

# Methodological Basis For The Development Of An Interdisciplinary Integrated Individual Educational Program For Students In Need Of Long-Term Treatment

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**Abstract:** This article analyzes the issues of activating the cognitive activity of primary school students undergoing long-term treatment through interdisciplinary integration. In the study, I.Yu. Based on the scientific views of Doluyev and S.V. Sharikov on hospital pedagogy, a 30-minute integrated lesson model for the subjects "Native Language + Mathematics" has been proposed.

**Keywords:** Hospital pedagogy, integration, I.Yu. Doluyev, S.V. Sharikov, individual educational plan, primary education, cognitive rehabilitation.

**Introduction:** Fundamental principles of modern hospital pedagogy show that the educational process for children undergoing long-term treatment is not just the provision of academic knowledge, but a strategic means of restoring their social and psychophysiological health. Oncohematological diseases pose a serious threat not only to the physical condition of the child, but also to his personality formation and emotional stability. I.Yu. Analyzing this situation, Doluyev draws attention to an important aspect: "the quality of life of children with life-threatening diseases is determined not only by medical procedures, but also by how much they are involved in the surrounding social environment and the educational process"[1]. This approach requires considering education in a hospital setting as an integral part of "therapeutic pedagogy."

According to S.V. Sharikov, a leading scientist in the field of hospital pedagogy, from the day a child is admitted to the hospital, a fear of "social isolation" and "academic delay" develops in them. Sharikov warns in his research that "disconnecting a sick child from education reduces their rehabilitation capabilities and

leads to cognitive stagnation"[2]. Therefore, in the organization of education for primary school students, the adaptation of the content of the subject to the physical resources of the child, that is, individualization, is an urgent pedagogical problem.

Recent studies conducted by Doluyev and his colleagues confirm that for successful rehabilitation, "collective work of specialists - doctors, psychologists, and teachers, as well as an understanding of the internal situation in the family, is extremely necessary"[1]. From this point of view, individual curricula based on interdisciplinary integration, along with optimizing the child's intellectual load, contribute to their return to a "healthy rhythm of life." This article analyzes integrated methodological approaches that ensure cognitive and emotional development specifically for primary school students.

According to the model of the leading scientist and practitioner in the field of hospital pedagogy S.V. Sharikov, the education system in long-term inpatient settings should be highly adaptable and dynamic, abandoning traditional school stereotypes. Sharikov, in

his many years of observations, scientifically proved "the ineffectiveness of 45-minute lessons in the traditional school system and strict interdisciplinary boundaries in hospital conditions"[4]. According to the scientist, the physical fatigue of a child in a hospital setting and the cognitive effects of medications require a reduction in class time, but maximum concentration of its content. Therefore, he proposes the term "cognitive rehabilitation" instead of the concept of "academic education." In this case, the purpose of the lesson is not only to provide information, but also to preserve and restore the child's intellectual functions. According to Sharikov's approach, "a sick child's lesson should become an interactive adventure, distracting them from their boring ward life"[4], which, in turn, requires a high level of creativity from the teacher and the ability to integrate subjects.

I.Yu. Doluyev and his co-authors prioritize methodological integrity in working with children suffering from oncohematological diseases. Their research shows that the "multidisciplinary collective approach" (doctor-pedagogue-psychologist) in working with children in the treatment and post-hospital period is the most important factor determining the effectiveness of education[1]. Especially in primary school students, it is recommended to conduct classes in an integrated (interdisciplinary) manner to maintain stable cognitive functions, such as attention and memory.

In Doluyev's scientific conclusions, it is noted that during the lesson, the child should feel not as a "patient," but as a "creative subject." As the scientist noted, "positive emotions and creativity in the learning process play a decisive role in overcoming a child's emotional trauma"[1]. This confirms that interdisciplinary integration not only optimizes the learning load, but also activates the child's psychological defense mechanisms and improves the overall quality of life. Consequently, integrated individual curricula are formed at the intersection of Sharikov's concept of "cognitive rehabilitation" and Doluyev's concept of "psychological and pedagogical support."

In order to preserve the intellectual potential of primary school students and bring them out of the psychological pressure of the hospital environment into the creative world, we propose an integrated

lesson model covering the subjects "Native Language + Mathematics + Reading Literacy." This model, based on the principles of cognitive rehabilitation of S.V. Sharikov, serves to direct the student's attention from dispersion to a holistic logical chain.

In order to demonstrate the possibilities of applying the above-mentioned scientific and theoretical foundations in practice, below we present an example of an interdisciplinary integrated lesson model developed for primary school students with oncohematological diseases. This model is based on the concepts of cognitive rehabilitation of S.V. Sharikov and I.Yu. Based on Doluyev's multidisciplinary approach, it is aimed at introducing the child into a creative environment not related to medical procedures.

#### **Topic: "Space Adventures: Magical Knowledge on Planets"**

Duration: 30 minutes (This time is the optimal norm recommended by Sharikov to prevent a decrease in the patient's concentration of attention[4]).

Practical structure of the integrated lesson:

The proposed 30-minute lesson model consists of three interconnected stages aimed at the phased development of student attention:

#### **1. Working with the text and visualization stage (10 minutes):**

This part of the lesson emphasizes Reading Literacy. Together with the student, a short story or a poetic excerpt about cosmic adventures is read. For example, in the example of the work "The Little Prince," key words such as "Star," "Universe," "Planet," which the hero encounters, are found in the text. The main pedagogical goal of this stage is to improve the student's reading skills, analyze the text, and most importantly, distance their imagination from the hospital environment.

#### **2. Linguistic and logical analysis stage (10 minutes):**

In the second stage, the subjects of Native Language and Mathematics will be integrated. Creative words found in the previous stage are written in a notebook based on the rules of calligraphy. Then these words are converted into "mathematical codes." In this case, the number of vowels (U) and consonants (D) in each word is counted. For example, when analyzing the word

"Adventure," a logical example ( $3 + 7 = 10$ ) is created using the sum of 3 vowels and 7 consonants. This methodology, while preserving the student's writing skills, also teaches them to use arithmetic operations in an interesting game.

### 3. Creative synthesis and reflection stage (10 minutes):

In the final part, knowledge is reinforced using Art pedagogy (elements of fine arts). Based on the number obtained as a result of mathematical calculations (for example, the number 10), the student draws 10 stars on their "imaginary planet" and gives it the name they want. I.Yu. Doluyev, such creative freedom is crucial in reducing emotional stress in a child and restoring mental stability through self-awareness[1].

This sequence allows for the simultaneous formation of competencies in three subjects while saving the student's cognitive resources.

This lesson model not only provides academic knowledge, but also fully implements the concept of "personality-oriented pedagogical support" put forward by Doluyev and Sharikov.

- The reading literacy part enriches the child's imaginary world and removes them from thoughts about illness;
- Through mathematical operations, the child feels the activity of their intellect;
- And through the native language, it is ensured not to fall behind the requirements of standard education.

Such an integrated approach allows a primary school student to distribute the learning load not vertically (sequence of subjects), but horizontally (thematic integrity). This is the only way to achieve maximum pedagogical results while saving the student's cognitive resources in hospital conditions.

The conducted analyses and methodological observations show that interdisciplinary integrated lessons are the most effective format for providing cognitive and emotional stability for children undergoing long-term treatment. I.Yu. In his 2023 scientific work, Doluyev studied the social rehabilitation of children with oncohematological diseases and noted important results. According to her research, such an integrated approach "increases

students' self-confidence in the eyes of family and society by 28%"[1]. This indicator is crucial not only for a child's academic performance but also for their perception of themselves as a full member of society.

Another important aspect of hospital pedagogy is that creative lessons sharply reduce the syndrome of "hospitalization" (hypersensitivity to the hospital environment, depression, and social passivity) in children. As S.V. Sharikov noted, for a child studying in a hospital environment, the "learning process" is the main stimulus that strengthens their hope of returning to a healthy life [4].

For primary school students undergoing long-term treatment, interdisciplinary integration is not just an educational method, but a comprehensive approach that serves the psychological recovery of the child. This methodology provides the following important priorities in practice:

Firstly, based on the principle of psychological orientation, the student's attention is successfully directed from fears associated with the state of "illness" and painful medical procedures to the world of "creativity" and discoveries. This process allows the child to transition from the "world of illness" to the "world of knowledge."

Secondly, the principle of competency-based integrity is realized. At the same time, several important competencies are formed in the student, including reading and writing literacy, arithmetic calculation skills, logical analysis, and creative thinking skills. This allows optimizing class time and saving cognitive resources.

Thirdly, integrated lessons have a specific therapeutic effect. The psychological conflict between medical procedures and the educational process is mitigated through creative content. As a result, the lesson becomes a source of "psychological relief" and joy, from the level of "obligation," which is a burden on the child, to raising him spiritually.

According to our author's point of view, the educational trajectory of primary school students undergoing long-term treatment should be aimed not only at mastering standard curricula, but also at maintaining the child's internal intellectual potential in an "awake" state. I.Yu. Doluev and S.V. Sharikov, we came to the conclusion that interdisciplinary

integration in hospital pedagogy is a "psychological bridge" that transforms the child's time spent with illness into a meaningful life.

The essence of the proposed integrated lesson model is that the student simultaneously reads, calculates, and creates. This process prevents the disruption of cognitive connections in the child's brain activity. In our opinion, the main task of a teacher working with oncohematological patients is to give the child confidence that "I am a student who can make discoveries," rather than the depressed thought that "I am sick." Only then can the educational process become an integral and most effective part of medical rehabilitation.

## **CONCLUSION**

In conclusion, it is necessary to widely use the achievements of modern hospital pedagogy in the development of an Individual Educational Program (IED) for primary school students undergoing long-term treatment. In particular, I.Yu. Doluyev's family-oriented and multidisciplinary approach should be synthesized with the principles of cognitive rehabilitation in the hospital school model of S.V. Sharikov.

Integrated lessons "Native Language + Mathematics + Reading Literacy," enriched with creative content and fairy tale-like motifs, serve to improve the quality of life of the child, stimulating them, without reducing their cognitive abilities. Such a methodology protects the child from being cut off from learning and ensures easier re-entry into the ranks of their peers after the completion of treatment. After all, the highest goal of hospital pedagogy is not only to educate the child, but also to preserve in him a strong motivation for life.

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