

CHAPTER 2

ACTUALIZING INTELLIGENCE BY THE RETARDED CHILD

A. INTRODUCTION

In the previous chapter there was reference to a phenomenological approach to the study of actualizing intelligence as an ontological-anthropological matter. It is clearly evident that this actualization includes a pedagogic task and for the retarded child, more specifically, an orthopedagogic task.

In the present chapter, the focus is on explicating the **modes** of actualization viewed as an issue of the **psychology of becoming**.

B. ACTUALIZATION AS DISTANCING

A child attributes meaning to his world by means of both pathic (affective) and gnostic (cognitive) lived-experiencing. As a child progresses to adulthood, his giving meaning changes from a pathic (affective) to a more gnostic (cognitive) disposition.

Straus⁽¹⁾ sketches the **pathic** aspects in the life world of a child as his primordial experiencing arising from his communication with the world. According to Sonnekus⁽²⁾, the pathic is an emotional, **precognitive** lived-experiencing in communication with the world. The gnostic aspect of lived-experience is cognitive in nature and thus is lived-experienced on a more **distanced** level. But how does a child distance himself from a pathic (affective) to a more gnostic (cognitive) disposition? By actualizing his potentialities (including his intelligence), he **becomes**, and as he does he emancipates and distances himself. As already noted, this includes a pedagogic task that is considered below as a problem of the **psychology of becoming** as well as of psychopedagogics. This line of thought is summarized in Langeveld's⁽³⁾ aspects of the psychology of becoming; i.e., the biological moment, the principle of security, the principle of exploration (and emancipation). From an early age, the pedagogically secure child, by actualizing his potentialities as a going out to (and exploring) his world, gradually changes from a pathic (affective) helplessness to an emancipating, i.e., to a **distancing** as a more gnostic/cognitive disposition. This actualization implies a succession of discoveries by a secure,

exploring, becoming child⁽⁴⁾. In this way he discovers himself and his world⁽⁵⁾.

With respect to the retarded child: how is distancing as self-distancing accomplished? Is a cognitive limitation relevant to the pathic (affective) and, if so, what is the connection? What kind of influence will the pathic (affective), as a precondition for the cognitive, have on the actualization of intelligence? In Chapter 3 an attempt will be made to answer these questions.

C. ACTUALIZATION AS DIFFERENTIATING

Distancing, as an elevation in the child's level of becoming, means a more **vertical** distancing or perspective, while **differentiating** is more **horizontal** in the child's actualization, which also means a **self-distancing**. As a differentiation of being directed (intentionality), this means that the child's dialogue with his world⁽⁶⁾ becomes more differentiated. Consequently, not considered here are the views of the current psychology of consciousness that posits that a person has certain functions at his disposal that mature through a biologically determined process of growth. Self-differentiation implies an elevation in the dialogue conducted and thus the child becomes in different ways in his world. The following modes of learning are ways of conducting this dialogue with the world: sensing, perceiving, thinking, imagining, fantasizing, remembering and actualizing one's intelligence.

What does this differentiated intentionality as potentiality mean regarding the retarded child, especially for actualizing his intelligence? Which intentionalities (potentialities) does the child have at his disposal, and to what degree? What are the connections among these ways of differentiation, especially as they are lived-experienced? An attempt will be made to answer these questions below.

D. ASPECTS AND WAYS OF LIVED-EXPERIENCING BY THE RETARDED CHILD

1. Pathic (affective)-gnostic (cognitive) aspects of lived-experience in the retarded child's self-actualization

Lived-experience is characterized by pathic (affective) as well as gnostic (cognitive) aspects, where pathic means emotional,

precognitive lived-experiencing and gnostic a more cognitive, distanced lived-experiencing. In actualizing his intelligence, a child simultaneously lived-experiences pathically (affectively) and gnostically (cognitively)⁽⁷⁾. Actualizing intelligence is a totality act by which the affective and the cognitive function as a mutually connected unity. The affective and the cognitive cannot be separated but they can be distinguished in the sense that some ways of actualizing are more pathic (affective) and others more gnostic (cognitive). Thus, self-actualization on a more pathic (i.e., pathic-gnostic level) or more gnostic (affective-cognitive) level will determine the nature of the child's becoming. If he is stuck in the pathic, his becoming cannot thrive in accountable ways; however, if his becoming occurs on a more gnostic (affective-cognitive) level, it can thrive which, thus, is the ideal condition.

In the following sections, what these modes of self-actualization, as pathic and gnostic aspects of lived-experience, are like in the retarded child are considered.

2. Pathic (affective) aspects of lived-experiencing in self-actualization

The first moment of lived-experiencing is **sensing**. Following Straus⁽⁸⁾ and its further elaboration by Sonnekus⁽⁹⁾, sensing rather than sensation is used because the latter means receiving sensory impressions from stimuli in the environment. Sensing was studied phenomenologically by Straus and Sonnekus as a person's mode of being in communication with his world. As a mode or way of being, sensing is closely connected with the anthropological categories of lived-bodiliness (corporeality), lived-movement, lived-spatiality and temporality that all point to the predominantly pathic (emotional) flavor of sensing as an aspect of lived-experiencing. Sensory lived-experiences (seeing, hearing, smelling, and tasting, touching, grasping, reaching for, pointing to) as a totality are embodied in sensing as a mode of being (and also as the beginning of all learning).

Apparently there is no literature in which a phenomenological disclosure is presented of the retarded child's experiential (lived-experienced) world. However, since sensing is understood as a pathic aspect of lived-experiencing (and of all learning), the current literature on the retarded child will be queried with respect to the

pathic (affective). (The discussions of the other aspects of lived-experience will follow this procedure).

Regarding the mentally deficient, and thus the retarded child, Hollingsworth⁽¹⁰⁾ writes, " ... the failure of the feebleminded child to learn the lessons which his comrades master with ease is not due to the fact that his sense organs are less acute. The difficulty lies not in the sense organs, but in the ability to interpret and organize the sensations which he has." This view also is held by Burt⁽¹¹⁾. In his sensing, the retarded child has difficulty taking a gnostic (cognitive) perspective and remains stuck in the pathic, apparently because of his intellectual deficiency.

Thus, it is expected that the retarded child will have difficulty directing himself to a formal (cognitive) task for a relatively long period of time. Burt⁽¹²⁾ comments that this possibly can be a result of the fact that the child doesn't understand the task, which really points to his inability to actualize himself by participating in the cognitive. Such a child's **attending** is easily diverted by less important things^(13, 14) and noises, and it is anticipated that he would rather engage in sensopathic play--an infantile disposition indicative of pathic flooding.

With respect to the retarded child's self-actualization, **fantasizing** and **imagining** are discussed as modes of learning that are aspects of his lived-experiencing. This is in contrast to the current view that these are contents of consciousness. **Imagining** is a person's relationship to reality and a way of being with respect to an irreal reality⁽¹⁵⁾. Imagining thus means to constitute an irreal reality out of reality.

Fantasizing is a way of being still more distanced from reality than is imagining. Fantasizing or fancying, however, is an important dimension of a person's irreal imaginary world, and it exceeds all boundaries in the sense that it is a distancing to the unknown and even to the seemingly impossible that very likely never will become reality⁽¹⁶⁾.

Imagining as well as fantasizing are important ways the child gives meaning; in both, the pathic and gnostic clearly come to the fore. It is expected that the pathic aspect will be more prominent with a retarded child. Burt⁽¹⁷⁾ indicates that the sub-normal child's so-called (word) associations are of a lesser quality and occur more

slowly than those of the intelligent child. According to Burt⁽¹⁸⁾, as well as Landis and Bolles⁽¹⁹⁾, the retarded child has a poor imagination and fantasy life, while Vedder⁽²⁰⁾ concludes that the retarded child's thinking remains stuck on a concrete-visual level. The above examples indicate an imprisonment of the retarded child in the concrete-pathic, and they point to the fact that he cannot actualize his imagining and fantasizing on a cognitive level.

3. Gnostic (cognitive) aspects of lived-experiencing in self-actualization

As aspects of lived-experience (and as modes of learning) that clearly are gnostic (cognitive), Sonnekus⁽²¹⁾ mentions perceiving, thinking, remembering and actualizing intelligence.

The current view of **perception** as a process involving stimuli and responses is unacceptable. **Perceiving** is an intentionally directed and determined act of a person that is actualized in the relationship between person and world⁽²²⁾. It differs from sensing (as a first seeing) in that it is directed to the gnostic, the distanced and therefore is a cognitive mode of learning or being.

What is the retarded child's perceiving like? It was already indicated from the current literature that a retarded child's perceiving easily fluctuates. But the question is why? Burt⁽²³⁾ states that in a class situation this possibly is the result of boredom since a retarded child doesn't always **understand** what he perceives. Thus, it is clear that the retarded child's perceiving fluctuates because it is a cognitive aspect of lived-experience and the retarded child (with his cognitive deficiency) continually falls back on the pathic because he is not able to take and sustain a more distanced, cognitive perspective.

In contrast to the current view of the psychology of consciousness, where thinking is seen as a psychic function, here **thinking** is viewed as a mode or way of actualization. This aspect of lived-experience clearly is a cognitive mode of learning and is a search for and acquisition of a grip on reality as a problem⁽²⁴⁾. Essentially, thinking means transcending the pathic to the cognitive where the former is a precondition (see sensing) for the child to thinkingly go out to the world. The current view that the retarded child's thinking is bound to the concrete-visual and that he has difficulty abstracting is generally acknowledged^(25, 26). Once again, this points

to the retarded child's imprisonment in the pathic and to his inability to adequately actualize himself via the cognitive aspects of his lived-experiences such as thinking.

As a mode of learning, **remembering** is a preponderantly cognitive aspect of lived-experience in a child's self-actualization. Here the concern is not with memory as a function of consciousness but with remembering as a human action. Following Straus⁽²⁷⁾, as further developed by Sonnekus⁽²⁸⁾, remembering is postulated as a distanced, cognitive way of being. In remembering, a person enters a two-fold relationship with his lived-experience of time: The **act** of remembering, as the lived-experience of the **present**, and the **remembered content**, as the lived-experience of the **past**. Because of its temporal nature, the remembered always is connected with a person's historicity as a history of **his** relationships within the horizon of his personal time. This personal lived-experiencing of time via remembering is closely connected with the child's becoming; thus, remembering essentially is a reflection on, or thinking about and a returning to one's **own becoming in time**.

It is expected that the retarded child will have difficulty self-actualizing via remembering as a cognitive aspect of lived-experience. According to Baker⁽²⁹⁾, it also appears that the retarded child is not in a position to remember "unusual assignments", while Straus⁽³⁰⁾ asserts that a person, in his involvement with reality, remembers as meaningful primarily the remarkable, the strange, the **new**. This latter view indicates that remembering is closely related to intelligence and further confirms that the retarded child, who is limited in his potentiality, will have difficulty self-actualizing via remembering.

The view that memory is increased proportionately by repetition⁽³¹⁾ and that the "level of memory" of the retarded child often is above his level of intelligence⁽³²⁾ are no longer accepted⁽³³⁾.

Finally, the **actualization of intelligence** is mentioned as a preponderantly cognitive aspect of lived-experience. Since this topic has already been treated, here the emphasis is on its actualization as a cognitive aspect of lived-experience and as a mode of self-actualization. The supposition is that the retarded child, via this most fundamentally cognitive aspect of lived-experience will, within the framework of his intellectual limitations, underactualize this potentiality; this matter will be treated presently. The above-

mentioned supposition regarding the underactualization of intelligence also is supported by the fact that the retarded child has difficulty in self-actualizing via the preceding cognitive aspects of lived-experience (i.e., perceiving, thinking and remembering) all of which are closely intertwined with intelligence as a mode of being and they especially are implicated in its actualization.

E. MEANS OF ACTUALIZING INTELLIGENCE

What **means** are available to the child, and specifically the retarded child, for actualizing his intelligence, and how adequate is this actualization by these means?

1. Language as a means

Language is a spiritual⁽³⁴⁾ matter which implies that the person, as a totality, communicates with his world through sound-symbols. One of the most important functions of language as a symbolic matter is to create a distance between an I and others or things⁽³⁵⁾. Language enables a person to take an existential position regarding things which means that particular forms are given to them and one's image of the world is constructed⁽³⁶⁾. In other words, language is a means of constituting and thus also is a means of actualizing and of distancing.

Burt⁽³⁷⁾ and Vedder⁽³⁸⁾ indicate that the retarded child has a deficient command of language. Burt describes the retarded child as possessing "a defective verbal imagery." Therefore, as a totality in communication with his world, it is expected that the retarded child will be restrained in his language as a mode of being and will **further** underactualize his potentialities (and especially his intelligence) because of his inferior means of implementing and actualizing language. Since he distances and constitutes through language, he will have difficulty doing this adequately and he will remain stuck on a pathic level.

2. Language as a means of thinking in actualizing intelligence

When language is discussed, **thinking** cannot be ignored because of the intimate connection between them. Kwant⁽³⁹⁾ refers to this close connection with the concept "interchange of thoughts".

Constituting a world occurs through naming things, which is the linguistic medium for a knowing and distinguishing involvement with the world⁽⁴⁰⁾. As a means of knowing, language also is a means of ordered understanding, and the relationship between language and thought acquires a fixed form in language expression as is shown in the breadth and content, as well as in the depth of cognitive life⁽⁴¹⁾. Sonnekus⁽⁴²⁾ summarizes the parallelism between language and thought (thinking) by postulating that language acquisition is directly in the service of the course of thinking, especially in the sense that distancing from and transcending problematic relationships to the reality with which the child is confronted promote **conceptual relationships**. In this confrontation with the world, as a chaotic world of visualizations, it is brought to an ordered, encompassing structure by the act of naming, and through naming there is a basic emancipation from the concrete, and in terms of acquired language symbols, a further abstraction occurs⁽⁴³⁾ that is directly connected with thinking. Thus, Nel⁽⁴⁴⁾ rightly says that thinking stagnates and does not develop without language, but on the other hand, language doesn't develop if there is no thought out of which forms of language can crystallize. Consequently, language development involves a direct and mutual connection with the unfolding of thinking.

Since thinking already was mentioned as a cognitive aspect of lived-experience, in that light it is anticipated that the thinking of a retarded child will occur on a concrete-visual level. In this regard, Nanninga-Boon⁽⁴⁵⁾ mentions that with subnormal intellectual ability (thus the retarded child), the development of speech is bound to the concrete and this is shown in the thinking and the forms of language displayed. In other words, it is expected that language as well as thinking will move on a concrete-pathic level and is an additional indication that the retarded child is predisposed not to adequately actualize his potentialities.

3. Language as an affective means of actualizing intelligence

The connection between language and affect also deserves brief mention. Buytendijk⁽⁴⁶⁾ states that a person's world in essence is a world that must be actualized through feeling. A person in the world is affectively in the world. Heidegger⁽⁴⁷⁾ also proposes "Befindlichkeit" (attunement or feeling) as a fundamental structure of Dasein. Whatever a person does, he always finds himself in a

particular emotional mood or attunement⁽⁴⁸⁾. Even the most matter-of-fact, the most objective thought does not withdraw from the affective; the latter always manifests itself⁽⁴⁹⁾. In none of the major works of the psychology of becoming is it disputed that the child's affective mode of expression is conspicuous in the child-world relationship⁽⁵⁰⁾. A person's existential situatedness, his dialogue with the world is a dialogue permeated with affectivity.

The affective aspect of a person best expresses itself in language, whether sound or symbol, such that affect and language show a particularly close relation⁽⁵¹⁾. Van der Stoep⁽⁵²⁾ and Pos⁽⁵³⁾ further stress that language itself not only lends itself to affective expression but that it also awakens lived-experiences because the conceptual symbol arouses in the listener or reader a distanced understanding of the affect. It also is important to mention that a person's affectivity, to a great extent, directs his cognitive potentialities and, therefore, their implementation or actualization⁽⁵⁴⁾. This actualization, therefore, takes place through language that also is the carrier of affect.

In light of the above, it is expected that the retarded child, on the basis of his deficient control of language, will be handicapped in his affective development. Inversely, language will not be unscathed when his affective life does not flourish adequately (and remains bound to the pathic) which in turn can lead the retarded child, who possibly lived-experiences himself as being different, to underactualize his potentialities. As an intellectually restrained person, he is restrained in his totality, and therefore in actualizing his intelligence.

This dynamic interaction between language and affect implies that the retarded child also is restrained in his affective ways of being, that he will have difficulty authentically directing and actualizing his cognitive potentialities (especially intelligence) because he has a deficient control of language, an important means of actualization.

F. SYNTHESIS: MODES OF ACTUALIZATION

The following is a summary of the retarded child's modes of actualization.

All of the modes or ways of actualizing his potentialities, specifically his intelligence, are available to a retarded child. From the above

discussion, it is evident that this actualization will be more pathic and less cognitive for a retarded child. This pathic boundness, which means the affective is not flourishing, contributes to an inadequate congestion of his cognitive potentialities. Thus, it is evident that the retarded child will lived-experience more pathically and will have difficulty in actualizing himself (self-actualizing) through the cognitive aspects of lived-experiencing. It also is evident that this child has a deficient means (language) of actualization. That is, an underactualization of intelligence is foreseen. If this really is found, it is a serious problem for the retarded child because he already has a poor intellect at his disposal. Thus, as a dynamic, reciprocal restraint, the retarded child is impeded in a three-fold way: he has poor intelligence (cognitive deficiency), as potentiality, at his disposal, and he is restrained because of the fact that he does not have at his disposal adequate means (language) for actualization. The result is that the retarded child is restrained in the entire scope of his becoming.

G. ORTHOPEDAGOGIC-ORTHODIDACTIC TASK

With reference to the introduction to this chapter, it now can be asked if it is at all possible to provide the retarded child with pedagogic (more specifically orthopedagogic) assistance and support so that he can achieve a level on which he can actualize his potentialities more adequately? For example, is it possible for an orthopedagogue or pedotherapist, in cooperation with the parents, to bring the pathically flooded retarded child to a distancing, and if so, how? Must such a child become confused by such help? Must he receive relatively more protection and security, or must he be given more opportunities for exploration and thus for emancipation? On the other hand, does this child have any insight regarding his experience of security? Does he realize that he must direct himself to the cognitive? It cannot be denied that these questions refer to an enormous orthopedagogic task. As already mentioned, this is a matter that requires more comprehensive research than is the aim of the present study. Such a study must incorporate an **orthopedagogic** investigation of the retarded child as a restrained child.

From an orthodidactic perspective, there also is a task. What can the **school** do to help this child? Is there an accountable didactics established for the actualization of his intelligence? As a provider of assistance and support, is the teacher sufficiently trained as an

orthodidactician? Is the curriculum sufficiently linked to the world of the retarded child, and is it conducive to actualizing his intelligence? Or, on the other hand, is this a teacher with the "usual" training who follows the usual curriculum with these children--but on a lower level? Once again, reference is made to a field that requires further research, i.e., **didactic** as well as **orthodidactic** research.

REFERENCES

1. As cited by Sonnekus, M. C. H.: "Die leerwereld van die kind as beleweniswereld"; p. 62.
2. Sonnekus, M. C. H.: op cit., p. 62.
3. Langeveld, M. J.: ontwikkelingspsychologie; p. 42.
4. Nel, B. F.: "Die persoonswording van die kind"; p. 42.
5. Sonnekus, M. C. H.: op cit., p. 53.
6. Ibid; p. 53.
7. Ibid; p. 78.
8. As cited by Sonnekus, M. C. H.: op cit., p. 63.
9. Sonnekus, M. C. H.: op cit., p. 63.
10. Hollingworth, L. S.: "The psychology of Subnormal Children"; p. 111.
11. Burt, Cyril: "The backward child"; p. 465.
12. Ibid; pp. 479 to 485.
13. Landis, C. and Bolles, M. M.: "Textbook of Abnormal Psychology"; p. 274.
14. Baker, H. J.: "Characteristic Differences in Bright and Dull Pupils"; p. 28.
15. Sonnekus, M. C. H.: op cit., p. 67.
16. Ibid; p. 68.
17. Burt, Cyril: op cit., p. 486.
18. Ibid; p. 510.
19. Landis, C. and Bolles, M. M.: op cit., p. 274.
20. Vedder, R.: "Kinderen met Leeren en Gedragsmoeilijkheden": op cit, p. 25
21. Sonnekus, M. C. H.: op cit., pp. 65 to 88.
22. Ibid; p. 65.
23. Burt, Cyril: op cit. pp. 479 to 485.
24. Sonnekus, M. C. H.: op cit., p. 71.
25. Baker, H. J.: "Introduction to Exceptional Children": pp. 248 to 259.
26. Vedder, R.: op cit., p. 25.
27. As cited by Sonnekus, M. C. H.: op cit., p. 87.
28. Sonnekus, M. C. H.: op cit., p. 87.
29. Baker, H. J.: "Introduction to Exceptional children": p. 258.
30. As cited by Sonnekus, M. C. H.: op cit., p. 87.
31. Burt, Cyril: op cit., p. 495.
32. Ibid; p. 501.
33. Compare Sonnekus, M. C. H.: op cit., pp. 87 to 89.
34. Nel, B. F. and Van der Stoep, F.: "Wereldverhouding en taalimplementering by die dowe kind"; p. 20.
35. Van der Stoep, F.: "Taalanalise en taalevaluering as pedagogies-didaktiese diagnostiseringsmetode"; p. 14.
36. Ibid; p. 26.

37. Burt, Cyril: op cit., p. 422.
38. Vedder, R.: op cit., p. 25.
39. Kwant, R. C.: "Fenomenologie van de taal"; p. 155.
40. Nel, B. F. and Van der Stoep, F.: op cit., p. 58.
41. Ibid; p. 58.
42. Sonnekus, M. C. H.: op cit., p. 73.
43. Stander, G.: "Inleiding tot die Taalpsigologie"; p. 53.
44. Nel, B. F. and Van der Stope, F.: op cit., p. 26.
45. Nanninga-Boon, A.: "Denken en Taal"; p. 40.
46. As cited by Van der Stoep, F.: op cit., p. 47.
47. As cited by Kockelmans, A.: "Martin Heidegger"; p. 65.
48. Kockelmans, A.: op cit., p. 65.
49. Van der Stoep, F.: op cit., p. 48.
50. Ibid; p. 48.
51. Ibid; p. 49.
52. Ibid; p. 46.
53. Pos, H. J.: "Her affect en zijn uitdrukking in de taal, Verspreide Geschriftten"; p. 63.
54. Du Toit, A. S.: "Die gangbare onderwys van taal aan die dowe in Suid-Afrika in die lig van die beskouinge van Nanninga-Boon"; p. 9.