The Study of Older Preschool Children’s Sensitivity Formation State

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Abstract---The purpose of the study is to diagnose the state of older preschool children’s sensitivity formation. The object is the process of older preschool children’s moral education. The study used a set of the following research methods: an analysis, a synthesis, a comparison, a generalization of scientific sources in order to formulate basic concepts and study the level of the issue concern; an observation of children’s play activities; a conversation; a plot role-playing games ‘Hospital’ and ‘Veterinary Clinic,’ a didactic game ‘Who is sensitive?’; methods of mathematical statistics for processing the obtained experimental data. Analysis of the experimental study results allowed us to state the lack of older preschool children’s awareness with the category ‘sensitivity’ and its emotional and activity display. The vast majority of preschoolers understand the theoretical meaning of this category, however, they do not realize the need to be sensitive, cannot explain the motives of their sensitive behavior, and are not able to name the sensitive actions of other people. Only a small number of children associate sensitive actions with care, protection, and help. We have noted the highest rate of the emotional and value component development because children tend to show moral feelings.

Keywords---children’s sensitivity, criteria, indicators, moral education, sensitivity.
Introduction

In recent years, the issue of the formation of the future citizen’s key qualities, which are necessary for the country’s sustainable development, has become especially essential. It is due to the need for an earlier focus on the moral side of a preschoo1er’s personality. After all, the formation of key qualities is a complex and multifaceted process that requires purposeful work. It should be noted that the success of this process depends on the awareness of adults (teachers and parents) of the moral education importance, including such a personal quality as sensitivity starting from early childhood (Widana et al., 2020; Munir et al., 2021).

The urgency of the issue of preschoolers’ sensitivity formation is due to the crisis of modern society, as its moral norms and spiritual values have been neglected, and as a result, it complicates the process of preschool children’s moral development (Kohlberg & Diessner, 1991; Monke, 2015). Timely children’s moral education is necessary for the ‘society recovery.’ In the paper ‘Birth of good’ by V. O. Sukhomlynskyi, it is emphasized that childhood is a natural school of cordiality for a child. Children go through the initial stage of socialization in preschool educational institutions and it is crucial to forming such a feeling as sensitivity in preschool age. In Sukhomlynskyi’s opinion, the teacher is called to ‘enliven the heart of a small citizen, to inspire his or her impulse and desire for the highest human beauty, sensitivity, and compassion.’ The process of preschoolers’ sensitivity formation contributes to the formation of a harmonious personality that is aware of the moral norms and values that determine the basis of relations between people in society. Unfortunately, the current educational programs for preschool children’s development do not have a clear focus on sensitivity formation, but, in our opinion, it is one of the individual’s priority qualities (Petrova-Gjorgjeva, 2010; Sanger & Osguthorpe, 2013).

The authors’ position is that it is time to change the priorities and approaches to the issue of preschoolers’ moral education. For this reason, conducting an ascertaining experiment on the issue of preschool children’s sensitivity formation will outline ways to solve problems of planning, organization of moral education in preschool educational institutions, overcoming difficulties of preschool children’s sensitivity formation (Campbell et al., 2006; Kumaesan et al., 1999).

Research Methodology

The methodological concept of our study reflects the relationship and interaction of different approaches to the issue of preschool children’s sensitivity formation (Oleksenko et al., 2021). The approaches are the following: the personality-oriented approach, which we have used in the process of analysis of children’s knowledge about sensitivity and ways of its display, their subjective experience, motives for providing practical assistance to others; the dialogic approach has been provided for the creation of a favorable atmosphere in the children’s group, and the establishment of productive dialogic relationships with preschoolers; the activity approach has been used to involve a child in purposeful activity which was prompted by external circumstances; the competency approach has been used in the study to form a willingness to alleviate or share the other person’s
psychological state through the expression of compassion and empathy, and to help and care for others (Kiyan et al., 2009; Scheeringa et al., 2003).

Analysis of basic research and publications

The issue of educating humane values, preschool children’s moral qualities is at the center of scientists’ attention. Theoretical principles of the issue of a personality’s moral education were reflected in the publications by Ukrainian psychologists I. Bekh, L. Bozhovych, S. Ladyvir, V. Kotyrlo and others. The scientific interests of O. Kononko, V. Kotyrlo, and L. Strelkova were focused on the issues of preschoolers’ moral feelings development. Scientific works by I. Bekh, T. Pirozhenko, T. Ponimanska revealed the issues of moral feelings formation, moral values, the personality’s moral development issue. The specifics of children’s spiritual and moral education were studied by I. Baby, A. Bohush, N. Havrish, L. Kaluska, O. Monke, O. Koshelivska, L. Lokhvytska, O. Reipolska, Kryvylova O., Sosnickaya N., Oleksenko K., Oleksenko R., Dolska O. and others. The scientific research of I. Bekh, A. Bogush, L. Lokhvytska, T. Ponimanska, and others focused on the need to acquaint children with moral concepts, ideas, to teach kindness, and to cultivate the appropriate personal qualities. T. Tanko and N. Khimich studied the problems of preparing students majoring in ‘Preschool Education’ for the spiritual and moral education of preschool children (Drobnitsky, 2002; Bozhovych, 2008). The researchers’ analyzed views on the preschoolers’ moral education confirmed the need to find new approaches to its organization in the context of the radical development of the Ukrainian state (Dale & Beyeler, 2001; Tanguay et al., 2010).

Among foreign scholars, the issue of moral education was studied by the following scholars: L. Strelkova (Russian Federation), Zhang Junna (China), E. Shovkomud (Russian Federation), psychologists L. Kolberg (the USA), J.-J. Piaget (Switzerland), L. Ruvinisky (Russian Federation), and others. However, despite the significant number of scientific studies of native and foreign scientists on these issues, the problem of moral education, the formation of children’s moral culture remains relevant, and, above all, first of all, due to insufficient development of ways of educating preschoolers’ sensitivity as a key quality of a personality, establishing a close relationship between the children’s families and pedagogical teams of preschool educational institutions in the process of educational goals implementation (Gao & Maurer, 2009; Baumann et al., 2008).

Thus, the purposeful study of current issues of preschool children’s moral education, the degree of their development in pedagogical theory and practice has prompted us to conduct an ascertaining experiment (Guz, 2006; Khimich, 2017). The purpose of the paper is to carry out a terminological analysis of the pedagogical categories related to the issue of older preschool children’s sensitivity formation and to highlight the course and results of diagnosis of older preschool children’s sensitivity formation according to certain criteria and indicators (Serykh et al., 2021; Amori, 2021).
Presentation of the research data

The content of the basic categories ‘moral education’, ‘sensitivity’ that form the terminological basis of our study have to be clarified. The scientist T. Ponimanska defined moral education as ‘purposeful interaction of adult and child to form moral feelings and qualities, assimilation of moral norms and rules, development of moral motives and behavioral skills’ (Ponimanska, 2013). One of the individual’s priority moral qualities is undoubtedly considered to be sensitivity. Scholars interpret this category differently. For example, N. Havrish (Ukraine) stated that sensitivity was a quality that determined the social orientation of the individual and was displayed in caring for the needs, requests and desires of others, attention to their interests, problems; compassion for others, willingness to help (Havrysh, 2015). E. Shovkomud (Russian Federation) emphasized that ‘sensitivity was the ability to feel and understand the state of another person through awareness of their own experiences. It happened through empathy and was expressed in the form of effective compassion and sincere cooperation. According to I. Bekh (Ukraine) ‘sensitivity was the awareness of the need to participate in solving the problems of other people (relatives, peers, adults), to be involved’ (Bekh, 2018).

Analysis of definitions made by national and foreign scientists allowed us to formulate our definition of sensitivity. Sensitivity is a moral and volitional quality of a personality, which is displayed in the ability to empathize, an attentive and caring attitude to others, willingness to help, and is based on philanthropy. We agree with the opinion of L. Lokhvytska, who is a modern Ukrainian researcher on moral education, that ‘an important period in mastering the norms and rules of moral behavior is preschool childhood, as it is a sensitive period of development of many areas and the basis of personality’s formation’ (Lokhvytska, 2019). Ukrainian scientist N. Lysenko noted that it was important to create certain conditions for the moral qualities comprehensive development in preschool age. This period, in her opinion, was the most effective in the personality’s formation. In his research, O. Kononko stated that older preschool children were able to act on their initiative and control moral behavior (Kononko, 1998). Scientist L. Kaluska highlighted that the fact that it was necessary to start teaching a child moral behavior from the day of conception (Kaluska, 1994).

The category ‘moral education’ is closely related to the category ‘moral development,’ which is its derivative phenomenon. According to T. Ponimanska, ‘from the standpoint of humanistic consciousness, the basis of personality is its moral development, which is displayed in the system of views, ideas, norms, assessments that govern the behavior’ (Ponimanska, 2007). A person who can be considered a moral one always acts prudently concerning the interests of others, is guided by universal values and can take responsibility for their actions. Thus, the scientist concluded that moral development was the level of assimilation of ideas about moral norms, the formation of moral feelings, and moral behavior (Ponimanskaya, 2007).

J.-J. Piaget (Switzerland), analyzing the development of moral judgments at different age stages of preschool childhood, noted that ‘children of early, middle and even older preschool age were characterized by autonomous morality,
uncritical attitude to the demands of adults. They evaluated their actions mainly by the result’ (Ponimanska, 2007). The scientist defined the category ‘the child’s moral realism’. He defined this category as ‘the concept according to which preschool children were much more developed logic of moral judgments than moral feelings’ (Ponimanskaya, 2007).

In the context of our study, L. Ruvinsky’s (Russian Federation) views, who in the 1980s described the stages of moral education, need special attention. We believe that the concept reflects preschool children’s moral education. The researcher identified the initial, basic and final stages of moral education (Fayzullaeva, 2020; Iriani et al., 2018). He was the first to identify the initial stage, which stimulated the emergence of prerequisites for the moral growth of the individual and was to surround children with moral models that served as external stimuli and created a basis for the development of their activity. At that stage, the basic conditions for the accumulation of experience of moral behavior were formed. L. Ruvinsky called the second stage the main one in which motivation appeared; external patterns excited the individual to action, moral habits, and relationships passed into the plane of personal. The creation of conditions for the possibility of a person’s moral choice of appropriate behavior was provided in the third stage (final). External influences on the child and internal efforts were reborn in moral behavior. If the motive was moral, it would stimulate a moral act. The system of moral actions led to the individual’s moral qualities formation, which was realized in the process of moral education. Researcher T. Ponimanska (Ukraine) singled out the levels of a preschool child’s moral development. They are the following:

- The idea of moral norms. The first ideas about what is good and what is bad appear in the early preschool age. It happens in the process of forming a new type of relationship between a child and an adult. The development of the child’s independence at this time is accompanied by the need for participation in the lives of adults, joint activities with them. The desire to positively assess, support and approve their actions contributes to the organization of moral norms mastering by the child (Ponimanska, 2007).
- Moral feelings and motives for behavior. In the older preschool age, moral feelings and knowledge are associated with a sense of duty. A child at this age is able to realize the moral meaning of their behavior. There are internal moral instances (L. Vyhotsky), which are the desire to behave in accordance with moral norms, not because it is required by adults (parents, educators), but because it is pleasant for the children themselves and others (Ponimanskaya, 2007).
- Habits of moral behavior. Education of moral behavior means ensuring the unity of motives and actions of the individual. Moral motives motivate a certain action, and give a personal meaning to behavior. A hierarchy (subordination) of motives for behavior begins to form in preschool age, which is evidence of moral education. After all, the same act can be caused by different motives and indicate different levels of certain norms mastering (Ponimanska, 2007).

Thus, the priority position of scientists is to understand the relevance and necessity of preschool children’s moral education, as moral feelings and experience of moral behavior of the individual are important in its structure. The
analysis of scientific sources allowed us, based on an integrated-analytical approach, to determine the following components of preschoolers’ sensitivity formation with their indicators, namely: cognitive one, emotional and value one, and behavioral one.

- The cognitive component determines the presence of knowledge about the emotional sphere of a human being, understanding the essence of the category ‘sensitivity’ and display of this moral quality in everyday life, and the ability to distinguish between positive and negative actions independently.
- The emotional and value component is characterized by awareness of the necessity to be sensitive, have a positive attitude to the sensitivity display, and the state of the preschooler’s relationship with others (willingness to help, sympathize, empathize, and be friendly).
- The behavioral component is characterized by the ability to always choose an appropriate way to show sensitivity, be tactful in communication, care about others independently, have a positive attitude to the sensitivity display, show compassion to the other person or animal (unjustly offended, weak, small, sick, homeless, regardless of their external attractiveness), independently and selflessly help the needy without reminders and tips, refuse from something significant, interesting for the child (toys, the main role in the game, delicious food, desired entertainment, etc.) in favor of the offended; and respond to the others’ frustration.

These components together contribute to the development of the process of sensitivity formation, activate the preschoolers’ internal potential, and the humanistic feelings display. We have identified criteria and indicators of the level of older preschool children’s sensitivity formation. They are the following: the idea of sensitivity and ways of its display (completeness, clarity, and specificity), the sense of sensitivity (ability to empathize, the presence (absence) of positive emotions in communication with others, pleasure from helping others, the desire to show compassion), sensitivity (stability of sensitivity display in the changed life situations). While developing the criteria of preschoolers’ sensitivity formation, we have relied on the following key criteria requirements: objectivity, reliability, simplicity, and ease of measurement, interdependence with its indicators.

Based on the criteria and indicators, we have determined the levels of preschool children’s sensitivity, mainly, the high level, the average level, and the low one. Children with the high level of sensitivity formation have complex, clear ideas about sensitivity and the ways to display this moral quality in everyday life situations. They realize the need to be responsive and have a positive attitude to the others’ sensitivity display. Preschoolers are eager to perform sensitive actions and are keen on charity. They show care, compassion, empathy in both imaginary and real situations, and get pleasure from helping, showing compassion, and empathy. They are ready to help. Sensitivity display is characterized by stability.

Children with the average level of sensitivity formation have a relatively complex idea of sensitivity and ways of sensitive behavior, but sometimes they are interpreted inaccurately. Children are not always aware of the importance of sensitivity. The sensitivity display is unstable, ranging from independent and
proactive to situational, selective relationships, and personal interests. The sensitivity display in the changed life situations causes difficulties, requires emotional adjustment and additional stimulation. Children behave sensitively in the presence of adults to avoid punishment or win approval. Preschoolers are partially eager to perform sensitive actions and are keen on charity.

Preschoolers with the low level of sensitivity formation do not have a clear idea of sensitivity. Their behavior is dominated by selfish orientation. It is displayed in contempt for others, incontinence, inability to help others when needed and to show compassion or empathy. Such children have no desire or interest in performing sensitive actions and do not provide care to others on their own. We have determined the levels of preschool children's sensitivity formation within each component. Children with the high level of the cognitive component development have a thorough knowledge of the emotional sphere of a human being and understand the essence of the category ‘sensitivity’ and display this moral quality in everyday life. Children with the average level of the cognitive component development insufficiently understand the essence of the category ‘sensitivity’ and its display in real-life situations. Children with the low level of the cognitive component development do not understand the essence of the category ‘sensitivity’ and the ways to display it in real life. They do not realize the need to be sensitive.

Children with the high level of the emotional and value component development are aware of the need to be sensitive. They have a positive attitude to the sensitivity display and are able to independently distinguish between positive and negative actions. These preschoolers are always ready to help and are able to sympathize, empathize, and are friendly. Children with the average level of the emotional and value component development have partial knowledge of the emotional sphere of a human being. They have a negative attitude to the sensitivity display. Selfish motives predominate in the preschoolers' actions. They choose inappropriate ways to display sensitivity, are tactless in communication, and do not provide care to others on their own.

Children with the high level of the behavioral component development always choose the appropriate way to display sensitivity, are tactful in communication. They have a positive attitude to the sensitivity display, show compassion to the other person or animal (unjustly offended, weak, small, sick, homeless, regardless of their external attractiveness), independently and selflessly help the needy without reminders and tips, refuse from something significant, interesting for the child (toys, the main role in the game, delicious food, desired entertainment, etc.) in favor of the offended, and respond to the others' frustration. Children with the average level of the behavioral component development are vaguely aware of the need to be sensitive, show care and compassion with a hint. They are not always ready to refuse from something significant, interesting in favor of the offended. Children with the low level of the behavioral component development have selfish motives which prevail in actions. They choose inappropriate ways to display
sensitivity, are tactless in communication, and do not provide care with others on their own. In order to determine the level of older preschool children’s sensitivity formation, we have conducted an ascertaining experiment. To diagnose and monitor the current state of the studied phenomenon, we have used the following research methods; the observation of the older preschool children’s daily activities; conversation with children, role-playing games, and simulation of situations of moral choice using story pictures.

The ascertaining experiment was conducted on the basis of preschool educational institutions in Kremenchuk, Poltava region (№ 15 – 38 children, № 78 – 22 children). 60 older preschool children participated in the research. It should be noted that the observational experiment took place in natural conditions, without violating the logic and course of the educational process in preschool institutions. The criteria for selecting diagnostic tools to determine the level of preschoolers’ sensitivity formation were age and individual characteristics, as well as the ability to identify and characterize the indicators of sensitivity formation, offered by the researchers. The toolset included the development of a questionnaire in the form of a conversation, a diagnostic game ‘Who is sensitive?’ based on the plot of diagnostic cards. The plots for role-playing games ‘A Hospital’ and ‘A Veterinary Clinic’ were developed. We also paid attention to the fact that the tools stimulated the processes of preschoolers’ self-knowledge, self-analysis, and self-education.

To determine the level of older preschool children’s sensitivity formation during the ascertaining experiment, we conducted a survey. During the conversation, we sought to find out the children’s opinion on the category ‘sensitivity.’ 25% (15 children) of respondents gave a relatively full answer. At the same time, 53.33% (32 children) of respondents faced difficulties defining this category. It indicates a lack of older preschoolers’ knowledge on the research issue. And 21.66% (13 children) of older preschoolers could not explain the meaning of this category. 21.66% of respondents answering the question ‘What is sensitivity?’ said ‘I do not know’ or ‘kindness,’ ‘love.’ 53.3% of children explained that ‘sensitivity’ is when people ‘respect,’ ‘help each other,’ ‘are ashamed of their bad actions,’ ‘treat others well,’ ‘listen,’ ‘sympathize with each other.’ 25% of respondents defined ‘sensitivity’ as ‘caring for animals, birds,’ ‘helping the elderly,’ ‘comforting each other,’ ‘empathy,’ ‘pity,’ ‘desire to help’.

During the conversation, we sought to find out ‘What kind of person is sensitive?’ 18.33% (11 children) of respondents answered that they did not know who could be called sensitive. If the child did not answer or found it difficult, we asked the following questions: ‘Can a person be called sensitive if he does good deeds towards other people?,’ ‘Is a person who helps animals sensitive?’. After clarifying questions, 70% (42 children) of preschoolers said who might belong to sensitive people. 11.6% (7 children) of respondents were able to describe a sensitive person as ‘a person who does good deeds,’ ‘who helps,’ ‘does not harm nature,’ ‘does not offend others,’ ‘feeds birds and animals,’ ‘who appreciates and respects others,’ ‘loves everyone,’ ‘sympathizes’. The answers analysis made it possible to understand that only 25% (15 children) of respondents consider it necessary to be sensitive, explaining that ‘a a sensitive person is the one who does good deeds, helps, does not harm nature, feeds birds and animals.’ 63.34% (38 children) of respondents know that they need to be sensitive, but they do not have a complete
understanding of what it is for. Their reasons are mostly 'yes, you can' (they agree that it should be done). 11.66% (7 children) of respondents could not answer the question.

To find out the older preschoolers’ awareness of the need to be sensitive and determine the level of emotional and value criteria during the conversation, they were asked the following question: ‘How do your relatives (mom, dad, grandma, etc.) show their sensitivity to you?’ We obtained the following results: 80% (48 people) of preschoolers to whom (in their opinion) are sensitive. Children associated this category with the following emotional and behavioral reactions: 'hug,' 'treat,' 'help me,' 'kiss,' ‘say kind words,’ ‘love and care,’ ‘pity when I cry.’ We found that 8.34% (5 children) of respondents replaced the category ‘sensitivity’ with the possibility of leisure and encouragement, for example ‘take to the park for having fun,’ ‘turn on cartoons,’ ‘give a scooter,’ ‘give me toys,’ ‘allow everything,’ ‘buy sweets in the store’. 11.66% (7 children) could not answer this question.

To self-determine the level of sensitivity formation, we asked preschoolers the following question: ‘Are you a sensitive girl (sensitive boy)?’ 80% (48 children) of preschoolers answered ‘Yes,’ 11.66% (7 children) answered ‘I do not know,’ and 8, 33% (5 children) answered ‘Sometimes’. To the question ‘Did you have to sympathize with anyone or help anyone?’ 60% of respondents (36 people) answered ‘Yes.’ 25% of respondents (15 children) said ‘sometimes,’ and 15% (9 children) responded ‘No.’ Explaining their answers, older preschool children have specified that they help everyone (5 children), help their moms (15 children), help their dads (3 children), help their grandmothers (5 children), help their brothers (2 children), help their sisters (5 children), and help a cat (1 child). Analysis of children’ answers made it possible to state that a quarter of all respondents help others only after a request, additional moral or material incentives, in particular, their moms (7 children), their dads (5 children), their grandmothers (2 children), and a grandfather (1 child).

Aiming to analyze what kind of actions preschoolers consider as a display of sensitivity, we asked them the following question: ‘Remember, please, what sensitive actions have you ever performed?’ Analyzing the older preschool children’s responses, we found that only 26.66% of respondents (16 children) performed sensitive actions, and 61.66% of respondents (37 children) could not recall example of their sensitive behavior and did not know whether they performed sensitive actions. 11.66% (7 children) of respondents did not consider it necessary to perform sensitive actions at all. We have found that preschoolers associate sensitive actions with their own actions, mainly ‘hugging,’ ‘helping a friend,’ ‘feeding birds and animals,’ ‘taking care after plants,’ ‘paying attention to grandparents,’ ‘helping mom in the kitchen to cook,’ ‘planted flowers with my grandmother,’ ‘helping the cat to climb down from the tree together with my dad,’ ‘carrying bags to help my sister,’ ‘feeding and caring for a little chick,’ ‘drawing a picture of my grandmother,’ ‘sharing my favorite toy,’ ‘feeding the dogs on the street with my mother,’ ‘helping my mother and sister,’ ‘taking care of my pet,’ ‘feeding the birds’. The analysis of the answers allowed us to state the insufficient awareness of older preschool children with the category ‘sensitivity’ and its emotional and activity displays. The vast majority of respondents understands the
theoretical meaning of this category, but do not realize the need to be sensitive, can not explain the motives of sensitive behavior, describe the other adults’ and peers’ sensitive actions or name their own ones. Only a small number of children associate sensitive actions with care, assistance, and charitable activities.

To determine the level of emotional and value criteria development, we conducted a diagnostic game ‘Who is sensitive?’ The game consisted of cards depicting various situations and two boxes. The child should put cards, which depict sensitivity display, in the green box, and, on the contrary, the cards, which do not depict sensitivity display, should be put in the red box. The list of cards of the diagnostic game ‘Who is sensitive?’ The child is caring for a homeless kitten. The child is helping a sick mother around the house. The child is feeding homeless animals. The girl is combing her sick mother’s hair. Children are collecting garbage in the forest. The child is writing a letter to a sick friend. The grandchildren organized a tea party with the old grandmother. The boy is taking a blind man across the road. The man is helping the girl in a wheelchair to go down the stairs. The boy is pouring water to homeless animals every morning. The child is giving some water to the asphalt paver when it is very hot. The boy is helping his little brother fix a broken toy. The girl is bringing food to the animal shelter. On a winter’s day, the boy let the kitten warm-up on the porch. The boys are beating a cat in the street. Passers-by do not pay attention to the injured dog lying on the side of the road. The teenagers are not helping the old grandfather to bring the bags home. High school students are pushing a disabled girl during the break. The children are not helping their grandmother, who is taking food out of her bag. The girl is walking past by the chicks that have fallen out of the nest. The son is taking off his sick mother. At school, children are throwing trash on the freshly washed floor. In winter, passers-by do not intentionally notice a homeless kitten.

The diagnostic game made it possible to assess the level of children’s awareness of the need to be sensitive, how the preschooler relates to the sensitivity display, their willingness to help, sympathize, show kindness, and empathize. 13.33% of respondents (8 children) quickly and correctly followed the game rules, clearly justified their choice. Using the diagnostic game ‘Who is sensitive?’ made it possible to define the levels of sensitivity formation (the high level – 16.66% (10 children), the average level – 35% (21 children), the low level – 48.33% (29 children)). When choosing the methods of the ascertaining experiment, we took into account the psychological and age characteristics of preschool children and their tendency to role-playing games. We used two role-playing games, mainly ‘A Hospital’, where people were treated, and ‘A Veterinary Clinic’, where animals were treated. The kindergarten teachers did not take part in the game, but everything happened under their control, under a clear direction. The educator told the rules of the game and controlled it, if necessary, directed the children’s actions. Beforehand, children had classes about the work of the hospital and medical staff. Examples for the role-playing game “A Hospital”:

- The mother fell ill and called an ambulance (actors: a child, a mother, a registrar, an ambulance doctor, a nurse).
• The old grandmother could not see well in her glasses (actors: a child, an old grandmother, a registrar, an ophthalmologist, a nurse, a sales consultant selling glasses).
• While walking with his father and mother in the park, the boy saw how a stranger suddenly felt badly (actors: a child, a mother, a father, an ambulance doctor, a nurse).
• A child was walking in the yard and witnessed a boy falling from a tree and breaking his arm (actors: a child, a boy who broke his arm, the injured boy’s mother, an ambulance doctor, a nurse).
• An unknown woman asked the girl for help because she was not feeling well (actors: a child, an unknown woman, a doctor, a nurse).

Examples for the role-playing game ‘A Veterinary Clinic’:

• The domestic cat got sick (actors: a child, a mother, a doctor of a veterinary clinic, a nurse).
• The boys beat the cat on the street, and the children who were walking nearby took it to the veterinary clinic (actors: children, older boys, a vet, a nurse).
• A child and his father, crossing the road, saw a dog that, crossing the road and fell under the wheels of a cyclist (actors: a child, a father, a vet, a nurse).
• Children walking on the playground in the kindergarten saw a pigeon with a broken wing (actors: children, a kindergarten teacher, a boy’s father, a vet, a nurse).
• A boy took a toy from a younger child and did not give it back, which made the baby cry.

The games allowed us to see how children display sensitivity in play activities. In particular, whether the child is able to help relatives, strangers, the elderly, people with special needs, to feed, to help a homeless animal, to take care of one’s own pet. The game required kids to be able to take care of someone who needed help according to the proposed situation. Attitudes towards peers and children’s reactions to the emotional state of others were also assessed. The level of older preschoolers’ sensitivity formation during the role-playing game, we characterize as follows: the high level – 23.33% (14 children), the average level – 46.66% (28 children), the low level – 30% (18 children).

Thus, during the ascertaining experiment, we were able to find that the older preschool children’s cognitive component development was at the average and the low level of sensitivity formation. We received the highest level of the emotional and value component development because children tended to show moral feelings, but they often needed additional incentives for charity. And, unfortunately, the behavioral component development was also low due to the lack of preschool children’s skills of displaying sensitive attitudes to others. The statement proved the need for systematic and complex work in preschool educational institutions to form children’s sensitivity.
Conclusion

The study provides grounds for the conclusion about the insufficient level of older preschool children’s sensitivity formation, which requires changes in the educational process in the preschool educational institutions, the need to justify and test pedagogical conditions that contribute to the effective older preschoolers’ sensitivity formation. We see the prospect of further scientific research in the experimental verification of pedagogical conditions of sensitivity formation in preschool educational institutions, mainly updating, enriching of the content, forms, methods, and means of educational work with preschoolers on sensitivity education, involvement of preschool children together with their parents in charitable activities in preschool educational institutions.

References


