIAL EDUCATION SERVICES IN RUSSIA

For a variety of socio-historical reasons, psychology in Russia has remained a purely academic discipline for the larger part of its history (Kozulin, 1984, 1992). Psychometric testing was banned in 1936, and psychologists were removed from the sphere of practical activity in educational settings. Qualitative methods of psychological assessment were used only in psychiatric hospitals and neuro-psychological clinics. Only in recent years were some standard psychometric methods based on Western techniques reintroduced in Russia. These innovations, however, had little effect on the educational system as a whole because they remain confined to a few capital cities. As a result, the majority of parents and children are not familiar with the role of the psychologist in a school setting.

The medical model of psychological and learning problems remains prevalent in Russia (Kissin, 1991). When a child displays severe behavioral or personality problems he or she is referred to a child psychiatrist. When problems do not seem severe enough to require the involvement of a psychiatrist they are "solved" through disciplinary measures. As a result, parents of

children who have psychological problems are reluctant to draw attention to them, since doing so may result in the child being labeled as "mentally disturbed" or being placed in a correctional boarding school.

When teachers observe that a child is delayed in development or learning, they refer him or her to a so-called medical-pedagogical commission. This commission, composed of pediatricians and special education teachers, is empowered to recommend the child's placement in a special school.

The Russian system of special education differs from both the Israeli and the American systems. Special education in Russia has developed into a highly differentiated system responding primarily to the needs of children with sensory defects and mental retardation. In some areas, such as the education of blind-deaf children, remarkable results have been achieved (Meshcheriakov, 1979; Knox & Kozulin, 1989). As a whole, the system is oriented toward the differential treatment of narrowly defined subgroups of special needs students (e.g., mentally retarded deaf children) in specialized educational frameworks. The emphasis is on differential diagnosis and specialized education, rather than on integration into regular schools.

The Russian system of psychoeducational classification does not have a category of "learning disability." The closest to it is the diagnosis of "delayed psychological development" (ZPR; Suddaby, 1986, 1992). Until recently, there was no special educational framework for students with ZPR. Some manage to stay in regular schools receiving no special help and others are transferred to schools for the mentally retarded. In recent years an attempt has been made to create special classes for this category of children. However, these classes, more or less equivalent to special resource rooms, have not yet become a standard feature of Russian schools. As a result, a considerable portion of learning-disabled children remain in educational frameworks that do not fit their special needs.

There is yet another group of children whose educational experience in Russia is problematic — children suffering from a chronic physical illness who cannot attend regular schools. In theory, there is provision for individual tutoring of these children at home or in the hospital. In reality, however, many of them receive much less than the full amount of instruction.

The conditions described above created several high-risk groups among immigrant children:

- learning-disabled children who were never properly diagnosed in Russia and whose educational framework was not chosen properly
- children who suffered from a chronic physical illness and who therefore received an inadequate education
- children with behavioral and personality problems whose parents were reluctant to seek professional help for them

THE IMPACT OF IMMIGRATION

The impact on children of making a major cultural transition is often underestimated. The relatively quick acquisition of spoken language and social conventions by some children obscures difficulties experienced by many others. This is particularly true of children who belong to one of the above-mentioned high-risk groups. For them the breakdown of traditional support systems has the most serious consequences. These support systems are (1) the extended family whose members often contributed significantly to the child's education and upbringing; (2) the informal network of friends and acquaintances who helped the family obtain access to educational and health services unavailable through official channels; and (3) the nuclear family itself, which often had a high enough social and economic status to cope with the child's special problems and which provided him or her with a sheltered home environment.

The extended family is often dismantled in the course of immigration, with some

members staying in Russia or residing in a different city in Israel. Even when the extended family is preserved — that is, children, parents, and grandparents — its support value changes dramatically. Grandparents, who previously contributed significantly to the child's education and socialization, are no longer able to function in this capacity because of their poor knowledge of Hebrew and Israeli culture. Moreover, the members of the extended family who, for economic reasons, are forced to live together develop conflicts that were absent in Russia where they lived in close proximity but separately.

Immigrants who are accustomed to relying on an informal network of friends and acquaintances to solve their problems often try to use the same approach in Israel. This strategy is ineffective for many simply because they lack such a network in the new country. What is more important, however, is that this approach, when it is used, often replaces the search for professional help.

Thus, instead of establishing good contacts with the school and learning about its psychological service, parents seek "a good doctor" among immigrants who would immediately solve all their child's problems.

The change in the social and economic status of the nuclear family also reduces its value as a support system. Parents are often so preoccupied with their own precarious situation and so focused on providing for the physical needs of the family that they "forget" about their children's special needs. The level of neurotization of children in the immigrant families is very high, because spouses rarely take special measures to shelter children from their own conflicts and expressed emotions. Taking into account the close involvement of immigrant children in their parents' life, this creates a highly stressful atmosphere.

All the above factors result in the decline of the ability of the immigrant family to provide the child with mediated learning experience. Grandparents who previously took care of cultural transmission in the

home setting are perceived as irrelevant since they do not understand Israeli culture. Parents often voluntarily abandon their role of mediators and let their children explore Israeli culture independently.

In addition to the breakdown of support systems, there is another phenomenon directly related to immigration that contributes to learning problems in immigrant children. The most vulnerable children in this respect are those who were 7 to 8 years of age when their families decided to leave for Israel. In Russia, primary school starts at the age of 7 and in anticipation of leaving for Israel, some parents chose not to send their children of that age to school in Russia. Some immigrant families change their place of residence several times during their first months in Israel. As a result, children who did not attend school in Russia continue to be deprived of systematic education. Often, such children start attending school on a regular basis only at the age of 9. The placement of immigrant children in Israeli schools is often carried out on the basis of age without consideration of their actual educational experience. As a result, some 8- or 9-year-old educationally deprived children find themselves in the third or fourth grade; such an erroneous placement only exacerbates their learning problems. Taking into account the relationships between education and cognitive development (Vygotsky, 1986; Moll, 1990), it is not surprising that many of these children display signs of severe learning disability. A survey conducted in the second, third, and fourth grades in several Israeli schools revealed a significant correlation between the original misplacement of immigrant children and their subsequent poor educational achievement (Kozulin, 1993).

IMMIGRANTS' EXPERIENCES WITH PSYCHOLOGICAL SERVICES IN ISRAEL

Experiences of immigrants with the educational psychological service in Israel are often shaped by two factors — their lack of knowledge and understanding of this ser-

vice and the absence of psychologists in this service who can communicate with them and understand their problems. At the beginning of the mass immigration of 1989-1992, in the whole of Israel there were only six Russian-speaking psychologists-practitioners. This situation was somewhat remedied recently when several immigrant psychologists were hired by the psychological service. Still, the number of Russian-speaking school psychologists is grossly inadequate, taking into account that approximately 80,000 immigrant children came to Israel in recent years. As a result of the shortage of Russian-speaking psychologists, many assessments are carried out through an interpreter, which limits their value considerably. Even more problematic is psychological and educational counseling carried out through the interpreter or in Hebrew that is poorly understood by the parents.

The linguistic barrier is not the only problem in the assessment of immigrant children. The effectiveness of the assessment depends on the chosen philosophy of the psychological testing and the methods used. For intellectual testing, WISC-R remains the preferred instrument of Israeli and American psychological services. This test is helpful in determining the manifest level of the child's functioning, but it is not suitable for establishing the learning potential of the child. In addition, the application of WISC-R presupposes that the child is familiar with psychometric procedures. For these reasons, WISC-R is not an ideal instrument for testing immigrant children who are unfamiliar with psychometric testing. These children are often unable to demonstrate their true intellectual and learning potential and score poorly. Educational psychologists then become mesmerized by the children's poor IQ scores. In some dramatic cases, the use of standard psychometric procedure has led to the classification of immigrant children with learning problems as mentally retarded, with subsequent placement in special schools for the mentally handicapped. Another prob-

lem stems from the tacit agreement between Israeli psychologists and educators that the assessment of immigrant children should be delayed until the child is capable of communicating in Hebrew. For a child with learning problems, this delay often results in placement in a regular classroom without any special help for a year or longer. Only when the child masters some Hebrew does it become apparent that his or her poor school performance cannot be attributed to the language factor alone. Such a child should have been given special assistance from the very beginning, probably by the special resource teacher. By keeping him or her in a regular class without assistance, teachers and psychologists exacerbate the child's learning problems.

PSYCHOLOGICAL AND LEARNING PROBLEMS OF IMMIGRANT CHILDREN

Sample and Methods

The typical patterns of psychological problems described below were identified in the course of psychological assessment and counseling of 237 immigrant children from Russia from 1990 to 1992. The assessment methods included clinical interviews with parents and children, the Learning Potential Assessment Device (LPAD; Feurstein et al., 1979), drawing tests, and the Thematic Apperception Test (TAT). All assessments were carried out in Russian.

The families of our clients had a higher educational level than the immigrant population in general: in 80% of the families at least one of the parents had a college degree. Over 40% of the families came from Moscow and St. Petersburg (Leningrad), and another quarter came from other large cities in the European part of the former Soviet Union. The remaining families came from Central Asia and the Caucasus, and the Baltic states. One-fifth of the families were single-parent families. Almost 80% of the assessments were conducted with school-aged children, the focus of this article.

Characteristic Patterns of Psychological Problems in Immigrant Children

Educational Deprivation

As already mentioned, many of the learning problems of immigrant children stem from the lack of a proper educational experience both in Russia and Israel. In the following case study, the condition of a child who probably had minimal learning problems before coming to Israel deteriorated because of systematic educational misplacement and the lack of proper help.

Galia was 11 years old when her family came for assessment and consultation. The family had emigrated to Israel 3 years earlier when Galia was 8 years old. She did not attend school in Russia because her parents were afraid of sending her to school in the middle of preparations for immigration. In Israel Galia was placed in the third grade on the basis of her age. Three months later, upon her mother's request, she was transferred to the second grade. Her achievements were not good, but both teachers and the family felt the cause was the girl's poor understanding of Hebrew. At the end of the first year of study, the family moved to a different town, and in the fall Galia was accepted to the third grade in a new school, once again apparently on the basis of her age. At the end of the second year Galia's achievements were still so poor that the school administration recommended sending her to a special school. Instead her parents transferred her to a state-religious school. She was reportedly also accepted to this school without any attempts to check her educational level. Teachers in the state-religious school soon discovered that Galia's level did not correspond to fourth grade requirements. She could not read at all and had difficulty recognizing Hebrew letters. She was offered some assistance in reading, but these efforts made little difference. At the end of the year, the school administration recommended that the parents send the girl to a school for the mentally retarded. It was at this point that the family came to us for assessment and consultation.

Galia's drawings turned out to be age appropriate. Her problem-solving skills were adequate when based on everyday experience. However, she demonstrated a severe lack of such cognitive skills as planning and task analysis. Her verbal sphere (both Russian and Hebrew) was impoverished, and she had great difficulty with abstract notions. Her speech was fluent, but syntax was primitive. Galia's mathematical skills were on the first-grade level. She could not read in either Russian or Hebrew.

It is probable that already at a preschool age Galia had some cognitive problems, such as a poor visual memory and a poor figure/ground separation. Yet, it was the erroneous placement and subsequent lack of attention to the girl's learning difficulties that resulted in severe educational deprivation, lack of mediated learning, underdevelopment of skills and strategies necessary for school-based learning, and a serious learning disability.

On the basis of the dynamic cognitive assessment (LPAD) of Galia's learning potential, we recommended that she be transferred to a special class for learning-disabled students in the framework of a regular school. This recommendation was positively accepted both by Galia's parents and by the school administration. One year after the assessment, Galia successfully finished fifth grade. Teachers reported that the girl is demonstrating good learning motivation and substantial improvement in Hebrew reading and writing. Her parents indicate that Galia has become capable of preparing her homework independently. This case indicates that, even at a relatively late stage, the dynamic cognitive assessment and placement in a proper educational framework can serve as effective means of fighting the consequences of educational deprivation.

Social Disorientation

This pattern of problematic behavior is directly linked to the transition from the environment of the Russian school to that of the Israeli one. The norms of child conduct in Israeli schools are less restrictive than those

in Russian schools. This objective difference is often perceived by immigrant children as an indication that in Israeli schools there are no rules or restrictions at all. In addition, children cannot capture a place in a school hierarchy corresponding to their aspirations. They therefore become frustrated, and it is not surprising that some display aggressive acting out, absenteeism, vandalism, and other behaviors bordering on conduct disorders.

The children's misconception of the limits of proper behavior is often further exacerbated by their parents. Some parents are unable to discern the difference between their children's deviant behavior and normal but unfamiliar behavioral patterns observed in Israeli children. Of particular importance is the parents' inability to distinguish between the high tolerance of Israeli society of the child's self-expression and the negative attitude toward aggressive behavior. Teachers' attempts to point out the problematic nature of the children's behavior are often received negatively and interpreted by parents as a sign of teachers' prejudice toward immigrants. Like a color-blind person who suffers from Daltonism, these parents are unable to discern the "multicolored" pattern of the new culture.

Boris was 7 years, 3 months old when brought to us by his parents, both of whom were college educated. The family had made aliyah 18 months earlier. In Russia Boris attended nursery school where teachers complained about his poor behavior; violations, however, were not very frequent. In Israel Boris's behavior became much worse; there were constant conflicts and physical confrontations with peers at school, stealing, and vandalism. His teacher observed that Boris did not understand simple rules obvious to other children. At home, the parents complained about Boris being stubborn and capricious and lying to them.

In the course of assessment it became clear that Boris, although quite intelligent, had some cognitive problems, such as poor

concentration, insufficient analysis of the task, and poor planning of his actions. From the interview and the data of personality tests, it became clear that Boris did not have a clear hierarchy of behavioral norms, his socialization was inadequate, and conformity was too low. Both drawing tests and TAT stories were full of aggressive individuals and animals and antisocial acts.

From the interview with the parents it became apparent that they themselves suffered from "cultural Daltonism." Instead of establishing closer contacts with the school, they distanced themselves, claiming that the school administration was hostile toward their son. They often put Boris in an awkward position by forgetting to give him food and other items necessary for school trips and by not supplying him with accessories for the holiday parties at school. It is important to note that the parents failed to connect these mishaps with Boris' problems. By punishing him in equal measure for insignificant conflicts and for stealing, they also failed to strengthen his hierarchy of rules.

Boris' case demonstrates the typical aspects of social disorientation: the low initial level of socialization of the child, certain cognitive problems affecting the child's ability to plan and control his or her actions, and the parent's own "cultural Daltonism" that prevents them from serving as positive mediators for their child.

At the same time the effect of social disorientation should not be perceived as irreversible. For 6 months Boris attended special therapeutic sessions based on the mediated learning model. During these sessions he was taught planning, self-control, and control of impulsive behavior and was trained in the hierarchization of social norms. During the same period counseling was provided for Boris' parents. At the end of the 6-month period a marked improvement in Boris' behavior became apparent. Serious violations of social norms ceased altogether. Boris' teacher also reported some improvement in the contacts between Boris and his peers.

Psychological Alienation

The inability to participate fully in the life of a new society often results in psychological alienation. The child or adolescent feels that a barrier exists between him or herself and the Israeli environment. The primary barrier is of course linguistic. Language acquisition in some children is complicated by such factors as poor phonemic hearing or verbal memory, specific learning disabilities, or neurotic reactions to failure during the initial stages of Hebrew study. As a result the child withdraws into him- or herself and becomes mentally encapsulated. A purely linguistic barrier is sometimes strengthened by the perception of the new environment as alien and hostile. This perception often concurs with that of the child's parents. Parents sometimes even advance a "conspiracy theory" about culturally poor Israelis who try to subjugate culturally rich Russian immigrants. One of the most typical adjustment problems is the child's refusal to go to school or kindergarten in an attempt to retain the state of mental encapsulation. The child stays at home, sometimes with grandparents, listens to Russian music, reads Russian books, and thus re-creates an illusionary world of his or her previous life.

In adolescents, adjustment problems are most often associated with their age-specific need for a reference peer group and their inability to find one quickly. Their mental encapsulation often takes the form of fixation on the idea of returning to Russia, at least temporarily, in order to rejoin their previous reference group and thus to regain their normal identity.

Nahum was 12 years, 4 months old when seen at our clinic. His family consisted of parents (research scientists), grandparents (pensioners), and a 6-year-old brother. The parents described Nahum as a precocious child who started studying at school early, always received only highest marks, but had difficulty establishing good contact with his

peers. In Israel he was studying in a prestigious boarding school where his marks continued to be high and his relationships with peers problematic. Clinical interviews, with Nahum, drawing tests, and TAT revealed a highly demonstrative personality that failed to find an outlet for his aspirations and put up a defensive mechanism of mental encapsulation. Life in Israel seemed to Nahum to be boring, meaningless, and potentially threatening. Fear of the Israeli environment resulted in defensive aggression directed primarily at Nahum's peers. In his drawings and TAT stories, Nahum constantly returned to the theme of an idyllic life in Russia. Nahum was not oriented in Israeli life and had no plans for future life in this country. As a dramatic gesture of rejection of this life, he refused to return to his boarding school.

Counseling provided to Nahum and his parents resulted in improvement in his social attitude. Nahum agreed to stay in the boarding school and his negative view of Israeli life changed. His attitude toward peers became more differentiated; although he still rejected many fellow students, he started seeking friendship with others. One may conclude that the stage of encapsulation is over for Nahum and that he has embarked on the difficult but real process of adapting to his new home.

The mental encapsulation of adolescents defies an easy solution. One possible method is to engage adolescents in group activities in which they can excel but that do not place a heavy emphasis on communicative skill, such as sports, dance, visual arts, or computer programming.

The worst case of psychological alienation is solitary mental encapsulation, which is why it is always preferable to involve adolescents in a group activity, even when it is conducted within an exclusive immigrant group. Psychological training groups and a club for immigrant teenagers in Jerusalem are two models of such group activity.

Psychological training groups are com-

posed of 15 teenagers (14-18 years old) meeting once a week for a period of 3 months. In the meetings, the teenagers are confronted with different tasks that require communication under constrained conditions, e.g., they have to communicate with a deaf person, thus discovering the possibilities of nonverbal communication. Discussion of the structure of different social groups and the type of interpersonal relationships in them and role playing of different group roles are other group activities.

The immigrant teenagers club provides opportunities for interaction in the context of cooperative activity, such as drama and literary discussions. Preliminary results indicate that the combination of the psychological training group with the club activities is essential, with the club serving as a supportive environment for the "graduates" of the groups. Participants demonstrated a sharp increase in the establishment of contacts with other immigrant teenagers, a decrease in negative behavior, and clarification of perspectives on their future lives and careers. One may hope that these first achievements will eventually lead to wider contacts with Israeli peers and positive integration into Israeli society.

CONCLUSIONS

Learning problems associated with cultural transition are not restricted to immigrant children from Third World countries. Educational deprivation resulting from erroneous school placement and/or lack of mediation in the family during this critical period may result in learning problems even in children of highly educated parents.

Many of the children's behavioral problems associated with social disorientation can only be dealt with when the entire family becomes a target of the remediation effort. Parents, as well as children, are in need of culturally sensitive cognitive training that would enable them to understand the cultural and social norms of the new society. Although our observations were made in the Israeli society, there are indica-

tions (Galperin, 1988) that similar problems are manifest in Jewish immigrants from Russia who settle in the United States.

Some of the problems of psychological alienation in younger children can be alleviated by remedial language teaching. Specific intervention, however, should be decided upon only after a careful examination of the child's speech development in the native language.

Our study revealed characteristic patterns of psychological and learning maladaptation in immigrant children from Russia. Many of the problems observed were exacerbated by the less than optimal functioning of psychological and educational services for immigrant children. At the same time, it became clear that the combination of proper diagnostic procedures (i.e., dynamic assessment), culturally sensitive counseling, and group activities for the youth can bring improvement even to the most difficult of cases.

REFERENCES

- Feuerstein, R., et al. (1979). Learning potential assessment device. Glenview, IL: Scott, Foresman, & Co.
- Feuerstein, R., et al. (1980). Instrumental enrichment. Glenview, IL: Scott, Foresman & Co.
- Feuerstein, R. (1990). The theory of structural cognitive modifiability. In B. Presseisen (Ed.), *Learning and teaching styles*. Washington, DC: NEA.
- Galperin, M. (1988). *Soviet Jewish emigre adolescents' adjustment to the U.S.* Unpublished Ph.D. dissertation. New York University.
- Gottesman, M. (Ed.) (1988). *Cultural transition: The case of immigrant youth*. Jerusalem: Magnes Press.
- Kissin, M. (1991). *Where do you put the electrodes? Issues in psychological testing and diagnostic assessment of Soviet refugees*. Paper presented at the National Conference on Health and Mental Health of Soviet Refugees, Chicago.
- Knox, J., & Kozulin, A. (1989). Vygotskian tradition in Soviet psychological study of the deaf children. In W. McCagg & L. Siegelbaum (Eds.), *The disabled in the Soviet Union*. Pittsburgh, PA: Pittsburgh University Press.
- Kozulin, A. (1984). *Psychology in Utopia: Toward a social history of Soviet psychology*. Cambridge, MA: MIT-Press.
- Kozulin, A. (1992). Psychology in the USSR. In J. Hogan & V. Sexton (Eds.), *International psychology*. Lincoln, NE: University of Nebraska Press.
- Kozulin, A. (1993). *Educational consequences of the erroneous placement of immigrant children in the primary school*. Final report to the Israeli Ministry of Education and Culture. Jerusalem: Hadassah-WIZO-Canada Research Institute.
- Meshcheryakov, A. (1979). *Awakening to life: Forming behavior and mind in deaf-blind children*. Moscow: Progress.
- Moll, L. (Ed.) (1990). *Vygotsky and education*. New York: Cambridge University Press.
- Suddaby, A. (1986). Children with learning difficulties. In J. Riordan (Ed.), *Soviet education for the gifted and handicapped*. London: Routledge.
- Suddaby, A. (1992). Reform of the Soviet general school and the likely effect on children with learning difficulties. In J. Dunstan (Ed.), *Soviet education under perestroika*. London: Routledge.
- Vygotsky, L. (1978). *Mind in society*. Cambridge, MA: Harvard University Press.
- Vygotsky, L. (1986). *Thought and language*, rev. Cambridge: MIT-Press.