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## Determinants of Functional Diagnosis and Strategies of Work in School Relations with Students with Diverse Educational Needs – in the Opinions of Teachers and Students of Special Education

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The goal of education is to develop children's native abilities  
from an early age, not to burden them with knowledge...

(Shimada, 2023, p. 146)

### Abstract

Currently, functional diagnosis is becoming an essential part of teaching and learning processes at school. It allows for the identification of students' needs and the adaptation of teaching strategies to the individual skills and abilities of each student. To properly perform a functional diagnosis, it is necessary to consider many conditions. This paper focuses on the analysis of the most current concepts concerning the essence, assumptions, characteristics and principles related to the functional diagnostic process, which are the result of many years of theoretical, practical and scientific work of a large group of specialists investigating this issue. The paper also presents a fragment of the author's research on the perception of functional diagnosis and its determinants in the current educational reality by active teachers and students of special education. A qualitative strategy was used. The method of a semi-structured, individual written interview was applied.

This study also contains conclusions from the research, observations and implications for pedagogical practice regarding factors that may foster better effectiveness of the diagnostic process, and the strategies applied in educational and therapeutic work with students with diverse needs in institutions available to general public.

**Keywords:** determinants of functional diagnosis, diagnostic process, school functional assessment process, strategies for working with students in an institution available to general public, students with diverse educational needs.

## **Functional diagnosis/assessment according to experts and specialists**

The fundamental essence and aim of the diagnostic process is the description and analysis of facts, events, phenomena and processes leading to their understanding and explanation. However, Danuta Skulicz indicates “the identification of the aim of the study and its description (genesis, classification, typology) should not be the final stage. With regard to research whose subject is a human being, we want to find an answer not only to the question of who a human is but also who they become and who they should be ... diagnosing, i.e. understanding and explaining leads us to another goal, which is human development and the complex (observable and unobservable) contexts of his/her being and functioning in the world. The determinants of being and functioning of a person have cultural, symbolic and social dimensions. In these dimensions, we try to answer the question: what should a human be? Multifaceted and multi-threaded answers result in consequences both for the construction of pedagogical theories and pedagogical practice” (Skulicz, 2010, pp. 221, 222). Changes in the approach and the way of thinking about people with individual/diverse needs have also led to changes in conducting diagnostic activities in special education. The biological model, in which nosological diagnosis was predominant, was replaced by the social (individual) model and the humanistic paradigm, where the necessity to consider the needs of people with disabilities and the possibility of satisfying them most effectively were recognized, which was reflected in the functional diagnosis/diagnosis of functional skills (Niemiec, 2018, p.48). Currently, functional diagnosis, which is identified only with various contexts of psychological and pedagogical counseling, is losing its importance. It ceases to be a typical psychopedagogical diagnosis associated with various developmental aspects of the examined person. Additionally, it does not only concern the environmental assessment of student’s functioning that refers to interpersonal and social contexts. We can consider it to be the assessment of the daily functioning of a student with a disability with diverse needs. A student is perceived as a complex person and consideration is given to various aspects of their development, whose functioning is the result of many different factors. In

the field of special education, including speech therapy, functional diagnosis (diagnosis of functional skills) is currently conducted for instance in diagnostic and therapeutic work with an individual person and their conceptualization in connection with the development of individual diagnoses, multi-specialist assessments of the student's functioning, educational, therapeutic and care programs, speech therapy and assessment in conducting a diagnostic and therapeutic observation.

The way the essence of functional diagnostics is currently understood is due to many years of theoretical, practical and scientific work of a large group of specialists and experts investigating the process in question. The basic assumptions that guide the current model of functional diagnosis mostly include its processual nature, a holistic approach to the human being, immersion in the environmental context ... it is a diagnosis for the "quality of life" (Marcinkowska, 2009, p. 239). It is a positive, complete (developed), dynamic diagnosis that is constantly updated (Cytowska, 2006, pp.55,56). A functional diagnosis contains information about the stage of development of cognitive functions, communication competencies, socio-emotional development, demand for support, executive and motor functions and independence (Trochimiak & Gosk, 2012, p.144). It is characterized by comprehensiveness, profiling, developability, focus on the rehabilitation process, prediction and non-invasiveness (Głodkowska, 1999). In contrast to nosological diagnosis, all people (not only professionals) take part in the child's/student's activities. ... Observation and interviews are most frequently used for assessment and diagnostic tools are individual. ... In the diagnosis-rehabilitation relationship, diagnosis "does not precede rehabilitation" and both processes are intertwined (Marcinkowska, 2004). The term *functional skills* indicate the skills that have a direct impact on a person's independence, self-reliance and resourcefulness. Functional diagnosis focuses not only on "strengths and weaknesses" but, above all, on the developmental potential of a person. Therefore, it includes a positive diagnosis. It is a long-term process (verification of the diagnosis during therapy, possible modifications of methods and techniques of interaction, observation of changes in individual spheres of development, etc.). It is also an interdisciplinary process (cooperation of many people, such as specialists and people from the closest environment of the examined person). Additionally, it is also dynamic (the diagnosis is not constant; it is subject to modifications; it is completed on an ongoing basis and verified with the actual state – diagnostic verification should take place at least every six months in special education practice). Importantly, diagnosis should include functional skills of care diagnostic process related to noticing, learning about and meeting the needs of people with neurodiverse development. These needs may be related to the functioning of the respondent's family or may be associated with a care or educational institution. They may result from the properties

of the body, or be related to the activity of a person with individual needs in the environment (Niemiec, 2018, p.50). Functional diagnosis should be useful (pragmatic), serving practical interactions, which allows the determination of the key elements of therapy, corresponding to the real needs of a person. It can also be understood as "... a certain horizon that directs changes in the Polish system of psychological and pedagogical counseling...; [functional diagnosis] require redefining of this horizon from diagnosticians and therapists" (Domagała-Zyśk, Knopik, & Oszwa, 2018, 2018, p.88). In 2022, a textbook was prepared under the title *Standards for the Course of the Process of Functional Assessment of Children and Students and Planning of Educational and Specialist Support in the Case of the Following Difficulties: hearing impairment, visual impairment, specific learning disorders, speech and language development disorders, intellectual development disorders, autism spectrum disorders (ASD), behavioral and emotional disorders*. The textbook was prepared as part of a conceptual project at the John Paul II Catholic University of Lublin (KUL) commissioned by the Ministry of Education and Science. It was developed by a group of experts, researchers and practitioners from various academic centers and educational institutions in Poland (Associate Professor Wojciech Otrębski, PhD, KUL; Katarzyna Mariańczyk, PhD, KUL; Agnieszka Amilkiewicz-Marek, KUL; Katarzyna Ita Bieńkowska, PhD, The Maria Grzegorzewska University; Associate Professor Ewa Domagała-Zyśk, PhD, KUL; Beata Kostrubiec-Wojtachnio, PhD, Psychological and Pedagogical Counselling Centre in Chełm; Beata Papuda-Dolińska, PhD, Maria Curie-Skłodowska University, Educational Research Institute and Prof. Ewa Pisula, PhD, University of Warsaw). A year later, as part of the above project, the following study was published *School Functional Assessment: The Course of the Process in the Aspect of Activity and Participation Assessment*. It was prepared by Associate Professor Ewa Domagała-Zyśk, PhD, KUL; Katarzyna Mariańczyk, PhD, KUL; Professor Iwona Chrzanowska, PhD, The Adam Mickiewicz University; Marzenna Czarnocka, Director of the Psychological and Pedagogical Counselling Centre; Associate Professor Beata Jachimczak, PhD, The Adam Mickiewicz University; Associate Professor Magdalena Olempska-Wysocka, PhD, The Adam Mickiewicz University; Associate Professor Wojciech Otrębski, PhD, KUL; Beata Papuda-Dolińska, PhD, Maria Curie-Skłodowska University, Educational Research Institute; Karol Pawlak, PhD, Polish Council for International Classification of Functioning, Disability and Health (ICF) and Prof. Dorota Podgórska-Jachnik, PhD, University of Łódź. In the above study, the school functional assessment process is based on the analysis of student's functioning according to the scheme provided by ICF (WHO 2001, WHO, 2009). The authors described the use of ICF in the process of school functional assessment, and the teacher's diagnostic tasks in the context of the implementation of functional diagnosis. They presented the course of school functional assessment in an educational institution and de-

terminated the importance of school in the process of functional assessment of students. The tools recommended for school functional assessment and the evaluation of the school functional assessment were also presented. The innovation and implementation project in the field of intersectoral support for children, students and families at the district level (*powiat* in Polish), i.e. the School Functional Assessment Process developed by the above team of experts, (see also Byra, 2022), currently implies the need to prepare schools and teachers for the task of carrying out the functional assessment of students in institutions and to take necessary supportive measures. The latest concept of functional diagnosis understood as "... a multifaceted process of identifying the student's resources and difficulties and the environmental factors affecting them, taking into account the analysis of functioning (based on the ICF classification, knowledge of milestones in the child's development) and a criterion diagnosis if established (based on the ICD or DSM medical classification), as well as an appropriate and constantly evaluated support program" (Bugdalski, 2024) indicates that not only psychologists, school educators and special educators are to carry out functional assessments. It can also be conducted by a teacher or tutor. Therefore, one of the basic conditions for the implementation of the education model, which considers a functional diagnosis appropriate to the needs of the child/learner, adequate support and care, and a focus on building an inclusive culture, is not only an organizational change or increasing specialist competences of the staff of institutions available to general public but, above all, a positive attitude of the community of these institutions to cooperation, and engaging work in the communities of people with diverse needs and developmental opportunities (Bugdalski, 2024).

### **Functional diagnosis/assessment from the perspective of students of special education and teachers – an outline of own research**

The above concepts regarding functional diagnosis and school functional assessment have become a premise to present a fragment of my own research conducted as part of a larger empirical project concerning the opinions of teachers on the concept of inclusive education and the perception of the process of educating students with diverse needs in schools. The fragment of the research was related to the problem of understanding the essence of functional diagnosis and its determinants in the context of educational, care and therapeutic work with students with neurodevelopmental difficulties in institutions available to general public. The research group consisted of 28 students in the third and

fourth year of special education (major: education and rehabilitation of individuals with autism spectrum disorder) conducted at the University of Silesia in Katowice (the students started the research after completing the module *Diagnostic process in special education*, as part of which they learned about the essence of functional diagnosis) and students of postgraduate studies at the WSB Merito University (degree program: Education and therapy of individuals with autism spectrum disorder, with whom the author of this study conducted classes – *Diagnosis of autism spectrum disorders*). Thirty-six students were mainly teachers at various stages of education (from preschool education teachers and primary school teachers to secondary school teachers). Among the respondents, there were five special educators (implementing revalidation and co-organizing education in primary and secondary schools available to general public), two psychologists and four speech therapists. The remaining respondents (n=25) were teachers in primary and secondary schools (n=16) and teachers of early school and preschool education (n=9). Among the surveyed students, thirteen were trainee teachers, seventeen were contract teachers, three were appointed teachers and four were certified teachers. When enrolling in the study, the students were in the process of implementing content on functional diagnosis. A qualitative strategy was used. The method of a semi-structured, individual written interview was applied.

Below are selected written statements from teachers and students concerning their subjective understanding of functional diagnosis, its essence, characteristics, principles of implementation and crucial conditions, as seen by the study participants.

### **Selected written statements of the surveyed teachers**

#### **N1 (early school education teacher; promotion level – contract teacher)**

... Functional assessment is about identifying the student's individual way of coping with challenges and discovering and eliminating barriers that inhibit progress.

#### **N2 (high school teacher, English teacher; certified teacher)**

In my opinion, an important element of functional diagnosis (if it is to be an effective tool) is an individual analysis of the child's problems in various situations. Entering the child's environment gives the opportunity to determine the reasons for failures. It allows you to individualize work with the child and adjust the methods of work to their abilities and needs. Then, it is important to translate them into taking action to improve the child's functioning. It is crucial to observe the child in various situations and collect a full picture of what is a problem for them and what hinders their harmonious development. The diagnosis should include a detailed description of the child's strengths to make them stronger and a description of areas for development. I believe that it is not possible to create an in-depth diagnosis based on a single source of information. These elements seem particularly important to me.

**N3 (preschool education teacher; trainee teacher)**

I believe an effective functional assessment is conditioned by a positive approach. Discovering the potentials, resources and abilities of the child and the environment in which they function ... focusing on the positive sides strengthens the student's self-esteem and encourages them to continue working. It is also important to the educator, who noticing the positive sides and the development of the child in terms of their strengths also works on the child's weaknesses more effectively and with greater motivation. Activating the potential of parents and the local environment results in the development of the student in various spheres.

**N4 (history teacher, primary school - stage II, certified teacher)**

... For the functional diagnosis to be effective, first of all, it is necessary to expand and educate everyone in the field of inclusive education and inclusion in general because everything starts with the approach. If there is cooperation between specialists, teachers, principals, parents and students, who will follow the goal of treating each other individually, with understanding and awareness, it will be easier and better for all these people. It will be easier to make an accurate diagnosis and, above all, to choose the right means and methods to support the student and parents. Of course, you cannot expect everyone to act in this way. It is about cooperation based on partnership, mutual respect and openness to new knowledge and experience. It is also worth paying attention to parents and willingness to cooperate and show great understanding. Because cooperation with parents (or rather the lack of it) is often the reason that disturbs the process of diagnosis and improvement of the child's functioning. It is necessary to develop a sense of security in them and gain trust without judging them. And above all, you have to put your heart into it, have a goal in making an appropriate diagnosis of the child to help them. Because if a child receives adequate help, they will function better at home, in an educational institution and in society in general.

**N5 (Polish language teacher, special educator, teacher co-organizing education, secondary school; promotion level – appointed teacher)**

Functional diagnosis should be performed by qualified specialists with knowledge and experience in a given area. Objective criteria and standards should be considered to ensure the accuracy and objectivity of the results. The examination should be comprehensive, taking into account various aspects of a person's functioning, such as motor skills, cognitive, emotional skills, etc. ... Functional diagnosis is a thorough assessment and identification of the needs of students with difficulties, giving the opportunity to adapt curricula and support individual needs of students.

**N6 (special educator, teacher co-organizing education [grades I-III of the primary school], promotion level – contract teacher)**

Functional diagnosis in institutions is possible only if the teaching staff led by the principal is aware and convinced of its effectiveness and the need for it in the institution. Without the knowledge and willingness of teachers, this diagnosis will not make sense, it will not meet its objectives. Therefore, it will not bring any positive results and will only cause confusion. Therefore, initially, it is necessary to take care of the training of teachers and specialists. The second component is cooperation with parents and their involvement in the school diagnostic process. They should be informed and educated because without it, the process of functional diagnosis can be also difficult.

### **Selected written statements of the surveyed students**

#### **S1 (student with the autism spectrum and ADHD, third year of special education)**

In my opinion, the diagnostic process makes sense when the diagnostician has competences such as insightful observation and the lack of superficiality in diagnosing. Recently, there has been more and more discussion about hasty diagnoses of children. Several different disorders have similar symptoms, so misdiagnoses may occur. There are also situations in which the child has temporary difficulties related to adaptation to the new environment ... There are overinterpretations related to attributing "fleeting" behaviors of the child to neurodevelopmental disorders. You should be open and investigative when observing the student!

#### **S2 (third-year student of special education)**

... Functional diagnosis is an in-depth process, it should not work based on the "zero-one" principle ... A great advantage of this method of diagnosis is the fact that it does not stigmatize the child as a 'problematic child with a disorder'.

#### **S3 (student with the autism spectrum, fourth year of special education)**

... The factors determining the quality and completeness of the functional diagnosis include improving one's own diagnostic skills because thanks to this, it is possible to influence the educational and therapeutic progress of the child. Perhaps if many more diagnosticians realized it, the situation in the lives of students and their families would improve. I believe in the metaphorical phrase that little by little does the trick. I hope that more and more children will not only receive reliable diagnoses, but also thanks to them will have a vision of a better quality of everyday life in the future.

#### **S4 (a third-year student of special education)**

In my reflections, I will try to base my thoughts on the acquired knowledge because the experience related to functional diagnosis at school is foreign to me now. I believe that attention should be paid to the significant potential of functional diagnosis, especially in the context of effective help for the child. A well-conducted diagnosis, through a thorough understanding of the child's needs and taking appropriate action, can lead to a clear improvement in their functioning. However, this involves a lot of effort on the part of the diagnostician due to the multifaceted approach to the student. It is a difficult process but not impossible.

#### **S5 (a fourth-year student of special education)**

What needs to happen to perform a functional diagnosis directly in the facilities? It is certainly necessary to change the approach of the rest of the teaching staff to the whole idea of inclusion and work among people with diverse educational needs. It is important that cooperation between teachers and special educators should take place with mutual respect and support. There is still a shortage of specialists at schools and kindergartens. I think the teaching staff will have to undergo training on the functional diagnosis of the student so that their later effects of work are as good as possible.

The analysis of the statements of the surveyed teachers and students indicates their good knowledge of the general assumptions and principles of func-

tional diagnosis. They understand the essence and the need to implement the diagnostic process based on a functional approach in different educational institutions at various levels of education. In their statements, they emphasize the need to recognize the comprehensiveness and interdisciplinarity of school diagnosis, a holistic approach, taking into account various factors and aspects of students' functioning, their extracurricular activities and the environment in which they realize these activities. They pay attention to the adequate and accurate identification of students' needs, focus on their strengths, potentials and resources and also on improving the diagnostic and therapeutic skills of diagnosticians, specialists, teachers, educators and psychologists. They accurately indicate the main characteristics of functional diagnostics, such as profiling, developability (its dynamics), focus on the rehabilitation process, prediction, non-invasiveness and processual nature. This is particularly important from the perspective of inclusive education.

In their statements, the surveyed teachers and students of special education also point to the critical determinants of the functional diagnostic process in institutions available to general public. One of them, according to the respondents, should be qualified staff who will create a specialized diagnostic team. Therefore, it will allow a reliable diagnosis based on clinical and diagnostic knowledge. Such a team should include a psychologist, a special educator, a speech therapist and optionally a physiotherapist, a sensory integration therapist, etc. Another condition indicated by the respondents should be the availability of tests and materials for diagnosis. The diagnosis should be supported by a test diagnosing development in a specific area. Therefore, the formulated diagnosis will not be based only on observation, analysis of documents, or interview. To achieve this aspect, the team must have access and appropriate qualifications to conduct tests. Another condition is teamwork and cooperation with students' parents. For the diagnosis to be effective, the team must have a coherent vision and must cooperate in the diagnosis process. Cooperation with parents and common goals regarding the diagnosis must be uniform. Another critical factor as indicated by the respondents should be the appropriate space and conditions for diagnosis. It is important that the school should find a space in which the team can diagnose the student. At the same time, such a space must be conducive to the well-being of the child.

According to the surveyed teachers and students, school functional diagnosis can bring many advantages. It can be more accurate, accurate, reliable, friendly and "adapted" to the student due to a better and more precise knowledge of specific students by teachers. During its implementation/course, it may enable observation of more behaviors and reactions in different situations. The assessment conducted in a familiar space for students, such as the institution they attend on a daily basis, will allow them to feel more comfortable,

natural and at ease so that the results may be more reliable than in the case of a diagnosis in a psychological and pedagogical counseling center. Functional diagnosis in school can contribute to better cooperation between teachers in diagnostic, therapeutic and educational work with students. It can help increase the quantity and quality of consultations with students' parents. Finally, it may contribute to reducing the phenomenon of "hiding" counseling center opinions and certificates by parents, which could allow for accelerating and improving the process of adapting the forms and methods of helping a learner/child with diverse needs.

The respondents also indicated possible disadvantages/barriers to the implementation of school functional assessment. They associated them mainly with organizational difficulties, lack of readiness of school staff to introduce changes, lack of specialists, ambiguity of specific tasks (e.g. in the case of special educators, teachers co-organizing education), a negative perception of or attitude to the idea of inclusive education and working with people with diverse educational needs, lack of sufficiently good cooperation between teachers of different subjects and other specialists working with neurodiverse students.

### **Functional diagnosis – aspects determining its significance and strategies for working with students with diverse educational needs – summary**

Functional diagnosis can be a crucial element in educating students with diverse educational needs and, in fact, all students. It can generate effective strategies in individual work with the student, the whole class team and the group. In the context of the adequate identification of the skills and needs of all students, a functional diagnostic process seems to be extremely necessary and useful. It allows for the determination of the main elements of therapy and education. It also enables planning adjustments that meet the real needs of specific students. It allows the use of individualized tools to identify needs (e.g. needs diagrams). Due to the permanent verification, it allows for the introduction of therapeutic elements during its duration. It also allows for the modification of strategies for educational or care work, e.g. to properly build communicative situations between teachers and students or between students. However, it must be implemented based on factors that will determine its sense in school practice, especially in the context of the concept of educational inclusion, such as:

- properly implemented multi-specialist assessment of the student's level of functioning, functional school diagnosis, current diagnoses and their evaluation - reliability of diagnoses, knowledge of the etiology, mechanisms of functioning, and especially not underestimating endogenous factors, or neu-

robiological determinants (e.g. autism spectrum or ADHD), the use of differential diagnosis, proper identification of developmental, educational and social needs of neurodiverse students;

- multicontextuality – considering the assessment of student's functioning from various sources – specialists (educators, psychologists, speech therapists, doctors [a multidisciplinary dimension of the diagnosis], but also from the student, their parents, teachers, peers; avoiding the mistake of not considering all sources of knowledge;
- versatility of approach and tools - considering various areas of child's functioning (cognitive, emotional, social and behavioral). The tools and methods should be varied to understand the needs and potential of the student as comprehensively as possible. It will ensure the reliability of the diagnosis, eliminating a one-sided or simplified approach to the child's situation – an adequately selected and prepared diagnostic workshop of teachers (methods, techniques, tools for collecting data on students);
- adequate methodological solutions (educational, therapeutic and care) – in relation to the identified needs of students and multi-specialist assessment of the student's level of functioning, as well as an appropriately individualized assessment system.

The following should also be given attention:

- (informational, instrumental, emotional) support given to parents from the educational institution;
- the need for qualified educators, training of teaching staff to raise awareness of the mechanisms and determinants of the functioning of neurodiverse students;
- open and flexible use of methods and solutions by teachers at work in relations with students with diverse needs;
- noticing their own diagnostic, therapeutic, educational, personality resources by teachers – improvement and self-diagnosis of their own social and emotional skills (assertiveness, empathy, coping with stress, communication); identifying their own needs and emotions.

Regardless of the criterion (differential) diagnosis, most neurodiverse students need support in common areas, i.e. attention span, motivation (especially internal), differences in learning (different learning pace), behavior management, working time (efficiency, fatigability), assessment of students' progress and evaluation of strategies implemented for them. These are the main common challenges in teaching children and young people, which are the basis of their functioning in the educational space and reality. Therefore, diagnostic or educational-therapeutic work strategies useful for all students are the ones that are based on mindfulness, accurate identification of the needs of all students, methodological flexibility (modifications of methods of work that do not bring

benefits), feedback, empathic listening, paying attention to non-verbal communication (emotions). These are the strategies that are eclectic, which could be verified during teacher “supervisions” that unfortunately are not commonly applied in Polish schools and kindergartens). The crucial elements of work, which could also bring success in the diagnostic process and the resulting educational and therapeutic process, include a system of motivation and reinforcement (contracts – rules with students and parents), authentic reliance on passions and interests, concise messages in the same form (multiplicity of communication channels), organization of the environment - stability and predictability, distance and humor, not judging and not taking offense at students (students feel whether they are liked), not treating the profession as self-sacrifice, support and commitment from parents, the atmosphere in the classroom and the quality of rooms.

We should bear in mind the words of Nishimoto Shimada for whom the purpose of education is to develop children’s native abilities from an early age, not to burden them with knowledge. If functional diagnosis in school is to be useful and beneficial for students, it should aim at a thorough analysis of problems and ought to establish goals conducive to the acquisition of skills by students that are essential for contemporary challenges, dynamically changing reality and the future. It should be carried out with consideration given to relationality and dialogue.

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## **Uwarunkowania diagnozy funkcjonalnej a strategie pracy w relacji szkolnej z uczniami ze zróżnicowanymi potrzebami edukacyjnymi – w opiniach nauczycieli i studentów pedagogiki specjalnej**

### **Streszczenie**

Diagnoza funkcjonalna staje się dziś kluczowym elementem procesu nauczania i uczenia się w szkole. Pozwala ona na identyfikację potrzeb uczniów oraz dostosowanie strategii nauczania do indywidualnych umiejętności i możliwości każdego ucznia. W celu prawidłowego przeprowadzenia diagnozy funkcjonalnej, konieczne jest uwzględnienie wielu uwarunkowań. W niniejszym artykule skoncentrowano się na analizie dotychczasowych oraz najbardziej aktualnych koncepcji dotyczących istoty, założeń, cech charakterystycznych, zasad związanych z diagnostyką funkcjonalną, które stanowią wynik wieloletniej pracy teoretycznej, praktycznej i badawczej liczego grona specjalistów zajmujących się tą problematyką. Zaprezentowano też fragment badań własnych dotyczący postrzegania diagnozy funkcjonalnej i jej uwarunkowań w obecnej rzeczywistości edukacyjnej przez czynnych nauczycieli oraz studentów kierunku pedagogika specjalna. W badaniach zastosowano strategię jakościową, posłużono się metodą wywiadu częściowo-ustrukturyzowanego, indywidualnego w formie pisemnej. W opracowaniu niniejszym zawarto też wnioski z przeprowadzonych badań, refleksje własne, a także implikacje dla praktyki pedagogicznej dotyczące czynników, które mogą sprzyjać lepszej efektywności procesu diagnostycznego, a tym samym strategiom stosowanym w pracy edukacyjno-terapeutycznej z uczniami o zróżnicowanych potrzebach w placówkach ogólnodostępnych.

**Słowa kluczowe:** uwarunkowania diagnozy funkcjonalnej, proces diagnostyczny, proces szkolnej oceny funkcjonalnej, strategie pracy z uczniami w placówce ogólnodostępnej, uczeń/uczenica ze zróżnicowanymi potrzebami edukacyjnymi.