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**DETECTING, EXAMINING, EVALUATING AND PREVENTING
LEARNING DIFFICULTIES**

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Abstract

The learning process is not realized through a linear course, marked by successes alone, but involves continuous highs and lows, overcoming obstacles, barriers, recurring efforts, re-elaborating resolute strategies, giving up immediate inducements, pleasures or temptations that come from the outside. It takes sustained willing effort, that endures, as well as tenacity to reach the learning goal and to overcome the obstacles imposed by task solving and by the overall assignments. It's not always that all children are able to fully complete the sequences and learning experiences proposed by teachers. This generates education lacunas, incomplete knowledge, skills and abilities that are insufficiently formed and developed. Confronted with new sequences of instruction that are based on the previous ones, already completed, the pupils face obstacles and hardships, encounter difficulties in looking over the materials and assimilating their content, in solving exercises and problems. Learning difficulties may be identified from preschool age, even by the family, before the professor (usually the schoolteacher, educator) may ascertain them. Diminishing and even eliminating learning difficulties is to be the solution to the school failure they generate.

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1. Introduction

1.1. Introduction to the problematics of learning difficulties

The learning process has always involved overcoming obstacles and eliminating difficulties in individual and collective study. Beginning with the second half of the XXth century, the problematics of learning difficulties entered a new stage, through the dissociation of the field of learning difficulties from that of special education. If until the 1950s - 1960s, learning difficulties were associated with the term “intellectual deficiency”, the term subsequently proposed to designate the sphere of disorders related to acquiring knowledge and obtaining certain competencies was that of “learning disability”. Initially, the concept of “learning difficulties” was similar to that of “school difficulties” and designated “the difficulties encountered by some students in assimilating knowledge and forming competences” (Stefan, 2006, p.90). Recent specialized literature mentions the unanimous opinion of experts that *learning disorders* refer to those difficulties that present a certain constant, are based on organizational deficits or the lack of knowledge tools that foster learning (Vrăsmaş 2007). The first attempts to define the field of learning difficulties are attributed to US psychologist and educator Samuel Kirk (1904-1996) who, in his work titled “Educating Exceptional Children” (1962), put forward the following official definition: “A learning disability refers to a delay, a disorder, a slow development in one or more processes of speech, language, reading, writing, arithmetic or other school subjects, resulting from a psychological disability caused by a possible cerebral dysfunction and/or emotional or behavioral disorders. It is not the result of mental deficiency, sensory deprivation nor of social or educational factors” (Rosan, 2015, p. 245). The National Joint Committee on Learning Disabilities (NJCLD) in the USA proposed the following definition of the phenomenon:

“Learning disabilities is a general term that refers to a heterogeneous group of disorders due to minimal dysfunctions of the central nervous system, manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, mathematical or social skills; learning difficulties should not be understood as a direct consequence of mental, sensory, emotional, behavioral or attention disorders, unfavorable social or environmental influences, even if these conditions and influences also lead to learning problems” (Rosan, 2015, p. 246).

The vast range of learning difficulties can be approached from three different prisms of thought (Hussar & Stan, 2013, p.149):

1. learning problems encountered by some children in the schooling process - when we state that they are not interested in learning and getting good school results;
2. specific difficulties/deficiencies (disabilities) - which represent the subject of study of special psycho-pedagogy;
3. general/acategorical learning difficulties, that may occur to any child regardless of their knowledge and learning style, from a perspective that brings all children together, not just those who are considered to be deficient.

Children who exhibit learning disorders are those who show a significant educational discrepancy between their estimated intellectual potential and their level of performance.

Children’s performances are measured by standardized tests that are applied and measured individually, through activities such as reading, writing, mathematics. Their results are below those

expected in terms of age, intelligence quotient and school education level. We can therefore affirm that the discrepancy is associable with the disorders manifested throughout the learning processes, that may be related to possible CNS dysfunctions, but are not a consequence of mental retardation, cultural or educational impairment, severe emotional disturbances, sensory impairment. A clear delimitation must be made between actual learning disabilities (specific), which are the result of mental disabilities inherent to the individual, and learning disorders induced by misguided educational approaches or specific social perceptions, or by the manner in which the students are perceived by the people around, thus generating the shaping of a weak self-esteem and mistrust in their own forces, and therefore exerting a major influence on the personality of the child. Even when students exhibit certain cognitive limitations or medical issues that make learning harder, the difficulties they encounter and the educational requirements vary according to the attitudes and expectations of others.

When a child with proper physical development and health status registers lower learning performances than other children at the same chronological age, parents and teachers should consider the possibility of a learning difficulty.

Taking into consideration that we are talking about a series of disorders in the sphere of a child's learning capacity, highlighted by poor performances in activities such as writing and reading, mathematical computing and communication, with a significant impact on everyday activities and establishing interpersonal relations, an early assessment of such problems can prevent subsequent occurrences of anxiety manifestations, lack of self-trust or loss of motivation for learning.

Early signs of learning disorders can be identified since preschool even by the family, but often there is a tendency to conceal or deny the child's problems with the hope that time will solve them.

Once the child starts school these learning problems become more acute, and the child is unable to cope with the rigors and pace of the various activities, while the tasks become more and more complex, demanding and diverse.

The inability to learn is generated by certain brain malfunctions that play a role in the assimilation, processing, reproduction and use of information. It may be generally encountered in early and middle childhood, but as well in adolescence and adulthood, and manifests itself throughout the entire lifespan, marking significant difficulties in the acquisition and use of one or several of the following instrumental functions: phonematic hearing, pronunciation of sounds, reading-writing, reasoning or math skills.

The learning process is not realized through an endeavour marked by success alone, but also involves setbacks, continuous comebacks, overcoming various obstacles and barriers, resuming efforts, recalibrating problem-solving strategies, giving up temptations or removing disturbing factors that come from the outside. It requires a sustained voluntary effort, focus, tenacity to achieve the learning goal and to overcome the obstacles imposed by solving learning tasks.

Even with students who constantly achieve good learning results it is possible that, under the influence of different internal or external factors that have a significant impact on them, moments of setback may occur, weak concentration, poor organization of the learning activity, with negative effects upon the quality of the obtained results.

Children are not always able to go through all of the learning sequences and experiences proposed by teachers, and this may lead to gaps, incomplete knowledge, skills and competencies that are

insufficiently formed and developed, difficulties in going through learning materials, assimilating content, solving exercises and problems, establishing interpersonal relationships.

In the sphere of psycho-pedagogical disciplines, the field of *learning difficulties* is permeated by current tendencies towards “*change*”, as a necessary requirement for the fulfillment of the fundamental objectives of the current education and training process, where both partners of the educational act, both the instructor and the instructible, are subjected to the same process.

Overcoming the obstacles proposed by the tasks and exigencies of the teaching activities represents an important prerequisite for the accumulation of new experiences, in order to successfully accomplish the new objectives.

2. Problem Statement

2.1. Detecting, examining, evaluating and preventing learning difficulties

One of the largest problems, frequently cited by teachers working with school-aged children, continues to be correctly identifying which children exhibit real learning difficulties, as there is a tendency to include children with learning difficulties in the category of those with mental disabilities and direct them towards special schools.

At the core of learning difficulties lie dysfunctions of the nervous system. However, neurological examination may or may not indicate such dysfunctions. For this reason, essential elements in the diagnosis of learning difficulties are considered to be achieved through psychological assessments (observation, anamnesis, experiment, analysis of activity output etc.), education, or language evaluation.

Correctly diagnosing learning difficulties is a high-finesse process that involves a psychological, educational, medical and social expertise that can clearly delineate the subject’s symptoms from those related to other particular disorders that affect learning abilities.

The field of learning difficulties is differentiated by that of other school dysfunctions, covering a specific area of issues requiring specific educational interventions.

Vrăsmaş (2007) defines evaluation as “*a complex process of identifying particularities, capacities, abilities and skills, measuring and comparing them, a process that requires time and various tools, and that is realized with the aim of an intervention that may develop skills and remedy certain functional limitations*” (p.62).

In respect to the assessment of children with special educational needs, we can state that this is a complex activity, which correlates numerous data obtained through anamnesis, medical diagnosis, psycho-pedagogical diagnosis, knowledge of environment factors (especially the educational environment) as well as personal factors (related to each person individually), and it is oriented in four major directions:

- *medical* assessment - clinical examination, laboratory and paraclinical investigations are carried out in order to establish a complete diagnosis;
- *psychological* evaluation - by reference to existing standards, it is carried out through specific tests and tools that investigate: psychic processes, intelligence, skills, personality in its entirety;
- *educational* assessment - involves establishing the child’s level of knowledge and degree of assimilation, as well as correlating this knowledge with the child’s aptitudinal and intellectual

potential; it is in this stage of the evaluation that the identification of the special educational requirements is carried out;

- *social* assessment - considers the personal factors and those related to the environment in which the child develops (Hussar &, Stan, 2013, p.162).

When speaking about learning difficulties exhibited in school, we can point out several types of evaluations, such as (Vrăsmaş, 2007, pp. 63-64):

- a. *depending on the tools used*, two forms of assessment are distinguished: *formal* and *informal*. Through *formal* evaluation, a series of tests can be employed to assess intelligence, abilities, learning, understanding, motor skills, chromatic and auditory discrimination, language skills, behavioral and social adaptation. *Informal* evaluation can be carried out through procedures and techniques that include systematic observation, analysis of work samples, tasks, errors, interviews, questionnaires, analysis of different records etc.
- b. *depending on how different actions are taken*, the evaluation may be *static* or *dynamic*. Basic *static* assessment emphasizes what the student actually does, while *dynamic* assessment is based on development potential and investigating the psychological processes involved in learning.

The main functional or operational domains in which learning difficulties manifest themselves, as described by Hodder, Waligun and Willard (Vrăsmaş, 2007, p.49), have been identified within the fields of motor coordination, perceptual motoring, visual and auditory perception (deficiencies or inability to structure perceptual-motor basic schemes, spatio-temporal orientation), written, read and nonverbal language, intellectual development (lack of control over, even absence of functional features of thinking such as complexity, adaptability and flexibility, differentiation, judgment and symbolic thinking, reflection), the inability to operate with mathematical symbols and problem-solving schemes, as well as social and personal factors.

Throughout their activities, teachers can identify certain *signals* in students' behavior and school evolution, manifested in different learning situations, which would allow an *early detection and diagnosis* of potential development disorders.

Among these atypical signals or attitudes that can be identified in school students, we can highlight (Vrăsmaş, 2007, pp.71-72):

- sinuous school evolution, leaps, stagnation or setbacks;
- high difficulties of compliance/responsiveness to the psycho-pedagogical requirements at school, repeated refusal to perform certain tasks in the classroom, deficiencies in the development of an own learning strategy (not forming a personal learning style);
- the presence of medical conditions;
- difficulties in the sensory-perceptive sphere, inclined head, very often blinking, teary red eyes;
- skipping of lines or words when reading;
- symptoms of hyperactivity or hypoactivity, sometimes hypoglycaemia;
- poor concentration capacity;
- motricity issues (fine or global), body scheme and laterality;
- ambidexterity after the age of 6, clumsiness;

- inability to jump or climb, difficulty in going down the stairs and maintaining a one-leg standing position;
- inability to jump rope;
- difficulties in closing buttons and tying laces;
- inability to follow oral instructions;
- difficulties in realising usual gestures/activities;
- language disorders (written - about 80% of the cases, written and oral), frequent spelling mistakes, poor communication ability, lack of knowledge of concepts (meaning and form), vocabulary poverty, inversion of letters or words, difficult calligraphy, poor pencil position;
- *difficulties* in acquiring *mathematical* language with its specific spatial and temporal notions, confused space and time orientation;
- symptoms of affective or behavioral disorders (low self-image, choleric accesses, hostility, excessive impulsivity, disorientation and closing in oneself etc.);
- social difficulties (tendency to play with younger children, difficulty in establishing relationships with the people around, avoiding new social situations, egocentrism);
- anxious reactions to the school environment.

3. Research Questions

One of the most important conditions for achieving school integration of children with learning difficulties is the quality of the cooperation and the collaborative relationships between classroom teachers and the specialists involved in the personalized interventions. It is necessary in this regard to attain a real partnership in assuring learning support. Such partnership is achieved through mutual recognition of the value of the experience of each specialist and maintaining a continuous professional dialogue. If the teacher of the class is the one who organizes and leads the class, establishing the didactic strategies, the means and the methods to be employed, the support teacher is the one who knows in detail the specificities of the different types of learning difficulties, the possibilities, the limits and the specific training techniques. Only by putting all these skills and knowledge together, can the school integration of students with learning difficulties be a real success. In support of this statement, an experimental study was carried out during the 2017-2018 school year, implemented in several educational institutions in the counties of Arges and Valcea, on a number of 64 students with different learning difficulties. The study confirmed the hypothesis that "if a student with learning difficulties benefits from support provided by a support teacher who is a resource teacher and a consultant at the same time, educational adaptation behavior will optimize and improve, and school adaptation performance will increase, both in children with learning difficulties and in teachers". This happens due to the attributions and competences of the support teacher that identifies the needs of children with learning difficulties and organizes meetings with their teachers and families to get to know the intellectual and non-intellectual factors involved in their school and social behavioral success. In this experimental study, we have discovered subjects with limit intellect coming from families with appropriate socio-cultural status, but also children who face difficulties in school activities due to inadequate educational and family factors.

4. Purpose of the Study

4.1. The impact of learning disorders on the course of the education process

Although the mechanisms through which a child develops a learning difficulty are not known, it is believed that learning difficulties are caused by difficulties of the nervous system that affect the reception, processing or communication of information.

On the background of increased diversification of psycho-pedagogical, psychiatric and psychological intervention techniques, more and more specialists maintain that learning difficulties are treatable.

The main *causes* that lead to learning difficulties can be classified as it follows (Vrăsmaș, 2007, p.58):

a. biological and physiological:

- premature births (in approximately 7 - 8 cases out of 10, preterm babies develop learning deficiencies), difficult births with prolonged labor, incidents;
- morphological, structural immaturity;
- metabolic problems (Hussar & Stan, 2013, p.161), calcium, magnesium, vitamins deficiency;
- hormonal problems;
- sensory thresholds at the limit of normality;

b. psychological:

- intelligence quotient close to limit intellect;
- perception problems, spatial-temporal-rhythmic disorientation, poor body scheme, insufficient segregation of object and background in perception, precarious shape consistency or quantity conservation;
- affective - emotional imbalances, motivational deficiencies;
- general psychological immaturity, excessive timidity, chronic inferiority complexes;
- school phobia, lexo-phobia and grapho-phobia;

c. environmental: divided into four subcategories: *school, family, social* and *relational*.

1. *school related causes* (theoretical and practical overload of academic work, oversize of the educational content, fast pace, extended school stress, school failure etc.);

2. *family related causes* (lack of affection within the family, family disinterest for school work, lack of an organized program regarding the child's learning and living conditions, extreme exigency, overprotection, poor financial conditions and low socio-cultural level, dysfunctional families, tense, aggressive family environment, alcohol abuse within the family unit, bilingualism, trilingualism, negative role-models, excessive punishment, mental shocks, acute crises, repeated intra-family disputes);

3. *social causes* (relocation to a different city or country, excessive distance to school, high-risk neighborhoods marked by antisocial behavior, juvenile delinquency, drug consumption).

4. *relational causes* (communication and group integration difficulties).

Learning disabilities vary from the simplest of difficulties to the highest degree of disability and represent a varied picture, determined by an individual combination of the instrumental disorders involved.

For this reason, in the absence of psycho-pedagogical intervention, any slowdown, stagnation or lack of progress in learning can turn into school failure.

The impact of learning difficulties on the learning process is to be analyzed from two points of view:

1. *from the student's perspective*, characterized by reticence towards school tasks, anxiety, tendency towards isolation and a conduct seeking to take refuge (copying, giving formal answers, convenient excuses);
2. *from the teacher's perspective*, characterized by the cognitive dissonance between the student's learning potential and the constant performance level, the formation of stereotypes about the student's attitudes towards school tasks, the formulation of generalizations on deviant behavior. It is necessary to eliminate the various effects associated with didactic situations (the "Hallo", "Pygmalion" effect etc).

Learning difficulties can be related to the lack of intellectual development and the lack of skills, but they are often the symptom of school inadaptation or the effect of a didactic methodology that does not take into account the students' individuality.

If not detected and treated in due time, learning difficulties can have a "snowball" effect - for example, a child who fails to understand addition in primary school will certainly not be able to acquire math knowledge in subsequent training cycles. The role of the specialists' team to intervene in the diagnosis of learning difficulties is fundamental, and consists in establishing as accurately as possible the type and degree of the disorder. Thus, the various affective and behavioral disorders, limit intellect and mental pseudo debility must be excluded after a thorough psychological examination.

Personalized intervention plan

Once the assessment/testing of the child is completed and the logopaedic report is concluded, specialists are to proceed to the next level, that is, preparing a personalized intervention plan

.The Romanian National Disability Council has established in the draft law titled "*Leveling the Playing Field for people with disabilities in Romania*" (No. 186/25.05.2005 art. 5f) that "*a personalized intervention plan is meant to set medium and short term objectives, specifying the intervention means and support mechanisms for people with disabilities through which the general objectives proposed by the personalized service plan are to be achieved*".

Students with learning difficulties may receive school support through specialized, supplemental and complementary activities in the classroom, well adapted to their special educational needs.

Drafting a personalized intervention plan is a laborious endeavor, highly important for the success of the subsequent stages, the information obtained through the evaluation of the children being particularly necessary for its construction.

The *structure* of the personalized intervention program is not standardized; there are numerous models, but the common elements of all personalized intervention plans are:

- setting short-term *objectives*;
- establishing the *timespan* within which the objectives are to be met;
- regulating the *methods* to be employed throughout the intervention process;
- pointing out the *means* to be employed throughout the activity;

- selecting partners, *factors* involved in reaching the desired objectives (parents, other students, the whole class);
- defining the means to *evaluate* the results.

The **personalized intervention plan** aims to:

- support the personal development effort of students with language disorders or students in the class;
- clearly state the sphere of responsibilities and the concrete actions to be undertaken by each partner involved in the educational intervention, starting with the student and continuing with the teachers, the school psychologist, the psycho-pedagogue teacher, the speech therapist, the child's family;
- help the partners of the educational intervention to become aware of the purpose, objectives, stages, mode of implementation and deadlines set by mutual agreement;
- offer a consistent basis for progress assessment and final evaluation of school performances, with the main objective of registering school and, respectively, educational success;
- ensure the prevention of risk behaviors and the overcoming of difficulties.

5. Research Methods

For a correct diagnosis, the following factors have been subjected to a thorough analysis: mental development level, etiologic biological and psycho-social factors which have led to the development of the learning difficulties, and the general development status of subjects in the experiment. Such a complex and dynamic assessment could be achieved through a direct involvement of teams of specialists (psychologists, speech therapists, psycho-pedagogists, etc.) who were able to investigate each child using specific methods and means, appropriate to the particular diagnostic objectives.

Applying methods of educating children with specific learning difficulties requires the observance of the following moments:

- a. *analysis of the tasks to be performed*: defining the objectives, conducting a psycho-pedagogical assessment of the student (degree of psycho-physical development and level of training), planning and carrying out activities, setting criteria and methods of evaluation (for each stage or final);
- b. *employing effective learning methods*: to be determined on the basis of the educational needs of the student, the observations previously mentioned, activity program and monitoring of daily progress;
- c. *participation in group activities*: there are various types of group activities that mitigate the "competitive" character present in a classroom, and manners vary, ranging from guided work to free activities, from presenting points of view in an ordered fashion (where the teacher or one of the students holds the role of the moderator) to free discussions, from simulation of life situations (role play) to creative analysis;
- d. *the use of a computer* is to be decided taking into account the moments and goals of the activity, as there is a hazard of the student straying from the established program;
- e. *applying medical treatment with an ameliorative, calming or fortifying role*.

With the assistance provided by support teachers and by drawing up and implementing personalized intervention plans and group educational plans, the study aimed to identify the real progress that students in difficulty can achieve if the psycho-pedagogical objectives are adapted to their intellectual possibilities.

6. Findings

In about 90% of the cases it could be noticed that poor functioning can be corrected by implementing mediated learning activities, under the guidance of a support teacher, and by controlled exercise of conduct, making thus available to the students with learning difficulties the opportunity to organize, restructure and refine previous mental structures and replace them with new, effective, conduct.

During this experiment, the support teacher was the one who assessed the learning potential of a child with learning difficulties, identifying the strengths (possibilities) and weaknesses (difficulties) of each one. In mass education, where children with different types of difficulties are integrated, there are support teachers who, after complex assessment of children with learning difficulties, can provide *mediated* learning through:

- assisting and supporting didactic activities in classes integrated by children with learning difficulties,
- assisting and supporting the implementation of an individual and personalized learning program (cognitive, written/read language, psycho-motor, affective-motivational),
- elaborating and proposing to the working team customized educational service programs;
- providing curricula adapted to the development and learning possibilities of the children,
- collaborating and supporting teachers in the methodical preparation of the activities to be conducted with students with learning difficulties,
- periodically evaluating the results of the intervention plans,
- supporting the families in relation to the schooling of the children..

At the end of this experiment it was possible to highlight the role of the support teacher who, through a pro-active approach in didactic activities and intervention in individual activities, is efficient for the whole institution - for teachers and especially for students with learning difficulties, competing in solving the problems encountered and preventing new ones, as well as developing, along with all the other participants, personalized intervention plans prepared for them.

The main *requirements* at the core of the corrective-recovery efforts are the following:

- defining as accurately as possible the student's educational needs;
- specifying the framework objectives of learning and operationalizing them on a case-by-case basis;
- assessing the student's skills and capabilities in relation to the proposed objectives;
- adapting the methods to the needs of the student with learning disabilities;
- providing the material basis necessary for the development of the learning activity;
- designing alternative ways of training when those originally proposed do not render effect;
- assuring inverse connection (periodic re-evaluation of the program);
- considering school assessment in formative terms;

various methods of educating children

7. Conclusion

For teachers, effective curriculum delivery is recommended, differentiated for students with learning difficulties (Gherguț, Frumos, & Raus, 2016, pp.56-57), a fact that involves approaching various *strategies* on the basis of:

- careful supervision and guidance of students;
- dividing learning tasks into smaller, achievable steps;
- obtaining a permanent feedback;
- simplifying notions, clarifying, repeating and consolidating them;
- highlighting “key” information through symbols;
- support through electronic equipment;
- employing all verbal, nonverbal and paraverbal communication resources to stimulate and foster the expression of feelings and emotions, overcoming obstacles, blockages and barriers in communication;
- encouraging, praising, rewarding, recognizing success, increasing students’ confidence in their ability to learn, to initiate and carry out different school tasks;
- carrying out activities aimed at developing the capacity to focus, cooperate and collaborate with other students.

Some of the students with learning difficulties benefit from speech therapy programs, psychological counseling, travel assistance (there is a need for an infrastructure tailored to these needs), tailored programs, different teaching methods designed to foster the understanding of information and skills development, as well as the integration of children into their social environment.

In conclusion, people with learning difficulties can receive educational support from a specialized staff consisting of doctors, speech therapists, psychologists, pedagogues as well as teachers, through an adapted curriculum or by fostering parents’ involvement in the efficient education of their own children. In order to achieve performances similar to those of students who do not present learning difficulties, specialized intervention is required, by means of individualized programs, where the learning methods and strategies employed in the learning process are to be different from regular ones. For both regular children and children with learning difficulties, the learning process can be an effective framework for change in the case of learning difficulties, and inclusive educational programs provide important levers at the level of social integration of the student.

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