

CHAPTER III

ELIMINATING THE PROBLEMATIC EDUCATIVE EVENT AS A TASK FOR ORTHOPEDAGOGICS

1. INTRODUCTION

The adequate realization of the event of educating includes a child optimally actualizing his/her psychic-life-in-educating. However, it is true that, from the earliest of times, educating has miscarried, and, also from that time, the following questions arose, “What to do now? How can the ‘problem’ be surmounted? How can the distressful situation be changed? How must there be further action?”

“Providing help” to a child in his/her problematic educative situation also has its origin in a distressful situation and is directed to eliminating the distress so that he/she will adequately become adult. As soon as it is asked what must be done about a problematic event of educating, the terrain of *orthopedagogics* has been entered. Numerous people have devoted themselves to helping “the child with problems” without first asking the question of the essential ground of this “problem” and, consequently, it took a very long time before this “specialized help” would be qualified as pedagogically accountable.¹

A question which immediately comes into the foreground is how such “special” help ought to look, and how it progresses in the practical situation between a provider of help and a “derailed” child by which, scientifically seen, the terrain of orthopedagogics announces itself as an integral part of an autonomous pedagogics.

In chapter one, it is noted that the pedagogical has not always been central to the help given to a child impeded in becoming adult, and in chapter two, it is shown that recognition of the “special” help given to children with physical defects, as *educative help*, is further hampered.

The “discovery” of the *problematic* event of educating, as that event in which a child inadequately realizes his/her becoming adult and, *because of this*, becomes conspicuous, has led to the idea that if the provision of help in this connection is not executed from a pedagogical perspective, the elimination of this “distressful situation” in which a child finds him/herself cannot be handled accountably.

In the following, there is a consideration of the pedagogical rootedness of the “special help” for a child-in-educating whose becoming is *impeded*.

2. ORTHOPEDAGOGICS AS PEDAGOGICS

As a *science*, pedagogics involves a purposeful, radical, and systematic search of the reality of educating for pedagogical categories, as *illuminative means of thinking* regarding its essential characteristics.²

The phenomenon of educating is a complex aspect of general human activities, and pedagogues concentrates on phenomena within this complexity of the reality of educating. Thus, one thinks of learning and of teaching, which are more particularly studied by psycho- and didactic-pedagogics, respectively; in addition to these two pedagogical disciplines, other *par-* disciplines of pedagogics have developed. Thus, e.g., there is fundamental pedagogics which, in its *systematic* search for real pedagogical essences, arrived at the following categorical expressions of the educative situation, i.e., pedagogical relationship, sequence, activity, and aim *structures*.³

The different part-disciplines of pedagogics, however, must not be arbitrarily investigated next to each other as if the one has nothing to say to the other, their problems have different identities, and their unity is lost in their multiplicity.⁴ Van der Stoep⁵ says there is only one educating, one educative reality and, therefore, only one science of educating. Orthopedagogics also has no other autonomy as a science than it has as an educative science.

When *educative failure* appears as an experiential fact, studying it is not of anything other than the phenomenon of educating. It also is

clear that, with the advent of orthopedagogics, a separate, autonomous discipline is not established. However, because it also has the aim of disclosing different aspects of educative failure, there is more specific reflection on these aspects, and such a perspective forms an integral part of this discipline, which takes as its object specific aspects of the phenomenon of educating, e.g., fundamental-(ortho)-pedagogics – where, in particular, there is reflection on the educative structures; didactic –(ortho)-pedagogics – where disharmony in the event of teaching, more particularly comes under the spotlight; psycho-(ortho)-pedagogics – where this has to do with disharmony in the psychic life of a child-in-educating. There also is reference to socio-(ortho)-pedagogics, physical-(ortho)-pedagogics, vocational orientation-(ortho)-pedagogics, historical- and comparative-(ortho)-pedagogics, etc.

As pedagogics, orthopedagogics has the aim of studying the phenomenon of educative failure and integrating this with the phenomenon of re-educating. It also involves itself with the grounding of an orthopedagogic theory, as the foundation for re-educating a child impeded in becoming in his/her problematic educative situatedness.

As far as the grounding of an orthopedagogic theory is concerned, it involves answering the following question: How must one *act* so that the child who now is not *adequately* becoming adult is able to do so? This specifically involves disclosing the *impeding moments of the educative dialogue*. With the help of its various autonomous part-disciplines, an *autonomous* pedagogics postulates pedagogical categories, as illuminative means of thinking about the essentials of the educative event.

A cardinal question which an orthopedagogue asks is *in what respect the child, the adult, or both participate inadequately in the educative event*. Thus, an orthopedagogue primarily directs him/herself to a *practical* situation in which the *pedagogical essences appear as disturbed, or attenuated*, i.e., where the event of educating is *not* realized adequately. The appearance of the various pedagogical essences (as *adequate*) is studied by the various pedagogical disciplines. As soon as these essences do not appear as *adequate*, and there is an enquiry about this, the terrain of the

orthopedagogic is entered. To answer these questions, there is a linking up with the knowledge already established by the various independent disciplines because the *inadequate, disturbed, attenuated* appearances of the essences are only describable in terms of *disturbances*, or *attenuations* manifested by the specific essences themselves—regarding what the disturbance itself entails, as well as its magnitude.

Moreover, this has to do with the question of *how* a unique child must now be helped to actualize his/her becoming adult as he/she ought to.

According to the currently accountable practice of pedagogics, which constitutes various part-disciplines, the answer to this question cannot be answered by one part-perspective, but all the relevant moments of these disciplines must be integrated with the aim of conclusively answering it.

Just as the fundamental knowledge of the various disciplines is foundational for constructing an accountable *teaching* practice, they also are basic knowledge for constructing an accountable orthopedagogic practice.

From this, it also seems that orthopedagogics has its *own standpoint*, in that it indicates how the various categories of the pedagogical disciplines can be applied to practice to eliminate a specific *problematic* educative event, and change it to a “problem free” one.

For example, when a child is identified as *restrained in his/her becoming*, there is mention of the *inadequate realization* of the fundamental pedagogical structures, on the one hand, and of an *inadequate actualization* of his/her psychic life, on the other hand (see chapter two). To now determine the *nature* of the *inadequacies* of *educating*, as well as of *under actualizing* the child’s psychic life, the *moments of disturbance or attenuation* are illuminated in terms of the reality of educating, and of actualizing the psychic life, respectively—in terms of *where* and *how* these *differ* from being *realized adequately*.

Since this specifically involves *inadequacies*, fundamental pedagogical and psychopedagogical criteria, respectively, are applied as *fundamental-(ortho)-pedagogical* and *psycho-(ortho)-pedagogical* criteria for evaluating the *disturbed* or *attenuated* appearance of fundamental educative essences, and the disturbed or attenuated appearance of the essences of the psychic life as such (see chapter six).

Thus, to determine the nature and origin of a *failure* in educating, the relevant categories of the various [pedagogical part-] disciplines must continually be placed in an *ortho*-perspective and implemented as such.

Thus, orthopedagogic practice is based on the resulting knowledge of the various disciplines which are integrated into a collective perspective. For this reason, an orthopedagogue must have sufficient knowledge of all the pedagogical disciplines (particularly of psycho-, fundamental and didactic-pedagogics) so that he/she can “draw out” relevant *ortho-moments* from each discipline, and organize them in his/her practice of orthopedagogic intervention.

Indeed, an orthopedagogue must explain and interpret hermeneutically the relevance of the various pedagogical categories for a *problematic* event of educating, and its elimination.

With this, orthopedagogics, as *pedagogic activity*, cannot be coupled with only one part-discipline as a subdivision. It can only be done justice as a *separate* pedagogical activity, and it must be stated clearly that orthopedagogics is practiced as an *autonomous* pedagogical activity with respect to its organization and functionality.

Many authors also emphasize the fact that pedagogics is always central to intervening with a “derailed” child. For example, Vliegthart⁶ says that all “deviant children” also are committed to education, that orthopedagogics is part of pedagogics, and that a general theory is formulated such that it will hold true for intervening with both a child who is becoming adequately, and for one who is not. The essential point of contact between pedagogics and orthopedagogics is that a child restrained in his/her becoming

in his/her problematic educative situation, thereby, has not lost his/her educability.

Valk⁷ says, for example, “where ordinary educating is deemed to be adequate because it attains its aim, one speaks of pedagogics. Where it is deemed to show the exceptional, one speaks of orthopedagogics”,* and Moor⁸ asserts “In general, special education, first of all, is little different from pedagogics. Indeed, special education is pedagogics. and nothing more.”** Also, for Nel,⁹ orthopedagogics is pedagogics.

The following is a closer consideration of the task and terrain of orthopedagogics as such.

3. THE TASK AND TERRAIN OF ORTHOPEDAGOGICS

In the preceding section, there is reference to the terms “orthopedagogics”, “Heilpaedagogik” [special education], “special” or “exceptional” help for a child restrained in his/her becoming adult and serves the choice of which of these terms is most accountable.

Until World War II, the term “Heilpaedagogik”, or also “Sonderpaedagogik” [special education] were very popular, especially in German-speaking countries while, for the most part, “special education” was mentioned in the Anglo-American countries. In South Africa, there is reference to “special education” [buitengewone onderwys]. The term “orthopedagogic” strongly entered the foreground in the Netherlands during the 1960s¹⁰ as a comprehensive concept for studying a child in his/her problematic situation of educating. It also had a wide influence in this country.

By an etymological reflection on the word “orthopedagogic”, it is seen that *ortho* and *pedagogic* are derived from the Greek words *orthos* and *paidagogia*, respectively. “Paidagogia” refers to *guiding* a

* [waar gewone opvoedkundige maatregelen toereikend zijn om dit doel te bereiken, spreekt men van pedagogiek. Daar waar buitengewone maatregelen zijn aangewezen spreekt men van orthopedagogiek]

** [Heilpaedagogik hast zunachst kein anderes generelles zul als die Paedagogik uberhaupt. Auch Heilpaedagogik ist Paedagogik und nicht anderes]

child, and aims to guide the child to adulthood, a guiding which essentially means that it will occur *adequately*, and that the child will be guided “rightly”, and not “wrongly”.

Orthos means *right, righten, straighten*¹¹, or *to heal, make healthy, or correct*, and coupled with *guiding a child*, the *inadequate* or *incorrect guiding* of a child, or *guiding which has progressed wrongly*, is accentuated. The *guiding* or *educating* is not “right”.

Since a child’s *handicap* initially was overemphasized to such a degree, many authors accepted, without further consideration, that “ortho” really refers back to a child’s *defect* or *deficiency* as such. In this connection, it is sufficient to refer to Vliegenthart¹² where he stresses that there cannot be mention of “curing” a child’s handicap, and this is not about “healing” an illness, and then he says, accordingly, there is a striving for “such a boy or girl to learn to live in a reasonable way with a *de facto* persisting defect.”^{13*}

When there also is a search for the nature of the “special help” executed by the “healing pedagogue” [heilpedagoog], it seems that a child’s physical handicapped-ness is central, and the *details* of this help are found in the fact that the educative activities must be carried out under aggravating, or difficult circumstances (arising from the child’s defect).¹⁴

Because it is accepted that “ortho” refers to the correction of one or another defect or deviation, the name *orthopedagogics* is objected to. For the same reason, the term “Heilpaedagogik” has fallen into disfavor, because the idea of *healing* twchich is brought into connection with “curing” is directly coupled with the defect because healing pedagogues have directed their work merely to the handicapped child.

There is wholehearted agreement with Ter Horst¹⁵ who says this is not about a deficiency or defect of the child which is “crooked” and must be “straightened out” because, with respect to blindness, deafness, or other defects, there is no mention of curing. In addition, linked up with Lubbers, Van der Zeyde, Klinkhammer and

* [zo ‘n jongen of meisje op een redelijke wijze leert te leven met een toch in feite blijvend tekort]

Kwakkel-Scheffer,¹⁶ who believe that the difficulty which has given rise to a restrained becoming can be removed, and that “the good child life can become re-established.”^{17*} Thus, this has to do with “straightening” the *child guidance* because, by implication, it is “crooked”; it involves *correcting* the *educating* which is troublesome. Consequently, the term “orthopedagogic” emphasizes the *problematic* event of educating, and that it must be corrected. Then there is mention of *special* ways of guiding, which result, and aids, which must be sought to now *further* help a child restrained in becoming precisely because the “existing” guidance *is not adequate*.

The central task for orthopedagogic practice then also is directed to correcting the educative activity¹⁸ involving a child whose becoming adult is restrained by his/her problematic educative situation.

However, in the orthopedagogic literature, this being restrained in becoming is not always clearly indicated as such, and there still often is reference to the handicap which should be located in the child him/herself, and which has contributed greatly to the fact that, even in 1970,¹⁹ there was still general uncertainty about the unitary character of orthopedagogic theory and practice, and that the problematic educative event is not clearly recognized, and acknowledged.

Thus, there is mention that a child has not actualized his/her becoming adult as it ought to be actualized, in accordance with his/her given potentialities under the accompaniment of adults. In orthopedagogics, a child’s *educability* is always central, and not his/her deviation, handicap, or defect as such.

Orthopedagogics studies and describes the disturbed appearance of the pedagogical, the disharmonious in an educative event, or the child’s being in a problematic educative situation, and what its possible elimination entails. Hence, on the one hand, it searches for the “different” self-actualization by a child of his/her becoming adult, i.e., his/her own role in his/her becoming adult and, indeed,

* [het goed kinderleven hersteld kan worden]

as its under actualization and, on the other hand, for the “different” educating, as an inadequate realization of the fundamental pedagogical structures.

Consequently, an orthopedagogue is confronted with a two-fold task, i.e., constructing an orthopedagogic theory, and designing an orthopedagogic practice.

3.1 Orthopedagogic theory

As pedagogics, orthopedagogics also asks the fundamental question about the essence of being a child, on the one hand, and his/her destination [i.e., adulthood], on the other hand.²⁰ Furthermore, orthopedagogics studies the phenomenon of becoming an adult in a problematic educative situation, and there is a search for everything which pertains to educative problems, and distress, but also for everything relevant to their possible prevention or solution. Hence, orthopedagogic theory is the result of the scientific penetration of the essence of the pedagogic situatedness of a child restrained in becoming adult and, as such this is essence-knowledge of a child whose becoming is restrained in a problematic event of educating.

It is only possible to arrive at this essence-knowledge phenomenologically and, thus, the phenomenological method has an important role in orthopedagogics.

From the above, once again it appears that general pedagogics has relevance for orthopedagogics, and that general pedagogical theory also continues to be valid for orthopedagogic theory.

Also, in orthopedagogics, there is reflection on a situation where a child comes to stand opposite an adult, and where the becoming adult of that child is realized in terms of the self-actualization of the child, and the accompaniment by an adult to such self-actualization—now more particularly *inadequate* self-actualization by the child, and *inadequate* accompaniment by the adult.

Because, in one respect or another, the child is restraint in *adequately* becoming adult, he/she finds him/herself in an educative situation which is *different* than that of a child who is

becoming *adequately* and now, the scientific disclosure, on the one hand, is attuned to the child's different situatedness, as a *problematic educative situation* and, on the other hand, to the *different* educating as such. Such thought-work is performed by *fundamental- (ortho-) pedagogics*, which is focused on the *inadequately* realized fundamental pedagogical structures, and shows what is involved in *inadequate pedagogical trust, understanding, and authority*; in an *inadequate pedagogical sequence and aim*, as well as in *inadequate pedagogical activities*.

Orthopedagogics specifically has to do with a child who inadequately ("differently") realizes his/her becoming adult, and its cardinal question is precisely how, in his/her problematic educative situation, he/she realizes his/her becoming adult differently. An answer is brought to light and verbalized by psycho-(ortho-) pedagogics in terms of psycho- (ortho-) pedagogical categories, such as *disharmonious*²¹ or *different*²² exploring, emancipating, distancing, differentiating, and objectifying. In essence, this entails a disclosing of the child's *different* actualization of his/her potentialities for becoming adult and, indeed, as an *inadequate* self-actualization of his/her psychic-life-in-educating. Thus, this not only involves the *fact* of actualizing his/her psychic life, but especially its actualization as *inadequate*, in terms of *self-under actualizations*, and moments of *inadequate* [adult] *accompaniment*.

Nel²⁴ says that ,as far as pedagogics and all its part-disciplines are concerned, it must be remembered that it is a science which not only wants to know how its "object of study" appears, but also how one must act with respect to that object. Thus, there is a practice which rests on the accountable findings of pedagogics as a science.²⁵

Ter Horst²⁶ also emphasizes that "special" education only knows the question of practice, and, thus, implies [it is] a practical science. He believes that orthopedagogics is practiced with the primary aim of eliminating the problematic and, e.g., says that "the scientific approach is used to change concrete problematic educative situations"²⁷ [de wetenschappelijke werkwijzen wordt benut om concrete problematische opvoedingsituaties te veranderen].

Hence, orthopedagogic theory also remains functional in orthopedagogic practice, where there is an attempt to eliminate the problematic educative situation of a child restrained in becoming [adult]. However, here it must be understood that the *explication*, the *verbalization* of this orthopedagogic effort, as an effort to “correct” the problematic educative situation of a unique child restrained in becoming really is “theory”, but then, as a description of a practice.

In addition, this leads indirectly to the approach of orthopedagogics as *historical- (ortho-) pedagogics* determining what “corrective work” was done in the past regarding the pedagogical situatedness of a child restrained in becoming adult, and is still being done in the present to interpret and further illustrate it for practice.

Sonnekus²⁸ says, in addition to scientifically reflecting on the investigation of and provision of help to a child in a problematic educative situation, as such, (i.e., the practice itself), orthopedagogics must also consider the possibilities of applying these results. This includes the scientific practitioner taking a child restrained in becoming adult in his/her problematic educative situation and arrives at a “theory” about this situatedness, and now he/she must return his/her findings to his/her practice and must establish an orthopedagogic practice in scientifically justifiable ways.

Alongside the justification of orthopedagogics, as a science, the orthopedagogic ways of acting must also find justification in a view of life, but which then signifies a post-scientific, couching of generally valid truths.²⁹

In the following, orthopedagogic practice is explored.

3.2 Orth pedagogic practice

3.2.1 Introduction

From the previous section, orthopedagogics also confronts the task of designing a scientifically accountable practice. Such an orthopedagogic practice has as its aim to make a problematic

educative situation unproblematic again, or free-from-educative problems. In terms of the *diagnostication* of and *provision of help* to a child inadequately becoming adult, on the one hand, a program of corrective educative action is established by which, on the other hand, the child can be supported to an *acceleration* in his/her *becoming adult* to reach that level of becoming adult on which he/she already should have been.

With respect to the field of work of orthopedagogics, Pretorius³⁰ mentions the physically and mentally handicapped, and children with educative and learning difficulties. To gain greater clarity in this respect, it serves once again to attend briefly to a child who is dependent on orthopedagogic intervention, where here *intervention* means the action by which a child is involved such that his/her problematic educative situatedness can be broken through, and his/her becoming adult can be “accelerated” to the level on which it ought to be. Thus, there is mention of “a new educative connection”^{31*} which arises. This child constitutes a “skewed” lifeworld for him/herself, and according to Vliegenthart,³² this is not “simply the result of growing to adulthood under difficult circumstances, but besides [the child] is continually forced to take a distance from a once formed image. ‘Educating to taking a distance’ is for this circumstance.”^{33**}

The orthopedagogue concerns him/herself with any child who is restrained in , or in danger of becoming so. For example, this involves the fact that, where a child has become impeded because of the presence of a psychotic mother in his/her pedagogical situation who is not ill enough to be institutionalized, but not well enough for living socially enough to intervene with her child’s becoming adult,³⁴ as well as, e.g., where a child who because of a handicap *can* become impeded in becoming adult. Any child whose pedagogically achieved [level of becoming] is not in accord with his/her pedagogically achievable level, or where there is the possibility that such a situation can easily arise, is a task for an orthopedagogue. It

* [een nieuwe opvoedingsgemeenschap]

** [eenvoudig om daarvan in die groeiende volwassenheid onder bezwarende omstandigheden, die bovendien telkens het eenmaal gevormde beeld opnieuw opdringen, afstand te nemen. ‘Opvoeding tot distantie’ is daar voor voorwaarde]

can also be said that these children distinguish themselves as “different” from the adequately becoming child. They are “different” because of an inadequately actualized psychic-life-in-educating, which results in the child’s becoming, *in comparison with the expected*, is not realized adequately, and a *gap* arises between the achieved and achievable level of becoming.

Also, when the findings of several authors are looked at regarding a child committed to orthopedagogic intervention, it involves this “difference”. Hence, Vliegenthart³³ says, for example, “With children who have become ‘very difficult to educate’ primarily through an unfavorable educative situation, and their further history, the definition of their view of the world, from this background often is such a starkly negative influence that one is inclined to speak of ‘necessarily being-different.’ ”*

The *problematic situation of educating*, as well as the *impediment in becoming* of a child are clearly suggested by Pretorius³⁶ when he comments that orthopedagogics directs itself to the pedagogically *distressful situation* of the child, and to his/her disturbed *lived experiences* and behaviors, in their relation to this situation. Most authors do not always emphasize either the *problematic educative event*, or the *impediment of becoming* of the child but, indeed, usually only suggest *where* the orthopedagogic commitment of the child in this context must be sought.

Thus, for example, Dumont³⁷ notes that orthopedagogics has as its object the educating of aggressive, asocial, restrained, insecure, nervous, anxious, behaviorally disturbed, impulsive children and makes it very clear that this has to do with children who *under actualize* their becoming adult.

The problematic educative situatedness, and the restrained becoming of a child comes strongly forth when Nel and Sonnekus³⁸, and also Stander and Sonnekus³⁹ refer to the fact that the child must

* [By kinderen die primair door een ongunstige opvoedingsituatie en door hun verdere historie tot ‘zeer moeilijk opvoedbaren’ zijn geworden, is de bepaaldheid van hun kijk op de wereld vanuit deze achtergronden veelal zo sterk in negatieve zin beïnvloed, dat men de neiging krijgt om te spreken van een ‘noodzakelijk anders-zijn’]

be *re-educated*, which also suggests a *problematic* educative event, as well as that the child inadequately actualizes his/her becoming adult.

Also, where Hanselmann⁴⁰ describes Heilpaedagogiek (orthopedagogics) as “die Lehre vom Unterricht, von der Erziehung und Fursorge aller jener Kinder deren koperlich seelische Entwicklung dauerend durch individuelle und soziale Faktoren gehemmt ist”, the restraint in the child’s becoming is clear, although he does not clearly show that impediment in becoming must mainly be attributed to a problematic situation of educating as such.

For Vliegenthart,⁴¹ it involves help and support to a child who is in a state of communication where the course of educating has become seriously impeded. Then he also describes orthopedagogics as the science “whose object is educating children who, for a variety of reasons remain, or for a long time are so seriously impeded in the progress of their being educated that, in a cultural community for the great masses of youth, the usual forms of educating do not provide results acceptable for the child and/or the community.”*

Although he demands that there be mention of “deviant”⁴² children, it seems that what he means by this is nothing more than “inadequate becoming”.⁴³ Thus, when he says orthopedagogics has to do with educating “handicapped”⁴⁴ children, “handicapped” really refers to a *hindrance* regarding the child’s becoming adult, hence, also his emphasis of the fact that it is children where “alarming behavior” arises that impedes their *expected* adulthood, either on the basis of the “mis-forming of the person”, exclusively, under the influence of the circumstances under which he/she lived in the previously given period, or on the basis of organic disturbances (deafness, poor hearing, etc).⁴⁵

* [die tot object heft de opvoeding van kinderen in wie door zeer verschillende oorzaken blijvend of gedurende lange tijd zo ernstige belemmeringen voor het verloop der opvoeding aanwezig zijn, dat de in een cultuurgemeenschap voor de grote massa van de jeugd gebruikelijke opvoedingsvormen niet tot een voor die kinderen en/of voor de gemeenschap aanvaardbaar resultaat voeren]

Although a child's *handicap* as such does not make him/her dependent on orthopedagogic intervention, he/she, indeed, is a task for orthopedagogics for the following reasons, among others:

- (i) Most parents experience an impotence regarding the task of educating their handicapped child;
- (ii) A handicapped child very easily becomes emotionally labilized;
- (iii) From the beginning, a handicapped child must be involved in special education just to prevent his/her being restrained in his/her becoming [adult];
- (iv) A handicapped child readily experiences his/her being-different as a being-inferior, and the surrounding world as deceptive and hostile, by which his/her world-image also becomes *different*,⁴⁶ and his/her pedagogical situation becomes problematic.

The first task of orthopedagogics, then, will be a penetration into each of the "surroundings experienced as different and, thus, as different children."^{47*}

3.2.2 Orth pedagogic diagnostics

The orthopedagogic program of providing help begins with a search for insight into the problematic event of educating in which a child who shows a *gap* between the achieved and the achievable finds him/herself and, particularly into its origins. However, to be able to speak of a *gap in becoming*, it must first be determined that there is a gap between a child's *possible* and *actual*, or, for example, as Dumont⁴⁸ states it, between [his/her] intelligence and learning.

Determining a child's impediment in becoming implies a *pedagogical* diagnostics. Each educator, but particularly each *pedagogue*, can determine *that* a child is impeded in becoming in terms of pedagogical criteria, and that a child, thus, finds him/herself in a problematic educative situation. However, irrespective of the weakness, or strengths of the *supposition* of what might underlie the restraint in the child's becoming, the educator [is

* [het omringende zo anders belevende, en dus zo andere kinderen], an activity that is qualified as orthopedagogic diagnostics]

not able to] know with scientific certainty why the child's educative situation is problematic and, thus, it is the task of an orthopedagogue to determine the *nature*, *scope*, and *origin* of the *impediment in becoming* of a child.

Orthopedagogic diagnostics is a difficult task, in that exploring and gauging restraints in becoming, and unsuccessful educating, cannot be done mechanistically.

In the first place, the impediment in becoming, as such, is determined, as is its nature in terms of the quality of actualizing the various ways of becoming adult, as ways of actualizing the psychic life of a child in his/her being educatively situated. This requires that there must be a penetration into the lifeworld of the child restrained in becoming, as a world of experiencing, willing, lived experiencing, knowing, and behaving by which an image can also be acquired of the attained level of becoming, and through evaluating this in terms of pedagogical criteria, an indication is gotten of a child's attained pedagogical level.

Sonnekus⁴⁹ says this includes a search, as a grounding of the essences in a child's world constituting, more specifically as a child in relation to an adult.

Also, it must be determined what the child's potentialities are for becoming adult, and at what age they can be expected of him/her, then it can be determined what his/her achievable level now is, and what his/her pedagogically achievable level is, or possibly will be.

The term *diagnosticating* is derived from *diagnose*, which refers to determining, or distinguishing an illness, according to its characteristics, or symptoms. To *diagnose*, then, means to determine an illness by diagnosing it; i.e., defining it according to its symptoms.⁵⁰ Thus, diagnose is really a medical term which refers to identifying symptoms of an illness to determine its nature and causal factors as a foundation for healing practices, or therapy.⁵¹

Because *diagnose* has a strong mechanistic and natural science connotation,⁵² the word *diagnostics* is preferred.

Diagnostics does not refer to identifying and studying an "illness" as a locally isolated phenomenon, but to penetrating a

disturbance in the child who is personally involved in his/her deficiency in relationship with the world, according to Sonnekus.⁵³

Rumke,⁵⁴ already in 1935, indicates that diagnostication is “the penetration of a unique, concrete case in its totality.”*

The activity of orthopedagogic diagnostication, first focuses on an exploration of a child-in-educating, which means that the moments of impediments in becoming are identified,⁵⁵ i.e., everything in a child’s situation of educating which makes it problematic. On the one hand, such an exploration includes a penetration of the child’s “different” realization of his/her psychic life-in-educating and, on the other hand, a penetration of the inadequate realization of the fundamental pedagogic structures, and the meaning he/she gives to them. His/her *different experiencing, willing, lived experiencing, knowing, and behaving* must also be gauged.⁵⁶ Briefly, *orthopedagogic diagnostication means exploring the lifeworld, as a personally significant world of a child impeded in becoming in his/her situation of problematic educating, with the aim of estimating the nature, seriousness, and origins of his/her being impeded in his/her becoming.*

Considering the above, it must be strongly emphasized that this does not merely involve identifying deficiencies or deviancies from symptoms, but an estimating and evaluating of a child’s lifeworld; as an indication of the restraint in becoming, as part of his/her relationships to the world which, as a person. He/she has constituted as a totality-in-function in his/her communication with the reality of educating.⁵⁷

Because the orthopedagogic diagnostician also tries to bring under control as many moments as possible which lead to adjusting the problematic, according to Ter Horst,⁵⁸ multi-disciplinary work can be done because “it is completely superfluous to usurp the neighboring orthopedagogic disciplines.”** To this it can be added that the orthopedagogic diagnostician’s work of exploring a child in a problematic educative situation can be distinguished from the haphazardness and unreliability which characterizes the work of a

* [het doorschouwen van het enkele concrete geval in zijn totaliteit]

** [het is volkomen overbodig dat de orthopedagogiek buurdsisciplines usurpeert]

non-scientist since he/she him/herself must justify his/her findings in various ways, such as also conversing with other orthopedagogues.

In a practical orthopedagogic situation of diagnostics, he/she strives for objectivity and avoids subjectivism by not simply applying tests, but “projects” him/herself into the child’s world via the fundamental methods (e.g., pedagogical observation, encounter, intuition) and then distances him/herself once again.⁵⁹

The sole aim of orthopedagogic diagnostics is to eliminate the problematic educative situation of the child restrained in becoming, and to then support him/her in the adequate actualization of his/her becoming in a pedotherapeutic event.

3.2.3 Pelotherapy

When a reliable image has been obtained of the lifeworld of a child impeded in his/her becoming within his/her problematic situation of educating, an orthopedagogue can proceed to support him/her in a purposeful, planned way to accompany him/her to optimally actualize his/her becoming until he/she has reached his/her pedagogically attainable level, and the orthopedagogic once again reverts to pedagogic accompaniment.

To distinguish this *special* help from *ordinary* educative help, it is referred to as *pedotherapy*. When the term *therapy*, which usually refers to treating, or curing illnesses,⁶⁰ is combined with *pedo*, this in no way means curing an illness,⁶¹ but helping a child “catch up” in his/her becoming.⁶²

Thus, this entails *exceptional* help because here there are exceptional circumstances, in the sense that, in one way or another, the child is impeded in his/her becoming adult and, because of this, he/she finds him/herself in a problematic situation of educating. Hence, the educative approach differs somewhat from that of a child adequately becoming adult.

Hence, this is also qualified as an *act of re-educating* because the child restrained in becoming cannot, in his/her present situation,

attain that level of adulthood of which he/she is capable.⁶³ Thus, the aim is to make the problematic educative situation of the child bearable, once more, so he/she can again acquire a perspective.

According to Sonnekus,⁶⁵ this essentially involves the child *accepting* and *assimilating* his/her different lifeworld, as a world of experiencing, willing, and lived experiencing. It is continually directed to correctively educating the child to accelerate his/her becoming so that he/she can reach what is pedagogically attainable. This is not applied psychotherapy.

Thus, for example, a child who is pathically-affectively flooded is helped to strengthen and build up his/her feelings of safety and security and, consequently, also his/her venturing attitude to try to bring him/her to more meaningful, acceptable, and accountable relationships with his/her world. A child is supported via purposeful experiences of the sense and meaning of life contents to proceed to discover more meaning in his/her task of becoming adult.⁶⁶

The support from the parents and teachers is always of importance, but the pedotherapeutic event must be viewed as establishing that situation in which an encounter occurs between the orthopedagogue, as pedotherapist, and the child impeded in becoming, during which he/she is purposefully helped to reconstitute his/her lifeworld, as a world of meaning.

In a pedotherapeutic situation, there is a conscious implementation of educative means, and the optimal realization of the fundamental pedagogic structures. Hence, there are planned pedagogic activities, as activities of re-educating, and this does not occur haphazardly, or as something obvious but, as Lubbers⁶⁷ says, it occurs by means of *guided symmorphosis* or a *planned mutual [adult and child] giving form* to life contents. Thus, now there is *meaning* [i.e., form] given together with the child and, in this way, he/she is helped to give meanings “other” than his/her “distorted” ones to life contents, so that gradually he/she also attributes to them the meanings which adults do.

This also implies [attributing] *different* meaning to his/her own anxiety, tension, insecurity, uncertainty, etc. This involves using symmorphosis as an educative means, as a purposeful, planned act of educating, by which the child is helped to escape from his/her educative distress.

The moments of [attributing] revised meanings provided by the orthopedagogue serve as a bridge by which the child, impeded in becoming, can take a short-cut to his/her pedagogically achievable level [of becoming], on which he/she should have already been; at the same time, this provides him/her with a short-cut for escaping his/her affective distress, and he/she can attribute “new”, “different”, and “favorable” meanings to his/her own situation. This is what Vliegenthart⁶⁸ qualifies as “giving meaning based on positive lived experiencing.”* These few ideas about pedotherapy suffice, and the interested reader is referred to the work of Pretorius⁶⁹ on the foundations of pedotherapy.

3.2.4 Additional tasks for an orthopedagogic practice

As a result of the event of diagnostication, the orthopedagogue knows whether the child is impeded in his/her becoming and, if so, something now must be done about it.

An important task which he/she now confronts is advising the parents, and other educators of the child regarding their pedagogical accompaniment of the child, particularly regarding the constituents of the problematic situation of educating. Because it also usually is the parents who can bring about a favorable constituting, it is necessary that they should be fully informed by means of an orthopedagogic conversation, during which their child's being restrained in becoming is fully disclosed, and the moments [in need] of adjustment are thoroughly discussed.

The child impeded in becoming also primarily directs an appeal to his/her parents to see to it that the problematic event of educating

* [zingeving op grond van positieve belevingen]

is “set right” again, which also includes a “change” in the activity of accompaniment because, as Lubbers says, it is only the communication between parents and children which can prevent the child from “an inclination to withdraw him/herself into fear and underhanded behavior” [neight zich in vrees en stiekem gedrag terug te trekken].⁷⁰ A conflict in trust between parent and child must be eliminated. Lubbers⁷¹ also says that the aim, among others, of pedotherapy is to bring the child impeded in becoming back to his/her parents.

Since the parents are co-responsible for the development of the problematic situation of educating, it is obvious that they will not always be aware of *what* the underlying problem is, and *how* to make it “right” again. In this regard, they are committed to the professional advice of the orthopedagogue. Often, the orthopedagogue finds that it is not even necessary to involve the restrained child in pedotherapy, because the “different” behavior of the parents, which has led to the problematic situation of educating, can be eliminated because of the insight they have arrived at during the orthopedagogic conversation.

Thus, the orthopedagogue must be up on all possible origins of impediments in becoming to be able to exercise his/her comprehensive task. Therefore, he/she also continually conducts a search for the origins of a problematic educative situation, how there are purposeful ways of exploring, and arrive at insight into the problematic situation, on, the one hand, and the child’s actualization of his/her psychic life in it, on the other hand; and how the emergence of a problematic educative situation possibly can be avoided, also by making use of the knowledge of possible helping sciences.

Thus, an orthopedagogue is confronted with a complex task. He/she must keep him/herself broadly informed. By means of the diagnostics, he/she must determine the problem in terms of its nature, scope, and origins. Furthermore, he/she must provide corrective educative help for accelerating the child’s impeded becoming adult, and the elimination of his/her problematic situation of educating. He/she also accompanies the child’s parents and teachers in the problematic situation of educating, whether by

means of orthopedagogic advice, or by actual *parental accompaniment*, by which is meant that the parents are accompanied in the practical problematic educative situation, with respect to their educative tasks, a terrain which is more specifically entered by a *socio-orthopedagogue*.

However, he/she also studies the various handicaps, or so-called specific forms of disturbance, on the one hand, because any handicap can easily lead to an educative situation becoming problematic and, on the other hand, he/she studies the best ways and means of disclosing the ways in which a handicapped child can be accompanied to adequately actualize his/her potentialities of becoming.

Knowledge of the forms of disturbance is necessary, with the aim of determining the potential moments of corrective possibilities a specific sort of handicap might contain.

Nel⁷² indicates that the handicapped child also is a task for orthopedagogics because it has to do with identifying difficulties or hindrances in a child's being-on-his-way to adulthood, and the pedagogical help offered.

Also, a handicapped child has a need for "special" pedagogic help because, from his/her handicap, he/she is "different" from the non-handicapped. Thus, a blind child's blindness demands that "special" help be given with respect to It, so he/she can adequately realize the potentialities of becoming at his/her disposal.

As soon as educating or teaching can be qualified as "special" or "exceptional", it distinguishes itself from "ordinary" teaching or educating. Particularly, with *special* or *exceptional* teaching, the emphasis falls on the "different" methods related to this handicap, than with a non-handicapped child. A group of *weak-sighted* children, indeed, cannot read from a chalkboard as can adequately seeing children, etc. With respect to a group of children of one type of handicap, in the sense that they are all, e.g., deaf, or have cerebral palsy, etc., there is mention of "similarity" only in so far as there is reference to one type of defect.

In special, or exceptional teaching, there is concentration on the nature of the specific help necessitated by the handicap, with the aim of carrying on an optimal dialogue with each of these children. The specific defect must be considered by the teaching to properly support these children to broaden their lifeworld via their available, and given potentialities.

In the first place, special teaching has to do with helping a specific handicapped child with a lasting defect to learn to live in the best way possible. Such help is still not authentic orthopedagogic help, but this is only so as soon as the expected level of becoming adult is not reached. Special teaching is not directed to *accelerating becoming* but, on the one hand, to the child's adequate actualization of his/her given potentialities, and, on the other hand, to the *purposeful* prevention of possible impediments in becoming of a handicapped child.

However, it is a fact of experience that handicapped children often surely show restraints in becoming, irrespective of special teaching. Then, the child in a special school also is committed to orthopedagogic accompaniment.

Special teaching and orthopedagogic help, however, are still seen as the same matter by several persons. *Indeed, if this is the case, then this means that special teaching in advance of the inadequate accompaniment of the handicapped child allows him/her to adequately actualize his/her potentialities.* It must be emphasized that "blind-pedagogics, deaf-pedagogics, debilitative-pedagogics"^{73*} essentially are no less authentic orthopedagogic work than teaching the gifted.

Because the blind and deaf child are "completely" educable,⁷⁴ they are committed to *special* educating which will *consider* their defect, and support them to self-accountable, self-determination⁷⁵ because, despite their handicap, there also is for them a personally dignified form of adulthood to be attained. Thankfully, and irrespective of special and exceptional teaching, several handicapped also attain independent adulthood. The fact that many of them reach

* [blindenpedagogiek, dovenpedagogiek, debielejnpedagogiek]

adulthood only later than the non-handicapped does not in any sense mean they are retarded in their becoming; it is expected that an intellectually handicapped child will take longer, e.g., to arrive at an adequate gnostic-cognitive grasp of life contents and, thus, also to grasp life's demands of propriety, than the highly gifted. Only when he/she *under* actualizes his/her given intellectual potentialities (whether limited at all), and/or a number of other potentialities, is there mention of an impediment in becoming.

If a handicapped child, however, is involved in an "ordinary" didactic situation along with non-handicapped, from this the usual result is that he/she under actualizes his/her learning potentialities. Because his/her "deficiency" is also so burdensome, it often happens that a number of handicapped children, also irrespective of special educating, are impeded in becoming. Then, indeed, they are committed to orthopedagogic help, in addition to special education. Also, in a special school, it cannot always be shown with certainty where special education ceases, and orthopedagogic accompaniment begins. For this reason, it is necessary that a teacher in a special school also must be a thoroughly prepared orthopedagogue.

4. SYNTHESIS

In this chapter it is shown that a child who finds him/herself in a problematic situation of educating, in which his/her becoming adult is inadequately realized, is a phenomenon to be studied by pedagogics and, particularly orthopedagogics. Also, the orthopedagogue, by providing practical help, can eliminate the problematic situation of educating.

Orthopedagogics is that science which specifically has as its object of study the problematic educative reality, and the child impeded in becoming within it.

Orthopedagogic practice, then, includes disclosing and interpreting the event of restraints in becoming adult in terms of pedagogical categories with reference to attenuated and disturbed appearances of pedagogic essences, by which the educators and child find themselves in a problematic situation of educating. Also, it includes an investigation of eliminating the phenomenon of problematic

educating, and, in connection with this, what accelerating becoming adult entails.

As a science strongly directed to practice, orthopedagogics provides guidelines for how *activities* must be taken for eliminating the problematic event of educating. It indicates how the experiential world, as world of meaning of a child impeded in becoming can be gauged in an orthopedagogically diagnostic way; how the essential nature of a unique child's impediment in becoming can be fathomed; how his/her pedagogically achieved level can be evaluated in terms of pedagogic criteria, and how an indication of his/her pedagogically achievable level can be found; how the most important constituents of his/her problematic situation of educating can be disclosed; how there can be an accountable planning to re-educate the child by means of the pedotherapeutic event, by which a child is supported to an *acceleration* in his/her becoming adult, via a redefining of life contents in such a way that they will mean what they *ought* to mean; how to advise the educators and, where necessary, accompany them in assimilating and eliminating educative problems and particularly regarding their adequate realization of the fundamental pedagogic structures; how, in general, to help them avoid contributing to a problematic educative situation; and how to teach and accompany a handicapped child in a "special" way so that he/she is not impeded in his/her becoming.

Thus, it is evident that a person who will dare provide help to a child impeded in becoming in his/her problematic pedagogic situation, in the first place, must be thoroughly acquainted with the essences of the educative event to be able to determine criterially [i.e., in terms of these essences] if, indeed, there are educative problems and, if so, be able to know how he/she can realize these essences in his actual intervention with such a child. This also requires that he/she know what becoming essentially includes, and how it is realized by the child him/herself with the aim of gauging moments of its under actualization. If, in this context, he/she has determined criterially that becoming has not occurred adequately, he/she must also be able to determine *where* the problem is, *what* underlies its distorted course, and *how* it can be corrected.

REFERENCES

1. See chapter I.
2. Landman, W. A. and Roos, S. G.: *Fundamentele Pedagogiek en die Opvoedingsweerklikheid*. Butterworths, Durban, 1973, pp. 56-57.
3. Landman, W. A., Roos, S. G. and Liebenberg, C. R., op. cit.
4. Van der Stoep, F.: *Voorword*, in: Sonnekus, M. C. H.: *Onderwyser, Les en Kind*, University Publishers and Booksellers, Stellenbosch, 1975, p. xiii.
5. Ibid.
6. Vliegenthart, W. E.: *Algemene Orthopedagogiek*, op. cit.
7. Valk, J.: *De Inhoud van een Orthopedagogische diagnostiek*, in: *Tijdschrift voor Orthopedagogiek*, Vol. 2, No. 9, Sept. 1963, p. 247.
8. Moor, P.: *Heilpaedagogische Psychologie*, Part II, Hans Huber, Bern, 1958, p. 12.
9. Nel, B. F.: in: *Die Leermoeilike kind*, op. cit., pp. 10-14.
10. Nel, B. F.: *Die ortopedagogiek as wetenskapsgedied van die pedagogiek*, in: *Suid-Afrikaanse Tydskrif vir die Pedagogiek*, Vol. 3, No. 1, July 1969, p. 2.
11. See Stander, G. and Sonnekus, M. C. H., op. cit., p. 14.
12. Vliegenthart, W. E., op. cit., p. 32.
13. Ibid.
14. See (i) Lubbers, R., op. cit., p. 6. (ii) Van der Zeyde, N. F.: *Opvoedingsnood in Pedagogiese Spelbehandeling*, Erven Bijleveld, Utrecht, 1962.
15. Ter Horst, W.: *Een orthopedagogisch gezichtspunt*, op. cit., p. 3.
16. Kwakkel-Scheffer, J. J. C., op. cit., p. 74.
17. Ibid.
18. Nel, B. F. in: *Die Leermoeilike kind*, op. cit., p. 27.
19. See Vliegenthart, W. E., op. cit.
20. See Stander, G. and Sonnekus, M. C. H., op. cit., p. 19.
21. See Sonnekus, M. C. H.: *Onderwys, Les en Kind*, op. cit., p. 78.
22. See Sonnekus, M. C. H.: *'n Ortopedagogiese perspektief op die kind met leer- en opvoedingsmoelijkhede*, in: *SAVLOM-Bulletin* 1974, No. 1, p. 19.
23. Sonnekus, M. C. H. (Ed.): *Psigopedagogiek: 'n Inleidende Oriëntering*, op. cit., p. 11.

- 24.Nel, B. F.: *Fundaamentele oriënteering in die psigologiese pedagogiek*, op. cit., p. 67.
- 25.See Van der Stoep, F.: *Die stand van die Pedagogiekstudie in die moderne tyd*, *Pedagogiekstudies* No. 69, Work Community for the Advancement of Pedagogy as a Science, University of Pretoria, pp. 12-15.
- 26.Ter Horst, W.: *Proeve van een Orthopedagogisch Theorie-concept*, op. cit., p. 12.
- 27.Ibid, p. 13.
- 28.Sonnekus, M. C. H., op. cit. No. 22, p. 20.
- 29.Ibid.
- 30.Pretorius, J. W. M.: *Ortopedagogiek: Terugblik, Stand en Toekomspektief* in: *Suid-Afrikaanse Tydskrif vir die Pedagogiek*, Vol. 7, No. 2, December 1973, pp. 68-69.
- 31.Kwakkel-Scheffer, J. J. C., op. cit., p. 71.
- 32.Vliegëthart, W. E., op. cit., p. 56.
- 33.Ibid.
- 34.See Ter Horst, W., op. cit., pp. 13-14.
- 35.Vliegëthart, W. E., op. cit.
- 36.Pretorius, J. W. M.: *Grondslae van die Pedoterapie*, op. cit., pp. 39-40.
- 37.Dumont, J.J.: *Othropedagogiek, Pedotherapie en Opvoeding*, in: *Suid-Afrikaanse Tyskrif vir die Pedagogiek* Vol. 3, No. 2, December 1969, p. 49.
- 38.Nel, B. F. and Sonnekus, M. C. H.: *Psigiese beelde van kinders met leermoeilikhede*, op. cit.
- 39.Stander, G. and Sonnekus, M. C. H., op. cit., p. 17.
- 40.Hanselmaann, H.: *Einführung in die Heilpaedagogiek*, Rotapfel, Zurich, 6th ed., 1962, pp. 11-12.
- 41.Vliegëthart, W. E., op. cit., pp. 35-36.
- 42.Ibid, p. 33.
- 43.See ibid.
- 44.Ibid, p. 34.
- 45.See ibid, p. 31.
- 46.See also: (i) Pretorius, J. W. M.: *Grondslae van die Pedoterapie*, op. cit., p. 53. (ii) Van der Dunk, M. G. D. and Vliegëthart, W. E.: *Problematiek van ouders met geestelijk gehandicapte kinderen*, in: *Problemen rondom het gehandicapte kind*, op. cit., p. 103.
- 47.Vliegëthart, W. E., op. cit., p. 57

- 48.Dumont, J. J.: *Leerstoornissen: oorzaken en behandelingsmethoden*, Lemniscaat, Rotterdam, 2nd ed., 1972, p. 140.
- 49.Sonnekus, M. C. H.: *Die vraagstuk van "remedierende" onderwys as ortopedagogiese aangelientheid*, in: *Suid-Afrikaanse Tydskrif vir die Pedagogiek*, Vol. 3, No. 1, July 1969, p. 32.
- 50.Schoonees, P. C., et al.: HAT, op. cit., p. 113.
- 51.Stander, G. and Sonnekus, M. C. H., op. cit., p. 72.
- 52.See Nel, B. F.: *Fundamentele Oriëntering in die Psigologiese Pedagogiek*, op. cit., p. 56.
- 53.Stander, G. and Sonnekus, M. C. H., op. cit., p. 72.
- 54.Rumke, H. C.: *Psychiatrie*, No. 1, Scheltema and Holkema, Amsterdam, 1935, p. 325.
- 55.See Nel, B. F., op. cit., No. 52, p. 56.
- 56.See Sonnekus, M. C. H., op. cit., No. 22, p. 19.
- 57.See Stander, G. and Sonnekus, M. C. H., op. cit., p. 73.
- 58.Ter Horst, W., op. cit., p. 26.
- 59.See Nel, B. F., op. cit., No. 52, pp. 67-107.
- 60.Schoonees, P. C., et al., op. cit., p. 881.
- 61.Ter Horst, W.: *Mogelijkheden van residentiele orthopedagogiek*, in: Van Berckelaer-Onnes, I. A. et al., op. cit., p. 133.
- 62.Pretorius, J. W. M., op. cit., No. 36, p. 47.
- 63.See Nel, B. F., et al., No. 18, op. cit., pp. 17-18.
- 64.See the different contributions in Van Bercklaer-Onnes, I. A. et al., op. cit.
- 65.Sonnekus, M. C. H. op. cit., No. 22, p. 24.
- 66.See *ibid*.
- 67.Lubbers, R., op. cit., pp. 54 et seq.
- 68.Vliegenthart, W. E., op. cit., p. 445.
- 69.Pretorius, J. W. M., op. cit.
- 70.Lubbers, R., op. cit., p. 6.
- 71.*Ibid*, p. 7.
- 72.Nel, B. F., op. cit., No. 52, p. 57.
- 73.Vliegenthart, W. E.: *Het veld der Orthopedagogiek*, in: *Suid-Afrikaanse Tydskrif vir die Pedagogiek*, Vol. 3, No. 1, July 1969.
- 74.Van Weelden, J.: *Blinde Kinderen*, J. B. Wolters, Groningen, 1961.

75.Langeveld, M. J.: *Beknopte Theoretische Paedagogiek*, op. cit.