

Relationship between Education, Development & Health from Cultural-Historical Perspective

Viktor K. Zaretsky

Moscow State University of Psychology & Education, Moscow, Russia,
ORCID: <https://orcid.org/0000-0002-8831-6127>, e-mail: zar-victor@yandex.ru

Alla B. Kholmogorova

Moscow State University of Psychology & Education; Moscow Research Institute of Psychiatry
(Branch of the National Medical Research Centre of Psychiatry and Narcology), Moscow, Russia,
ORCID: <https://orcid.org/0000-0001-5194-0199>, e-mail: kholmogorova-2007@yandex.ru

The article reflects on the authors' professional journey to problematizing the relationship between Education, Development and Health. This journey consisted of 4 stages or steps: 1) from research on cognitions in creative problem solving in healthy and pathological samples to identification of the role of reflection in cognitive self-regulation and coping with challenges; 2) from the practice of helping to overcome learning difficulties and psychological maladjustment to making meaning of these practices using cultural-historical concepts; 3) from using the cultural-historical framework to understand the relations within the Education-Development and Health-Development dyads to considering complex relations within the Education-Development-Health triad; 4) from relations within the triad to “a new parallelogram of development”, i.e. creating the basis for helping practitioners' (educators'; psychologists'; psychotherapists') efforts that would account for “a tripartite goal” using a conceptual framework of cultural-historical psychology, including the reflection-activity approach (the zone of proximal development; the multidimensional model of the zone of proximal development; dual resource; collaboration; reflection; problem epicenter, a subjectness position; self-development). When discussing each step, the authors identify gaps in efforts invested by specialists working in every dimension and provide evidence to an essential contribution of cultural-historical psychology theory and practice to bridging these gaps and establishing an evidence-based practice of education aiming at students' development and health enhancement.

Keywords: education; development; health; cultural-historical psychology; reflection-activity approach; creative thinking; psychological counseling; psychotherapy; reflection; zone of proximal development; multi-dimensional model of the zone of proximal development; problem epicenter, double resource; collaboration; subjectness position; self-development.

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The authors of the article believe that establishing the relationship between three fundamental subject matters of psychology as a science, and essential areas of psychological practice – and namely, Education¹, Development and Health – is prerequisite to achieve practical goals in any of these three areas. However it took the authors much time and effort to come to conceptualize the relationship between the three disciplines. When we started working on this article, it became clear that in order to create a proper problem statement addressing the relationship between the subjects of science from

the perspective of the non-classical, practice-oriented research, it is crucial to make meaning of one's own scientific and practical journey. According to our teacher N.G. Alekseev, what works in practice is “lived-through” scheme rather than “office-room” patterns. Therefore, we chose to approach the article's central problem statement by reconstructing each of the authors' professional journey. It enabled us to single out *four steps needed to articulate the problem statement addressing the relationship between Education, Development and Health in scientific research and practice.*

¹ The authors use the terms “education”, “instruction” and “learning” as synonyms in this article.

1. The first step is discovering the contributions of reflection to normal and pathological functioning. The authors of this article carried out their first term papers under the supervision of scholars who used to work with Vygotsky and whose frame of reference developed under the influence of his ideas and personality. These scholars — *Bluma W. Zeigarnik and Piotr Y. Galperin* — were friends and paid regular visits to each other. Nevertheless, as far as research is concerned, they went their separate ways “rearing” the seeds that L. Vigotsky had sown, i.e. the ideas that fertilized various areas of psychology. Bluma Zeigarnik promoted the cultural-historical approach in clinical psychology, and Piotr Galperin introduced it to developmental psychology. Nonetheless, their approaches had something in common, and namely, they were practice-oriented; both scholars were practitioners right from the start. When developing psychodiagnostic methods in pathopsychology, *B. Zeigarnik emphasized the idea of instrumentality of the human psyche*. In our personal communications, she reiterated that facilitation of mental processes mediatedness opened a way to resolving psychological problems; she pointed out that pathology was, first and foremost, a deficit of self-regulation capacity. *P. Galperin grounded the development of his educational methods in the idea that the origins of the human psyche lay within the social, and that the psyche was “grown” from external, materialized actions through their interiorization.*

Thus, their effort aimed at solving the issue of the mental processes organization, and untangling converted series of internal actions hidden from us.

Volitional regulation; awareness; mediatedness, and goal-orientation were Zeigarnik’s favourite and most important words for comparison of mental processes in normal and pathological conditions. When specifying the conditions of efficient education, Galperin introduced the notion of the mental actions quality, and a key feature of this quality referred to awareness of the mode of action. A wealth of skills and knowledge that our teachers, who elaborated on Vygotsky’s ideas, endowed us became an important foothold for the step towards *discovering the role of reflection in the norm and in mental disorders*. This step grew from the integration of different lines of cognition research and attempts to shape thinking in the course of creative problem solving by healthy subjects (V.K. Zaretsky) and people with thought disorders in schizophrenia (A.B. Kholmogorova).

Creative thinking resisted to being shaped. This process might have been hindered by a view on mistakes that advocates of the stage-by-stage formation of mental actions stuck to. This framework conceptualized efficient learning as formation of mental actions meeting predetermined high standards, and considered mistakes to be undesirable and intolerable phenomena. *At the same time, an insight occurred only when research participants followed wrong routes through the task. That is, a mistake was essential for creative action, and the insight exhibited itself as experiencing the transition from a wrong mode of action to a mode that met the challenge appropriately.* It was within this transition when the crucial contribution of reflection to cognitions came to the foreground. Therefore, it was no coincidence that research

continued from other perspectives: the system approach to cognition, which believed reflection to be incorporated in the structure of thinking [2; 27] allowed to develop a theoretical rationale for the central role of reflection and to support it with empirical evidence from cognitive research on the material of creative problem-solving.

Zaretsky (1975) identified and described the phenomenon of pre-insight intensification of reflection in his graduation study supervised by Igor N. Semenov, Galperin’s and Alekseev’s disciple. Now it is difficult to believe that the graduation thesis was marked down to “B” instead of “A” due to the use of “a completely unknown, non-psychological term ‘reflection’ ” [1], which the jury had reproached the author for. In after years, the creative problem-solving task became not only the empirical material for creative process research but also the model of a challenging situation when a person faces inadequacy of his/her modes of action. Given that this situation is a common occurrence in learning, in after years, the identified contribution of reflection to creative problem solving became an important clue to assisting children who experience learning difficulties.

The creative problem-solving task modeled the situation of a challenge and the need to become aware of and to restructure basic modes of action. In one of the first coauthored articles, we called the mechanism of this restructuring “*a constructive function of reflection*” [29] As early as at the end of the 1970s, Nikita Alekseev, our second and mutual teacher, emphasized that reflexivity became a specific trait of cognition in the second half of the 20th century, and within a short time, it would be impossible to imagine either science or culture in general without the concept of reflection [22] Alekseev enjoyed quoting Fichte’s words, “Reflection is freedom”. He also argued, “When the mode is out of awareness, it harnesses the person; reflection enables the person to become aware of the mode of action and to harness it” (N.G. Alekseev, a workshop presentation).

Inspired by the ideas about the role of reflection in cognitive regulation, which we both believed to be a possible clue to solving the puzzle of schizophrenia at the time, we approached Bluma Zeigarnik in 1979 and suggested studying the process of creative problem solving in schizophrenia patients. Zeigarnik was quite impressed with the potential of reflection studies for uncovering the mysteries of mental disorders, as explicit self-regulation or mediation of mental processes would be impossible without fully-fledged reflection. So, our first mutual study of cognitive dynamics and its reflexive regulation in the normal and pathological conditions [29] occurred. An examination of the healthy sample showed that in a challenging situation, at the stage of moving in blockade [16] cognition either got organized by means of reflection and overcame the impasse, or got disorganized unless the regulatory function of reflection “switched on”. An examination of the schizophrenia sample showed that whereas cognitive processes before moving in blockade unfolded in a similar way in both samples, at the stage of moving in blockade cognition disintegrated because reflection never “switched on” [49] These findings allowed us to infer that reflexive regulation of cognition played a

crucial role in challenging situations and that this regulation was disturbed globally in severe mental disorders. Subsequent writings elaborated on this conclusion [35], [36]. Later — during the following step — the views on the role of reflection in genesis and resolution of challenging situations became essential for the translation of academic research onto psychological practice.

2. The second step comprised work within “Education-Development” and “Health-Development” dyads.

At the cusp of 1980s–90s, when the Russian academic psychology started to turn its face towards practice, we both, just like other Russian psychologists, dived into practice and became engrossed in it. Then our “reflection-based” expertise transformed into conceptual tools, which were quite instrumental when dealing with practical issues in psychotherapy (A.B. Kholmogorova) and problem-solving counselling (V.K. Zaretsky), which focused on challenges that many individuals as well as organizations and communities were encountering at the time.

Later, due to different reasons, issues of helping children with learning difficulties became the focus of Zaretsky’s counseling activity. Kholmogorova who completed multiple training courses in various areas of psychotherapy that were available due to generous support of our foreign colleagues, had her heart set on Aaron Beck’s cognitive psychotherapy. At this stage, the work was developing in two directions: 1) the cultural-historical framework became essential for analyzing the Education and Development issues when providing assistance to underachievers and children with learning difficulties and arrested development; 2) the cultural-historical framework helped to establish relationships between the issues of Health and Development in terms of psychotherapy effectiveness research (A.B. Kholmogorova). *At this stage, the “Education-Development” and “Health-Development” dyads were separate.*

Let us consider the “Education-Development” dyad using the example of psychological and educational support with overcoming learning-difficulties provided to school students in 1990–2010. In the beginning, this objective consisted in assistance with bridging the gaps in knowledge by improving teachers’ efficiency through incorporating psychological assistance tools helping to become aware of inappropriate modes of action and to restructure them, i.e. through initiating, activating and supporting students’ reflection. A small book “When the situation seems insolvable...”, which was written right before this stage, aimed at endowing people with psychological expertise that they could use for real-world problem solving, and articulated five rules of creative problem solving [20]. The 17-year-long academic research on cognition in creative problem solving, the material of which was used in several PhD studies, resulted

in five short sentences... Here are these rules that became the first tools of psychological help to organize thinking in a challenging situation [20, p. 47].

1. In order to solve a problem, one needs to set one’s mind to it.

2. In order to solve a problem, one needs to believe that it can be solved.

3. In order to solve a problem, one needs to be solving it.

4. In order to solve a problem, one needs to understand what interferes with solving it.

5. In order to solve a problem, one needs to see the obstacle as a way to solving the problem².

As you can see, these rules were free from any subject-specificity. The former three rules represented personality-related conditions of solving challenging problems (to set one’s mind to; to believe; to invest effort). The latter two rules were related to reflection: to become aware of the obstacle (which lay within one’s own mode of action) and to turn it into a resource when searching for a solution, as P. Galperin [14] believed that obstacles acted not only to disconnect but also to connect the problem statement and the solution to be found. Using chimpanzee’ problem solving research as an example, Galperin explained that when a chimp saw the distance between its hand and a banana as something that connected them rather than interfered with getting the banana, it would think to get a stick and fill in that interval.

Working with children with learning difficulties, we frequently employed the fifth problem-solving rule that helped children take mistakes and challenges easier. It helped them understand that becoming aware of the causes underlying challenges and obstacles on their way to the correct solution, as well as deficits in their own modes of action was indeed a great success. There was only one step from becoming aware of the cause of a mistake to correcting it, and this step was to see the obstacle as a way to problem-solving, namely, to understand what and how one needed to change about one’s mode of action. Students of any age that we worked with mastered the words “mode” and “reflection” very quickly and incorporated them in their activity.

In the 1990s, the number of underachieving students was rising fast. According to our practical experience, introduction of differentiated instruction and the so-called remedial classes made things even worse rather than improved them. This happened because teachers preferred to view underachieving children as “ineducable”. This gave a proper explanation to their professional failure, and attempts (unsuccessful though) to teach these children could qualify as an act of humanity.

This perspective prevailed among educators, but it contradicted successful practice of “innovative teachers” who demonstrated that indeed there were no in-

² On April 21, 2019, the 500th TV-game “What? Where When?” took place, in the creation of which V.K. Zaretsky took part as a psychologist-consultant in 1975. Having voiced the first four rules for solving a creative problem, the host of the TV program B. Kryuk suggested asking players a question, about what the fifth rule is. Team of six players could not answer correctly, so we may say that 30 years after these rules were formulated, the idea that there is a resource in the difficulty itself for a solution still remains unclear and even original.

educable children, but there were creative challenges of setting conditions for their education and development. Sometimes these challenges could be very difficult but still manageable. Emilia Leongard's work with deaf and hard-of-hearing children and the experience of the Centre of Remedial Education; "Borozdin's School" Abilitation Centre etc. served good examples of that practice. One could also remember a unique experiment of the Soviet time, and namely, the project initially supervised by A.I. Meshcheryakov and later by E.V. Ilyenkov, who created conditions for education and development of a group of deafblind students. A student from this group A.V. Suvorov became PhD in psychology and developed a unique educational approach [48]. Keeping in mind these examples of fruitful professional educational and psychological work, we decided to reword the problem of educating "the ineducable": when a child failed to learn and to develop, it would mean that educators had failed to find and to create such conditions for learning and development that would have met this child's specific needs. As this child's life would begin to center around the situation of facing learning challenges, the outcome of which would determine his/her future life, the practical goal would focus on how to help the child overcome this learning challenge. It was assumed that if the child overcame his/her learning difficulties with our help, he/she would make progress in development as Vygotsky stated that "learning preceded development" [11]. Besides, Galperin's work taught us that operational cognitive schemata in junior-school children changed when children started learning elementary mathematical concepts [44]. Elkonin articulated a clear statement that it was the child's own intellectual activity that drove development [61], and Elkonin and Davydov's practice of developmental education, which aimed at facilitating development through organization of instruction, was unfolding successfully in psychology and education [15; 46; 60; 62], etc.

The first project whose aim was to rebut the assumption that there were ineducable children, encompassed summer schools for children with special needs and learning difficulties in the Nytvensky District of Perm Krai, Russia. The summer schools took place in 1996-2002, and it was the school of 1997 and working with children with learning difficulties at the Russian language lessons that gave rise to a new approach, which was named "the Reflection and Activity Approach" to helping children overcome learning difficulties [17].

The approach received this name to reflect the idea of a Russian language teacher (N.Y. Abasheva) and a psychologist who assisted her (V.K. Zaretsky) that students were to become agents of their activity by means of overcoming their own difficulties and reflecting upon this process. The core assumption was that orientation on overcoming challenges and active attempts at coping from the agent's position would facilitate gaining awareness on inefficient modes of action and promote their restructuring.

For example, when asked how they wrote dictations, most children answered, "I hear – I write". It was their natural way of writing dictations. Some children strongly believed that most words were spelled just as they sounded, and one could simply spell them by ear.

After a short piece of work on reflection focusing on analyzing and classifying mistakes, the mode of action went through initial transformation, "I hear – I think – I write". However the main issue was that the children lacked instruments to make thinking possible. While going deeper into the mode of action, the students became aware that one needed to see "bottlenecks" so that one could reflect on anything. They understood that one needs to know grammar rules for various cases, various morphemes, and word classes... Depending on the extent of the gaps, the middle part of the mode of action ("I think") could turn into a complex system of actions that occupied two or three pages when put down on paper. Nevertheless, when the mode of action was well-developed, tried, and its robustness was proved by practice, the child had nothing else to do to become literate but train 100 spelling rules and 50 punctuation rules getting to know some specific terms on the way. After one's own reflection and creative work on the mode of action, this goal seemed quite attainable.

The children left the summer school having acquired the experience of successful coping with several challenges (i.e. the learning effect might have been not so big), and willingness to continue working on their own difficulties. What was especially important, they were clearly aware of what they could do themselves and what they needed another person's help with (a teacher, a psychologist, or someone else). We believed this result to signify cognitive and personal development that was visible without special psychological testing [24].

This experience taught us that the assumption that "learning precedes development" was more than a theoretical statement, but a practical tool, some kind of a "methodological clue" to the problem of the relationship between Education and Development. Starting work with a student experiencing learning difficulties, one needed to identify what the child was able to do him/herself; what the child was unable to do; what help the child needed; and how things that the child would learn having overcome his/her difficulties could help him/her to develop and what specific development they would facilitate, which was especially important in terms of the problem statement. For example, arranging for the action of control (according to Galperin and Kabylnitskaya) [40] when working on mistakes due to lack of concentration facilitated development of attention. Efforts invested in overcoming the inability to remember more than a couple of words when writing a dictation and to understand connections between them resulted in development of a meaningful text perception, imagination, the ability to act mentally. Overcoming a stereotype of thoughtless "mechanical model-based action" led to development of thinking, understanding and establishing of causal and other relationships etc.

Positive personality changes that could be considered as new personality formations occurred in parallel. For example, lack of motivation for learning gave place to insatiable curiosity (sometimes a flock of children was following the teacher after the lesson asking her questions, some of which she even found difficult to answer). Lack of belief in one's own abilities and possible success changed for con-

fidence that there were no insolvable issues. Former lower scorers started wondering which Moscow universities they could enter. Resistance to making any assignments gave way to appetite for learning; willingness to face any challenge; enthusiasm when solving difficult problems. *The capacity for reflection enabled the children to be precisely aware of what they already knew, and of what they did not know yet but what they were going to learn tomorrow (the day or two days after etc.).* They became aware that to learn something that they were still unable to do, was a matter of time and effort alone. When anyone believed him/herself “ineducable” (disordered, “defective”), these myths dissolved quickly as soon as real learning progress was made. A student might even overcome learned helplessness when the educators managed to engage the child in relevant activity.

Witnessing personality evolution of the children whom we succeeded to provide efficient psychological and pedagogical help to (we should say it openly that of course, there were children who we failed to help), every time we got amazed at its speed. There was a former “lazybones” who told us that she got scared when she “had forgotten all the twelve word classes” on her way to the toilet at 2 a.m., but had succeeded to remember them while she was walking back. And there was an overage child who had spent three extra years at elementary school and who was telling a young teacher from a different school about his last-year training. He told her that he used to be unable to add figures but succeeded in learning all mathematical operations; that his reading speed increased month by month, and that he learnt to prevent mistakes in words with a soft sign...

All the changes resulted from an altered attitude to learning. Therefore, we started to lay a special emphasis on a student's position within the learning process, and we found out that students who exercised learning from the full subjectness position not only became agents of learning and reflection but also became agents of self-development. We were able “to catch” empirical acts of self-development by means of analyzing children's reflexive statements. For example, a child who was working on avoiding mistakes in words with unstressed vowels in the root could say in the course of reflection, “I have learnt to cope with my anxiety”. It was reconstructing the process that the child initiated alone that made the link between anxiety and working on mistakes be comprehensible. When the child started working on the rule, she became quickly aware that she knew the rule and how to use it, but her anxiety due to the fear of making a mistake destroyed the whole process and precluded rational action. Anxiety was a challenge; therefore she needed to learn to cope with it. She set the goal – she achieved it, “I have learnt to cope with my anxiety!” It is worth mentioning that no one said a word about “anxiety” during the lesson; the child asked neither the teacher nor the psychologist for help; that is to say, in the course of reflecting, she discovered a target for her fully autonomous effort. If the girl did learn to cope with anxiety that interfered with her performance, the step in development, which the child made by herself, could indeed be an instance of self-development.

The conceptual framework of the Reflective-activity approach (RAA) started to develop in the course of reflecting on the experience of summer schools; working with children with special needs and disabilities; orphaned children; adolescents with behavioral conduct issues, and other difficult categories of children and adolescents [21]. The key RAA concepts included students' subjectness position in learning [32]; student-teacher cooperation; positive, meaningful and emotional contact; reflection; elaborating modes of action; and self-development [21]. The value of Development became the basic value shared by the RAA-community members (as RAA advocates started to call themselves); the “Intention-Implementation-Reflection” scheme [1] became the basic scheme for arrangement of joint activity; and the main conceptual instruments encompassed cultural-historical psychology assumptions on the relationship between learning and development. The concept of the zone of proximal development (ZPD) [11], [12] was central and served the basis for the next step in conceptualizing the relationship between Education, Development and Health.

Nevertheless, it is worth looking at the progress with the “Development and Health” dyad at first. Let us begin to problematize the “Development-Health” dyad with citing a small quote from personal correspondence, “*You are saying that you have written an article on how Vygotsky's cultural-historical theory could be useful for psychotherapy. But psychotherapy has been rapidly developing... Was Vygotsky such a visionary indeed?*” (From Alfred Längle's letter to Alla Kholmogorova following the XXth IFP Congress).

We wrote and published the article with a detailed account of the importance of cultural-historical psychology for psychotherapy in 2010 [56], [57]. In the present article, we would like to give a brief description of the cultural-historical psychology heuristic potential for psychotherapy. Vygotsky authored a developmental theory with a very strong conceptual framework that may become an essential vehicle for psychotherapists if they want not only to eliminate the disease symptoms but also to enhance health resources facilitating their patients' development. From the cultural historical perspective, mental development implies internalization of cultural tools for organization of one's mental activity whereas psychopathology is a lack of tools for mental regulation and organization of the psyche. In this case, psychotherapy can be described as the process of compensating for this deficit through development of new mental formations that change the organization; expand the psyche's “apparatus”, and improve the capacity for mental self-regulation.

Let us refer to the authority of James Wertsch, one of the main Western experts in cultural-historical psychology, who wrote, “... the emergence of selfregulative capacities in ontogenesis – a central theme in the work of Vygotsky and his followers... their ideas about self-regulation can be properly understood only if we conduct a genetic analysis that goes back to the origins of self-regulation... researchers have paid very little attention to his ideas about the transition from interpsychological into intrapsychological functioning” [78]. Although contemporary

Western experts in Social Cognition do not mention Vygotsky's name, they have been disseminating the central idea of cultural-historical psychology putting an emphasis on the need for the transition from the intrapsychological (which conceptualizes social cognitions as resulting from maturation of some specific, genetically-programmed brain substrate) to the interpsychological (focusing on the role of the child-adult interaction) paradigm [76].

Undoubtedly, highlighting the importance of a genetic analysis, Wertsch meant that researchers paid little attention to the mechanisms of the transition from “the inter-“ to “the intra”, in order to study which one needs to address such concepts of Vygotsky's theory of development as collaboration; the zone of proximal development; bypass pathways of mental development. Another famous British researcher of social cognition, Charles Fernyhough points to a key contribution of Vygotskian ideas about the function of egocentric speech to understanding of the nature of mentalization and empathy-social cognitions that lay the ground for understanding oneself and other people [52; 69]. Fernyhough singles out two types of the adult-child or the therapist-client interaction as a clue for development of social cognitions: 1) *partnership interaction* implying two positions of a child and an adult; a client and a therapist (Vygotskian collaboration); 2) *instructional interaction* – when an adult or a therapist domineers the interaction (ideology of influence). Whereas the first type facilitates development of social cognitions and reflexive capacities, the second mode suppresses them. Relational analysis [73] – one of the modern psychodynamic psychotherapy approaches – directly relies on Vygotsky's concepts of internalization; dialogue with an adult, and ZPD.

Within the practice of the Reflection and Activity Approach to assisting children with learning difficulties [21] development of dialogical and reflexive thinking is embedded in the principles of collaborating within ZPD and facilitating of the subjectness position and reflecting on modes of action. A step in learning based on these principles may facilitate remediation of social cognition deficits. *The capacity for reflection can be viewed as an*

essential criterion of psychological maturity, and the process of “rearing” this capacity in the course of psychotherapy and assistance with overcoming learning difficulties facilitates development and the transition to a higher level of psychological functioning.

From the positions of the Russian tradition of the study of creative thinking and cultural-historical psychology, the mechanisms of the effectiveness of cognitive therapy of A. Beck were analyzed not only for mental health, but also for general development [50], [72], [30] Due to his major contribution to theory and practice of psychotherapy, Aaron Beck deserves to be called a Freud of the second half of the 20th century. Moreover, his ideas about the human ability to manage their mental processes and life were far more optimistic – he enriched psychotherapy with a metaphor of a human as a pilot. It was Beck, who translated the Cognitive Revolution, which overtook Western psychology, onto psychotherapy in the 1970s–80s [63]. Furthermore, a review of mechanisms underlying cognitive psychotherapy effectiveness from the conceptual perspective of the Russian cognitive research on reflection [50; 72] showed that Beck's writings contained the seeds of another revolution – the Revolution of Reflection that broke out in the 21st century when all psychotherapy has become reflexive or metacognitive in the Western psychology terms [53], *Describing these Revolutions in psychotherapy, we used to metaphorically describe them as “from sex and reflex – to reflection” in our publications* [56], [57], [72].

Figure 1 below embraces terms that various approaches to psychotherapy utilize as central concepts when addressing mental health issues, and all of them represent various functions of reflection.

As early as in 1988, Donald Meichenbaum, one of the cognitive psychotherapy founder, wrote, “Metacognition refers to the executive self-regulatory processes one engages in and how one reflects upon them. The CB therapist helps clients develop the ability to “notice,” “catch,” “interrupt,” “monitor,” and “evaluate,” their thoughts,

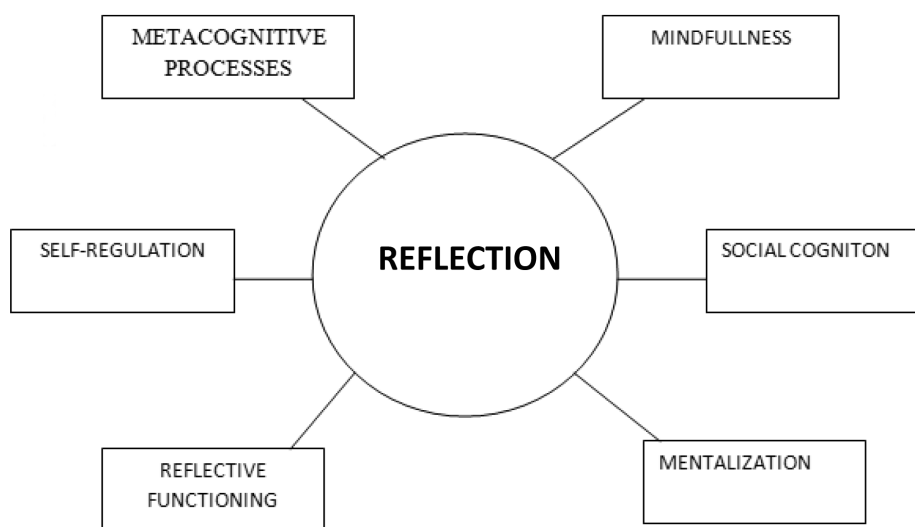


Fig. 1. Reflection and Its Foreign Alternatives

feelings, and behaviors. Moreover, CB therapists ensure that clients take credit or make self-attributions about the behavioral changes they implement” [67]. *This short quote hides several essential cultural-historical concepts: help; cooperation; mode of action; reflection; subjectness position³ (it was shown above how these concepts were used and developed in RAA).* And here is another quote of the same author, “Another somewhat related influence, especially in the development of CBT with children, was the work of the Soviet psychologists Lev Vygotsky (1978) and his student A.R. Luria (1976). They proposed that children become socialized by internalizing interpersonal communication into private (intrapersonal) speech. Their socialization and internalization models provided a theoretical framework for the development of cognitive behavior modification with children” [67].

Holmes, a contemporary social cognition researcher, defined mentalization as the capacity to *see oneself from the outside* (i.e. in the terms of the reflection action scheme, performing the internal actions of alienation and objectification), and to *see other people from the inside* — somehow permeating, transferring oneself onto their mental state (i.e. performing an internal action of decentration) [71].

The described cultural-historical approach to the Development-Health dyad implies that development of mature mental structures, capacity for reflection and self-regulation is prerequisite for health. This raises the question: how to provide conditions for this development? Until now, most research on these conditions dealt with the role of upbringing and the role of key — first and foremost, parental — figures in development, e.g. in Bowlby’s theory of attachment. As far as health issues were concerned, education was viewed mostly from the perspective of its negative effects, i.e. damage to students’ mental health. Now we have reached the third step and its key question — is it possible to create such conditions for development in the course of education that would facilitate students’ mental health in the best possible way?

3. The third step on the way to the “Education-Development-Health Triad”. Reflecting on the practice of psychotherapy and counseling for children with learning difficulties and conceptualizing the problem of the relationship between Education, Development and Health from the cultural-historical perspective.

Let us consider **the Education-Health dyad**. The epidemic of affective disorders characterizes a current state of affairs in healthcare of many countries, including Russia. Depressive and anxiety disorders; eating disorders become younger, and cause crisis states; suicidal behaviors and social maladjustment in children, adolescents and youth increasingly more frequently. A US study of over 13,000 adolescents at the age of 12 to 17 years old in 2009–2014 elucidated threatening figures of childhood depression — 13.6% in boys and 36.1% in girls [64]. An examination of 10,000 school students at the age of 7 to 17 years old in China using Covac’s Children Depres-

sion Inventory (CDI) also identified a significant number of students at risk of depression (23.9%) [74]. The biological approach to mental disorders fails to explain these tendencies, however the Vygotskian cultural-historical idea about the defining role of the social situation in children’s development allows for identifying the sources of the young generation ill-being [52].

In Russia, depressions are also a frequently seen mental condition in adults and adolescents [42]. For example, in the 1990s, about 19% of Moscow school students had depression of some degree of severity [38; 39]. In the 2000s, Kholmogorova supervised a series of studies carried out by researchers of the Clinical Psychology and Psychotherapy Department of Moscow State University of Psychology and Education, and the Clinical Psychology and Psychotherapy Lab of Moscow Research Institute of Psychiatry (now it is a branch of Federal Medical Research Centre of Psychiatry and Narcology named after V.P. Serbsky). The studies unfolded in the samples of children from various social strata, which differed in their social situation of development. At the same time, a Lab’s psychological counselling centre opened its doors for children and their parents, and the integrative model of psychotherapy incorporating family systems and cognitive-behavioral approaches was taking its shape there [51]. There was a surge in utilization of the centre’s services due to school-related issues even by socially advantaged parents whose children learnt in advanced privileged schools that sprouted like mushrooms at the time.

In order to identify and describe different risk groups, a large-scale population-based study in various Moscow educational institutes using Covac’s Children Depression Inventory (CDI), which was widely used all over the world for identification of risk groups among children and adolescents (CDI). The department’s specialists translated and validated this inventory [7] so that it could be used in healthcare and educational systems of our country meeting the principles of evidence-based research and practice. The study sample included 1,011 students aged 11 to 16 years old from Moscow and Moscow Region advanced learning schools; general-purpose schools; orphanages and charity schools [8]. The largest number of children from a high-risk group with high levels of depression symptoms studied at advanced learning schools (about 25%); children from orphanages (about 20%) followed. About 10% of children studying at general-purpose schools were also at risk for depression at that point. At the time, we inferred that a pressure of success and perfectionist standards in advanced learning educational institutions were as dangerous for children’s emotional wellbeing as poverty; alcoholism and poor care that were typical of the families that the orphaned children were withdrawn from [6].

Subsequent studies elicited threatening tendencies in college students as well. Curran & Hill [65], the authors of a large-scale study of cross-temporal changes in students’ mental health during the last 30 years, emphasize the role

³ The concept of the subjectness position corresponds to the concept of the sense of agency in the Western psychology. This concept was worked out in the special study and included two important components — activity and awareness [32], [33], [34].

of social factors in the epidemic of depression among the youth, “In this... society, young people are evaluated in a host of new ways. *Social media, school and university testing and job performance assessments mean young people can be sifted, sorted and ranked by peers, teachers and employers. There is, then, enormous pressure on young people to demonstrate their value and outperform their peers. And there is evidence that they are struggling to cope*” [65]. In their article for The Conversation (a British website), Etherson and Smith from York St John University address the subject of perfectionism and depression in students, “The pressures of young adulthood coupled with the demands of university leave undergraduates at risk for depressive symptoms. In fact, nearly 30% of undergraduates suffer from depressive symptoms, which is threefold higher than the general population. As such, researchers are increasingly interested in identifying factors that contribute to depressive symptoms to help curb the ever-increasing depression epidemic ...”, write the authors [66]. Our research in a Russian student sample was quite consistent with the above findings regarding a significant increase in the number of students with depressive symptoms within the last 10 years: this rate grew from 30 % in 2006–2008 to 44% in 2017–2018 [55]. An increase in depression paralleled an increase in the socially-encouraged perfectionism [30], just like in Curran & Hill’s English-speaking sample [65].

The Western research showed that about 75% of adults with mental disorders had expressed symptoms when they were still underage, and as little as 25% of these people had eventually received diagnosis and proper help even in developed countries [68]. Individuals who contacted mental healthcare services during their school years had lower incidence of mental disorders in their adulthood as compared to those people who never received this help [75].

These findings made researches conclude that there is a need for intensifying the connection between mental health services and schools and universities. Such mental health services would be able to identify risk groups taking into account the social situation of children’s and youth’s social situation of development and to provide qualified psychological help [54; 59]. *Ironically, despite multiple evidence of harmfulness of the educational system for the students’ health, the discussion is never about the need to restructure the system but about the development of mental healthcare services so as to eradicate the consequences of this harm as soon as possible.* The medical healthcare system tries to mitigate the effects of the educational system. And the educational system mirrors demands of the modern competitive society and parents who are frequently more concerned about their children’s social success than about their mental disorder. The educational system based on competition and ratings is traumatic for socially disadvantaged children who are often devoid of needed support and are unable to meet the imposed requirements.

Thus, when addressing the general educational practice, we see harmful effects of education on students’ health, and consequently, on their development. People who deal with the issues of education do not think about consequences for mental health; those who provide psychological and psychotherapeutic help notice the harm

but fail to eliminate its consequences fast enough. Those who work in the area of development and invest efforts in bridging the gaps between education and health find themselves in a confusing position. It is impossible to integrate three vast objects of academic research, i.e. Education – Development – Health – into a single metaobject. This idea collapsed as early as in Vygotsky’s time when G. Stanley Hall’s concept of a new science of paedology became increasingly popular. Does the situation look irresolvable? Not at all – it can be solved at the level of addressing specific issues within real-life practice. Moreover, organizing education within the framework of cultural-historical psychology can provide resources both for accomplishing developmental goals and mental illness prevention tasks.

Relying on the cultural-historical theory and achievements of certain psychological and educational practices, we view the idea that “learning precedes development” as a positive resource, meaning that education can create conditions for the child’s balanced development. *In order to make the transition from the “E-D”, “D-H”, and “E-H” dyads to the “Education – Development – Health” Triad, let us consider the example of a large-scale study in a sample of Nizhny Novgorod school students, and non-attenders specifically.* It is important to emphasize that its author became a PhD in Psychiatry eventually. The sample included more than 600 adolescents, 13% of who skipped school regularly. 76% of the non-attenders had various developmental issues (hyperkinetic disorders; organic asthenic disorders; somatoform disorders of autonomous nervous system; socialized and unsocialized conduct disorders; adjustment disorders). The non-attenders had significantly poorer academic performance: 90% of them had C and D marks and had poor relationship with teachers. The School Situation Inventory designed by Kholmogorova and Zaretsky [4] measured 8 dimensions of the school-situation perceived quality: attitude to studies; perceived learning challenges; relationship with teachers; parents’ attitude to studies; non-attendance; school leisure activities; friends among classmates, and the general measure of the school situation quality. The “non-attenders” had significantly poorer results in all dimensions as compared to regular attenders. An essentially important finding was “the genuine non-attenders” answers to questions whether they experienced insuperable difficulties with school subjects (“Yes”), and whether teachers helped them to overcome learning difficulties (“No”).

These findings were consistent with the ZPD concept implying that the normal course of children’s development and maintaining mental health would be impossible if the demands imposed on children fell outside its scope or fell into the Zone of Unattainable Challenge. In this case, according to Vygotsky, “... the child can compensate for difficulties responding with aggressive behaviors targeting the social environment that he finds himself in (his peers; social environment; school)” [13].

A student who persists in a situation when he/she has to do things that are unattainable to him, and is exposed to taunts and ridicule hinting at his/her low intellectual capacity instead of getting help, would be unable to maintain equilibrium for long. Anyone could be trau-

matized by this situation. After 6 months that specialists of the Nizhny Novgorod Mental Health Centre for Children and Adolescents spent running an integrative program to help the adolescent non-attenders and to alter teachers' and parents' attitudes to them using cognitive-behavioral therapy methods, the situation changed dramatically. Most non-attenders resumed visiting school; their academic performance improved; relationships with their teachers, parents and classmates improved too; the social situation of development became more balanced in general [3]. What makes this example interesting is that the tripartite relationship between Education, Development and Health came to the foreground twice: at first, it showed up as an object of research, and then as an object of practical psychological and pedagogical assistance to all agents of the educational process. The study allowed to make hypotheses addressing the relationship between Education, Development and Health, and to identify targets of practical efforts, which resulted in effects in all the three dimensions. The essential condition for the situation to get normalized was a change in the teachers' attitude: when they got to know more about specific features of underachievers' mental processes and emotional sphere, they leveled down standards for the non-attenders; stopped chasing them into the zone of unattainable challenge, and started helping them to cope with learning difficulties.

This raises a question: why the initial structure of the learning process made students do things that they were unable to do? Who is responsible for facilitating students

to move within ZPD without trying to do impossible things that adults make them do?

Now we have approached the core concept that we believe to be instrumental for establishing a tripartite framework encompassing "Education, Development and Health". On our complicated journey, we encountered the notion of ZPD three times, each time uncovering something new about it. In this way, RAA developed as continuation and elaboration of cultural-historical psychology. This happened for the first time when a collective of innovators who succeeded in working with children with special needs was designing the project of the Social Contract "On Conditions of Normal development of A Child with Special Needs"[18]. At that point, "working within the zone of attainable challenge" was positioned as an essential condition. And it was only after many Russian colleagues agreed with this wording when a hypothesis that Vygotsky embedded the same idea in the concept of ZPD appeared. Addressing Vygotsky's works in the context of rich experience of supporting children with special needs helped to understand the author's unfinished idea and "build" it up to the representation that shined through fragmented notes scattered around different writings.

Integrating different Vygotskian assumptions on ZPD with the idea of various developmental dimensions where this concept could be instrumental, enabled us to design a multidimensional model of ZPD [19; 79], and it was the second time when we addressed one of the main Vygotskian concepts (see Fig. 2).

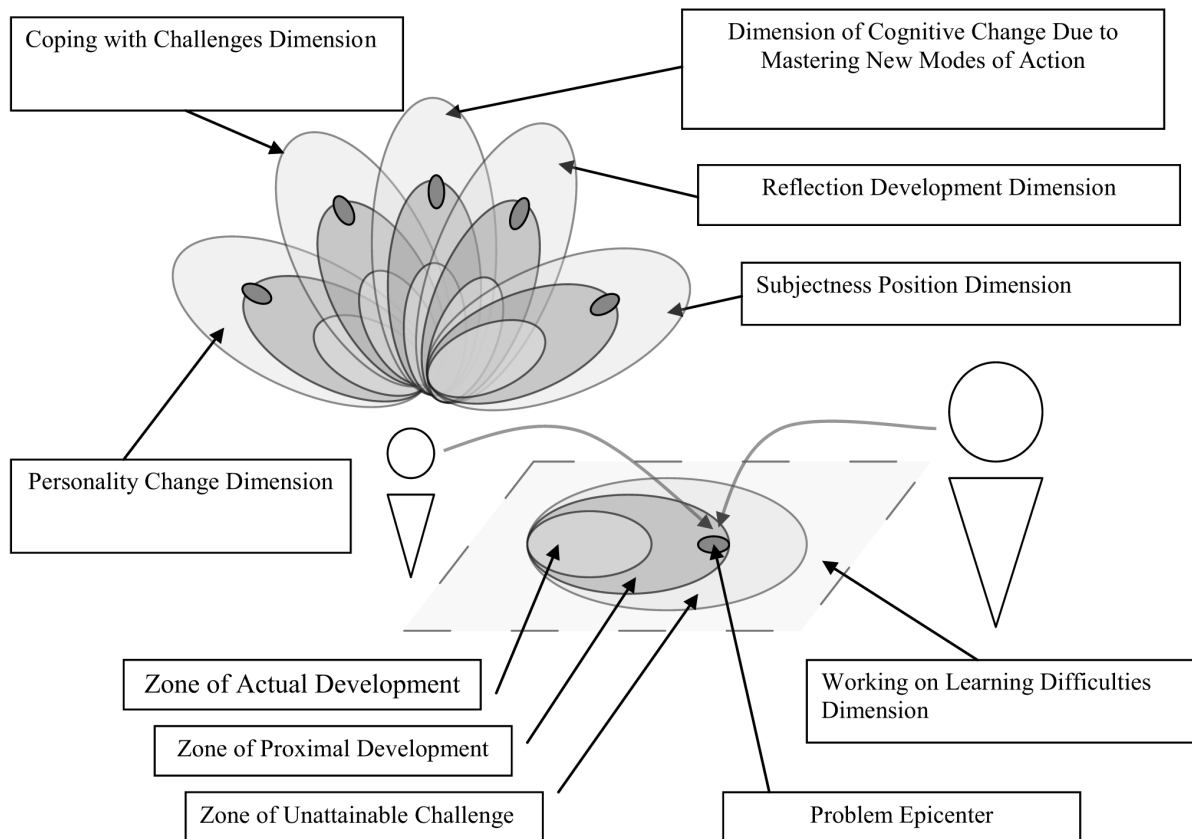


Fig. 2. ZPD as the generality of the measurement of potential developmental steps in the course of learning [19], [79]

The third encounter with this concept was driven by an attempt to understand what other deep thoughts one could find reflecting and reconstructing “the implicitly said” of Vygotsky’s writings. This encounter took place when we faced a most difficult challenge that we had ever come across in our practice, i.e. the challenge of creating conditions for education of orphaned children with disability and severe somatic conditions who underwent long-term treatment in the Russian Children’s Clinical Hospital and were under the care of the “Deti.msk.ru”, one of the oldest charity funds in Russia.

This challenge represented a natural connection between “Education, Development and Health”: these children’s health precluded them from fully-fledged learning; failure to get education had an adverse impact on the children’s development, made them lag behind their peers as far as development and education were concerned, and this affected their health. It was assumed that this vicious circle could be dissolved by concentrating effort on education, i.e. by initiating systematic education of these children and creating conditions for their development in the course of learning. However the initial educational level of these children was so low that it was unclear what could be achieved. We resisted to think about the outcome. The prospects were absolutely vague, and we could hope for nothing but for some miracle...

The hope for the miracle arose when an author of this article encountered one phrase in “Thinking and Speech” [11] on page 230... At first, this phrase seemed to be a metaphor that was to enhance the meaning that Vygotsky embedded in the idea that “learning preceded development”. On this page, Vygotsky wrote, “And a single step in learning can represent a hundred steps in development”!

Now these words are popular and are subject to a wide professional discussion, and in 2012 (at launch of our collaboration with the “Deti.msk.ru” Fund), there was hardly anyone who quoted this Vygotskian idea anywhere – neither in journal articles, nor at conferences; it was left unmentioned by books and textbooks (save as Obukhova’s textbook [44]). There were no evidence-based explanations for this mechanism. From the practical perspective, it was of pivotal importance to understand how this mechanism would work. If learning could be arranged so as to produce a hundred (or at least several if not hundred) steps in development, it would mean that every child, every person might have chances not only for normal development but also might possess the prospect of unlimited development, which V. Zinchenko [37] mentioned in his essay about Vygotsky.

Let us consider the ZPD multidimensional model [19; 23; 79; 80] etc. in terms of establishing the “Education, Development and Health” Triad.

Just like other RAA concepts, the ZPD multidimensional model originated from reflecting on the practice of assisting different children (general purpose school students; children with special needs; children with behaviour misconduct; orphaned children; orphaned children with disabilities and severe medical conditions) to cope with learning difficulties. The ZPD multidimensional model design relied on the search for “other ZPD dimen-

sions” save as the dimension of the learning material, which various Russian authors undertook [5; 41; 45; 60]. *When developing the ZPD concept, Vygotsky emphasized that “...a salient feature of learning is that learning creates the zone of proximal development, i.e. evokes, awakens and sets a whole set of internal developmental processes to movement”* [13]. What did he mean under “a whole set of developmental processes”? It is known that discussing the notion of ZPD and its pivotal importance for a new understanding of the relationship between learning and development, Vygotsky emphasized that, firstly, the concept of ZPD could refer not only to cognitive functions but also to development of a child’s personality in general, i.e. he understood it quite broadly [11]. Secondly, as it has already been said, Vygotsky articulated an important principle that “a single step in learning can represent a hundred steps in development” [11, p. 230]. This enables us to assume that a step that a child makes in learning can somehow evoke the developmental processes that lie within various “dimensions”, including those that relate to health.

Every practitioner working with children knows that development is not even but unfolds by leaps and bounds. At some point, the efforts invested turn into a quantum leap in development. This leap can be due to a shift in mastering some learning material (a child eventually understood the meaning of mathematical operations or bridged some old gap in knowledge) or to a breakthrough in development of mental functions (a child learnt to perform actions mentally and this changed the whole structure of mental activity); coping with personality-related barriers (having succeeded in overcoming difficulties, a child became confident in his/her own abilities and willing to invest efforts in coping with new challenges).

As follows from this thread of thought, the steps along the vector of with learning lesson material (the dimension of working with learning difficulties in Fig. 2) can evoke “the whole set of developmental processes” as Vygotsky argued. These developmental processes can refer to various developmental dimensions as shown in the proposed diagram, including:

- 1) a child’s attitude to learning (the subjectness position);
- 2) making meaning of one’s activity (reflection),
- 3) various mental functions that help to implement this activity (cognitions),
- 4) personality traits and specific features that exhibit themselves and take shape within this activity (personality) (Fig. 2).

The proposed multidimensional model [19; 23; 79; 80] opens the way to applying the notion of ZPD both to situations of learning difficulties in childhood and to a wide range of challenges that an individual (either a child or an adult) is unable to overcome by him/herself and seeks help for this (as it happens in education, counselling and psychotherapy).

*We see that various aspects of education, development and mental health (and, consequently, educational, psychological and psychotherapeutic efforts) intertwine very closely in these examples. **The problem***

epicentre is a point where various aspects intersect; it is a central challenge, the ability to overcome which determines whether developmental processes will be evoked or not. A similar concept proposed by Vygotsky is a central new formation of school age. He called it “the core nerve”, “the axis”, around which all the other processes center. At the same time, he emphasized that “most complicated dynamic regularities that can’t be described by an a priori present theoretical formula arise between the process of development and the process of learning” [13].

Indeed, when working with a concrete child one may find out that his/her epicenter refers to neither of age-related new formations but to his/her learning history; specific features of the family environment; the experience of interpersonal relationship, or emotional coping with challenges. And then the target of efforts can shift from the dimension of learning difficulties or the central new formation of the age to any of other developmental dimensions where a blockade that is hindering overall development has arisen. The dimensions of the subjectness position and reflection become crucial in this model.

The subjectness position dimension represents the person’s capacity to be the agent of his/her own activity and its reflection [32], [33]. The child who owns a subjectness position towards his/her activity starts to engage actively in overcoming challenges accepting the adult’s support, making use of it but also initiating things him/herself. If a child fails to do something by himself, but is able to understand how to do it in collaboration with the adult, then this activity is manageable for the child and falls within his/her ZPD. If the child is invited to act outside “the upper limit” of ZPD, i.e. within the zone of unattainable challenge (i.e. the area where the child lacks resources for a thoughtful collaborative action, for understanding this), then the child will fail to utilize this help and the problems may grow worse to a degree of the learned helplessness syndrome, depressive or anxiety disorders. Alternatively, if the adult’s support is adequate, the child will gradually add to his/her resource while reflecting on his/her joint activity with the adult, becoming aware of its tools and interiorizing them. Accordingly, the challenges that seemed unattainable in the beginning gradually become the subject of joint activity and can be resolved successfully.

In this section we attempted to demonstrate close relationships between Development, Education and Health and their underlying mechanisms identified using the framework of cultural-historical psychology as amended and expanded by concepts that RAA develops. *It is worth emphasizing that from the perspective of classical conceptualizations of a research object, it is impossible to create “a theory” of such a global object.* However

this neither undermines the need to consider this relationship from a consistent theoretical perspective, for example, in terms of the developmental theory, nor the need of setting practical goals, in order to manage which one needs to hold a holistic view on Education, Development and Health. *We believe that cultural-historical psychology could be considered a front runner for the theory that could be shared by Education, Development and Mental Health and could serve as a methodological clue to setting and searching for practical objectives where these “dimensions” can be viewed as interrelated.* Let us provide a rationale for these assumptions in Step 4.

Step 4 – Approaching “New Developmental Parallelogram”. The rationale for integrating tools of pedagogical and psychotherapeutic help and educational and psychological counselling to meet practical challenges of education; to create conditions for development and mental health maintenance.

If we give up attempts to state the problem in its classical academic sense and attempts to answer the question, “what the relationship between Education, Development and Health is” as an object of research, then we still can follow a non-classical route, i.e. asking practice-related questions: how one can account for and provide for this relationship creating conditions for students’ high-quality education; constant development and mental health maintenance?⁴ This problem statement shifts the focus from the knowledge about the subject of “a tripartite relationship” to the knowledge about how to manage it, for example, how one can create conditions facilitating children’s personality development and health. An alternative question might be, “How one could create conditions for education and development of severely ill people when organizing their treatment?” Another question might be, “Is educational resource useful in somatic and mental disorders treatment? Which conditions would turn activity (educational, occupational, play activities etc.) into a resource for education, development and prevention of illness or enhancing one’s health?”

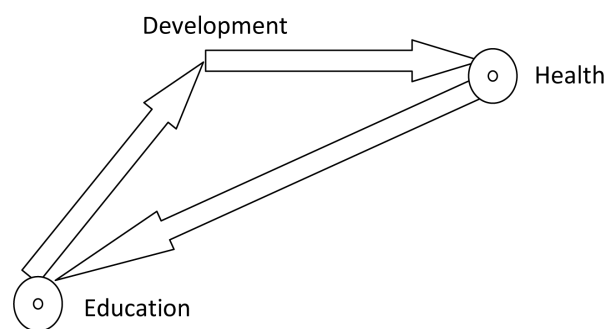


Fig. 3. Development-Education-Health Triad

⁴ This problem statement is very close to a tripartite goal of a complex science of ergonomology (ergonomics) that Bekhterev stated in the 1920s: increasing the efficiency of work performance; maintaining working peoples’ health and developing their personality. If we change “working people” for “students” and “work performance” for “academic performance”, this tripartite goal becomes quite compatible with our problem. Besides, at the time when Bekhterev was dreaming about ergonomology, Vygotsky was discussing paedology as an integrative science of human development and in “Historical meaning of the Crisis in Psychology” (1927/1982), his policy writing, he provided a rationale for emergence of new – practical – psychology [10].

The aforementioned examples have demonstrated relevance and importance of these questions and the need to build the connection between Education, Development and Health so as to avoid adverse effects of education on students' development and health. We have already mentioned the experience of using RAA when helping children overcome learning difficulties. This experience shows that facing a learning challenge can become a resource for development if:

- coping with it takes place within ZPD;
- if an assisting adult interacts with students as a co-worker rather than tries to exert any influence on them pursuing educational, health-related or any other goals;
- if an assisting adult supports students' subjectness position helping them become agents of their own (and their joint) activity and reflection;
- if an assisting adult encourages and supports students' reflection targeting making meaning of and restructuring one's modes of action; becoming aware of and eliminating internal obstacles; internalization of joint activity experience;
- if joint activity facilitates motivational and meaning-making aspects of learning etc.

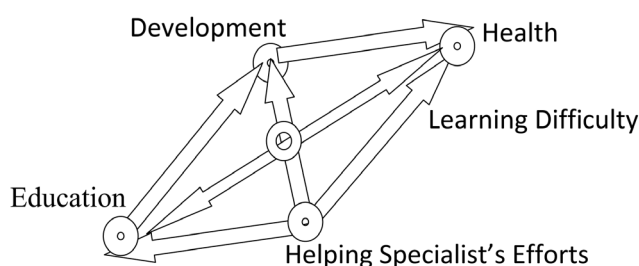


Fig. 4. "A new parallelogram of development" embraces efforts to meet a complex practical challenge and to establish relations between Education, Development and Health – relations that can change their foci and epicentres in every particular case

This list can be continued. The missing link in the Education, Development and Health triad is efforts of practitioners (psychologists, psychotherapists, teachers, tutors etc.) who engage in meeting specific practical challenges: from helping a concrete child with learning difficulties to adjusting the learning process in a concrete class, school or college taking into account all three spheres. Building "the Triad" up to "the Quadrilateral", we get "a new parallelogram of development"⁵ that can be depicted the way it looks like in Fig. 4.

The field where building this relationship is reasonable and relevant may be providing help with overcoming learning difficulties. As we were able to see, the deeper the issue is, the more complex this relationship can be, but, alternatively, the richer developmental resource it has. The experience of the "Deti.msk.ru" Fund's team may be

a shining example of providing integrative help to children with learning difficulties. Throughout 7 years since the time when the practical goal of creating conditions for appropriate education and development of orphaned children with disabilities and severe somatic conditions, there have been multiple attempts (both successful and unsuccessful) to get this process up and running.

Nevertheless, the idea itself and belief that it could be realized has never been doubted: eventually the team reduced to those people who believed in the possibility of these children's normal development. Today, the children are consistently developing despite their special health needs; the learning process has been aligned; and thanks to Natalia Shumilkina's initiative (she is a stage director of the Russian Academic Youth Theatre), the Centre, where children stay, has created a theatre, and little actors have already staged 4 professional performances in Moscow and Saint-Petersburg. Interestingly, only 7 years ago, in January 2013, the Centre's employees and counselors were having hot discussions whether these children were at all educable; whether they were able to develop. Today spectators who leave after a performance is over do not even feel reminded that the cast included children with special needs⁶. Another case-study with a group of children at risk of school exclusion in Great Britain was presented by Olga Rubtsova and Harry Daniels as an example of applying a "dramatic event" as a cultural tool for reorganising the social situation of development [47].

We have outlined only one potential area where Education, Development and Health should go together, i.e. psychological and educational assistance with overcoming learning difficulties. However other areas like this could be identified too. Firstly, these are all kinds of assistance to various categories of children with special needs, including inclusive education. Secondly, they include helping teachers in their work with children with learning difficulties. Thirdly, they include helping parents to interact with their children, to overcome prejudice that complicates relationship and has an adverse effect on the family's development and health. Fourthly, psychotherapy can also make use of (and in fact it does) such concepts as ZPD, a subjectness position, reflection etc.

Helping adults' consistent effort aiming at establishing collaborative relationship with children and supporting their initiative in shaping, implementing and reflecting upon their own intentions not only facilitates enhancement of children's resources but also contributes to development of their subjectness position in learning, which becomes the key resource for education and development and becomes a prerequisite for one's mental health balance.

A crucial contribution of students' subjectness position to their mental development was confirmed by the findings of a study that took place in a sample of school students of different age, living in different Russian cities and studying in schools of different types: students

⁵ A.N. Leontyev introduced the notion of "a parallelogram of development" to research on memory as a higher mental function (Vygotsky "Thinking and Speech"). In this case, the term "a parallelogram of development" is used to highlight RAA's belongingness to the cultural-historical tradition.

⁶ In 2019, the Fund won the President's grant supporting theatrical activities and studying its effects on children's development. The study was called "Opening unlimited capacities".

with higher levels of subjectness had a better school situation (good relationship with a teacher; availability of help etc.) and better emotional well-being [33]. The elementary school students' subjectness position was more prominent than that of the high school students' that might provide indirect evidence for a negative effect of education (studying at school) on the students' subjectness position as far as learning was concerned. In other words, in the course of growing, students started to lose learning-related motivation and awareness. Thus, it might be inferred that their subjectness position was unsupported and perhaps was suppressed at school. Students of the few schools where the educational process relied on facilitating students' subjectness position perceived their school situation as more satisfactory.

Practical cases of providing psychological and pedagogical help illustrate the role of a child's subjectness position in overcoming learning difficulties quite vividly. *These cases also show that it is the subjectness position that is prerequisite for activating the mechanism that Vygotsky encoded in his formula "a single step in learning can represent a hundred steps in development"*. For example, in Sasha O.'s case [34] it took a remedial school student only a few sessions to become an agent of his educational process and, having set the objective to start studying English (that was not taught at the remedial school), to learn English letters and sounds and to read short texts after three lessons with a counsellor. At the same time, the boy exhibited dramatic improvements in cognition; reflection; self-efficacy; subjectness position; and interpersonal relationship. In Denis' case [25], a 7th-grade student of a remedial class who was able to develop and master his subjectness position after six counselling sessions, set the goal to become literate and became convinced that he could achieve this. In a month, the boy mastered Russian having learnt all the rules practically by himself; received an A for an end-of-year dictation (he was the only student from the 7th grade who received this mark), and at the beginning of the following school year, the boy took part in a Russian language city competition and won the third place among students of advanced learning schools.

This list could be continued with shining examples of personality growth suddenly emerging in the course of overcoming learning challenges; and every time the game changed when children started to act as agents of their effort [24; 26; 28; 33; 43; 80].

The multidimensional model of ZPD may explain the famous psychotherapy effectiveness researcher Grawe's findings regarding the relationship between the psychotherapy effectiveness and a therapist's sensitivity to spontaneous activation of the clients resources in the process of interaction [70]. *"Spontaneous resource activation" means potential development within the subjectness position dimension, i.e. a client's (child's) ability to exercise agency in relation to his/her own issues; to identify, invest and regulate efforts aiming at solving them.* When a child interacts with an adult (a client interacts with a therapist), each of them invests as much in their joint activity as they can manage. An increase in the child's (client's) contribution would mean strengthening of

his/her subjectness position. The child's subjectness position thus becomes a prerequisite for collaboration and, consequently, its effectiveness.

Consistent encouragement of a child's subjectness position in the course of overcoming learning difficulties can be designated as a basic value that embodies Vygotsky's idea of collaboration as a specific type of the child-adult interaction within which development occurs. This value should be shared by all specialists who aim at facilitating the developmental process.

In this context, the aforementioned findings by Grawe who showed that sessions when therapists responded to the moments of their clients' spontaneous resource activation in an attuned way were most efficient, can give rise to an important assumption that may be helpful for helping children and adults in multiple ways. The most powerful effect may be achieved when a practitioner facilitates a child's (a client's) subjectness position. It is worth reiterating: a practitioner's sensitivity to a child's (a client's) subjectness position and his/her ability to target both solving an urgent issue (meeting a specific challenge) and expanding the client's resource, i.e. investing in the client's development, are of pivotal importance. If the practitioner works in this way, mastering certain skills (modes of actions) by the child is accompanied by the growth of his/her energy; self-confidence; awareness of one's own resource, and areas where he/she still needs help, and the ability to receive and use this help. The child becomes less dependent on the helping adult, more capable of coping with challenges by him/herself, and requesting the adult's help if needed; differentiating between what he/she is able and unable to do him/herself, and understanding what help he/she needs and where.

That is to say, in the course of learning or psychotherapy, the child starts to account for "the dual resource": what he/she can do by himself and what he/she can do with the adult's/teacher's/counselor's/assistant's help. Differentiation between "I can do it myself" and "I can do it with another person's help" is a prerequisite for successful educational and psychotherapeutic work [31; 81]. If the child-adult (client-therapist) joint activity is efficient, the child (the client) enjoys improved capacity for independent action as well as an expanded repertoire of joint actions [31; 81]. When the child (the client) clearly behaves as an agent of his/her activity, the third resource activates. This is a resource of a subjectness position as capacity to increase one's own resource autonomously. As a rule, this manifests itself in emergence and active implementation of one's own intentions; reflection on obstacles to their implementation, and monitoring and elimination of various internal obstacles to intention implementation. *This is a mechanism of self-development that the multidimensional model of ZPD outlines [21]. Efforts of an agent of self-development may aim at education; development; health enhancement or looking for bypasses (remediation of health limitations), depending on what lies at the epicenter of interrelationship of these aspects of his/her life.*

It is important that a helping practitioner is also an agent of his/her professional activity. Therefore, subject-

ness position can be viewed as an essential professional quality, which was confirmed within an empirical study of relations between the levels of subjectness position in learning in students of helping professions and their capacity for understanding other people and providing them with reflexive and empathic support [58].

Alternative Conclusion

In our opinion, development has a special position in the triad under discussion (see Fig.3): it is not only

a basic need, but also an outcome of education and a prerequisite for mental health. The knowledge of major developmental mechanisms is the basis for efficient performance of any specialist (be it an educator, a psychologist or a therapist) and a helping adult in a broader sense, whereas the shared concept of development as the basis for mutual understanding and activity is an essential condition of a helping team's success. Lev S. Vygotsky left us a heritage of methodological clues to the cultural-historical concept of development focusing on psychological and educational practice in normal and abnormal conditions [30].

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Связь образования, развития и здоровья с позиций культурно-исторической психологии

В.К. Зарецкий

Московский государственный психолого-педагогический университет (ФГБОУ ВО МГППУ),
г. Москва, Российская Федерация

ORCID: <https://orcid.org/0000-0002-8831-6127>, e-mail: zar-victor@yandex.ru

А.Б. Холмогорова

Московский государственный психолого-педагогический университет (ФГБОУ ВО МГППУ);
ГБУЗ «НИИ СП имени Н.В. Склифосовского ДЗМ» г. Москва, Российская Федерация

ORCID: <https://orcid.org/0000-0001-5194-0199>, e-mail: kholmogorova@yandex.ru

Статья представляет собой рефлексивную профессиональную позицию авторов к постановке проблемы связи Образования, Развития и Здоровья, включающего четыре этапа или шага: 1) от исследований мышления при решении творческих задач в норме и патологии к выделению роли рефлексии в саморегуляции мышления и преодолении проблемных ситуаций; 2) от практик помощи при трудностях в учебной деятельности и при психической дезадаптации к осмыслению этих практик при помощи концептуального аппарата культурно-исторической психологии; 3) от опоры на культурно-историческую психологию в понимании связей в диадах Образование-Развитие и Здоровье-Развитие к рассмотрению комплексных связей в триаде Образование-Развитие-Здоровье; 4) от связей в триаде к «новому параллелограмму развития» — построению основ практической деятельности помогающих специалистов (педагогов, психологов, психотерапевтов), учитывающей «триединую задачу» в опоре на концептуальный аппарат традиции культурно-исторической психологии, включая реф-

лексивно-деятельностный подход (зону ближайшего развития, многовекторную модель зоны ближайшего развития, двойной ресурс, сотрудничество, рефлексия, проблемный эпицентр, субъектную позицию, саморазвитие). При анализе каждого из шагов констатируются и анализируются разрывы между деятельностью специалистов, занятых в каждой из трех рассматриваемых сфер деятельности и обосновывается важная роль теоретических и практических разработок КИП в преодолении этих разрывов и создании научно обоснованной практики образования, ориентированной на развитие учащихся и укрепление их здоровья.

Ключевые слова: образование, развитие, здоровье, культурно-историческая психология, рефлексивно-деятельностный подход, творческое мышление, психологическое консультирование, психотерапия, рефлексия, зона ближайшего развития, многовекторная модель зоны ближайшего развития, проблемный эпицентр, двойной ресурс, сотрудничество, субъектная позиция, саморазвитие.

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Information about the authors

Viktor K. Zaretsky, Ph.D. in Psychology, Professor, Department of Individual and Group Psychotherapy, Counselling and Clinical Psychology Department, Moscow State University of Psychology & Education, Moscow, Russia, ORCID: <https://orcid.org/0000-0002-8831-6127>, e-mail: zar-victor@yandex.ru

Alla B. Kholmogorova, DSc in Psychology, Professor, Head of the Faculty of Advisory and Clinical Psychology, Moscow State University of Psychology & Education; Leading Researcher of the Moscow Research Institute of Psychiatry (A Branch of the National Medical Research Centre for Psychiatry and Narcology), Moscow, Russia, ORCID: <https://orcid.org/0000-0001-5194-0199>, e-mail: kholmogorova-2007@yandex.ru

Информация об авторах

Зарецкий Виктор Кириллович, кандидат психологических наук, профессор, факультет консультативной и клинической психотерапии, Московский государственный психолого-педагогический университет (ФГБОУ ВО МГППУ), г. Москва, Российская Федерация, ORCID: <https://orcid.org/0000-0002-8831-6127>, e-mail: zar-victor@yandex.ru

Холмогорова Алла Борисовна, доктор психологических наук, профессор, декан факультета консультативной и клинической психологии, Московский государственный психолого-педагогический университет (ФГБОУ ВО МГППУ), ведущий научный сотрудник, ГБУЗ «НИИ СП имени Н.В. Склифосовского ДЗМ», г. Москва, Российская Федерация, ORCID: <https://orcid.org/0000-0001-5194-0199>, e-mail: kholmogorova-2007@yandex.ru

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