



# Common Characteristics Of Problems Associated With Children With Autism Spectrum Disorders

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## ABSTRACT

The article highlights the inclusion of Rda (early childhood autism) in the schizophrenic defect of the psyche and its special place, its distinction from all developmental anomalies in terms of its clinical manifestations and the greatest complexity and inconsistency with the psychological structure of the disorder, the stages of normative speech development, the causes of speech disorders in children with autism, the fact that their symptoms are primarily based on social factors, what factors should be paid attention to when organizing a correctional work system, and the specific features of children with autism.

## Keywords:

Intellectual function, affective, psychology, neuropsychology, Rda (early childhood autism), Autism, Asperger syndrome, Retta syndrome, symptom, etiology, correction, autistic affective communication disorder

Describing the general characteristics of the problems associated with children in autism spectrum disorders, it is necessary to first consider the history of the concept of "autism", the classification of children with aSD, their diagnostic criteria and clinical signs, including common symptoms. The history of the concept of a disorder such as "autism" was first mentioned in the 18th century. At that time, the term autism was not yet used, but medical research has led to descriptions of people suffering from autism. They were non-verbal, isolated, and had a very good memory. The problem of people with autism was one of the first to be addressed by the French researcher J. M. ITAR, who, on the example of 12-year-old Victor ("Wild Boy of Averon") who lived in the

forests of Aveyron, described this condition as "intellectual mutism". He considered one of the main signs of autism to be the absence or delay in the development of speech while maintaining intelligence - perception. In his work "Mutism resulting from the defeat of intellectual functions" (1828). ITAR summarized the results of his twenty-eight-year research, for the first time describing his attempts to rehabilitate his ward [16, V. 9]. J. with M. ITAR concluded that these disabled children are asocial, they do not establish and support friendly relationships with peers, interact with others to meet their needs, they show serious violations of the formation of disorders 13 speech and language development. He proposed to distinguish the children he described from mentally retarded

children. In 1911, the Swiss psychiatrist Eugen Bleuler published the work "Dementia praecox or schizophrenia group", in which he introduced two terms into psychiatry: "schizophrenia" and "autism" (from the Greek "autos" "self"). O. Bleuler considered autism as an affective disorder to be one of the main symptoms of schizophrenia. He called autism an immersion in the world of imagination, fantasy, dreams, from fantasy to delusions. The first definition of autism as a syndrome was given by the American child psychiatrist Leo Kanner in the article "Autistic Affective Communication Disorder", published in 1943. As is known, the researcher described the syndrome as "extreme loneliness". All the children he observed (11, observed from 1938 to 1943) showed common features, the main of which were excessive isolation, isolation, avoidance of any contact with people, speech disorders and the need to repeat the same actions and monotony over and over again. In addition, he noted that the described signs become more pronounced within 2-2.5 years. L. Kanner also noted that this disease is similar to schizophrenia, but unlike the latter, such states as isolation, self-care did not increase over time. L. Kanner concluded that these children, whose condition "differed sharply from previously described conditions" (Kanner, 1943), suffered from a syndrome that he called "early childhood autism" [16, p.15]. The author, in the article "Early Childhood Autism: 1943-1955", describes and characterizes the condition of autism in a "classical" form: emphasized

- 1) complete lack of affective contact with other people;
- 2) striving to maintain monotony in the environment and everyday activities; 3) attachment to objects, constantly turning them over in their hands;
- 4) mutism or speech not intended for communication;
- 5) good cognitive potential, which manifests itself in excellent memory or when performing tests [16, p. 22]. L. Kanner's criteria have been and remain relevant to this day, on the basis of which you can get an idea of the essence of autism, they are a guide for compiling numerous questionnaires and diagnostics on the problem

of autism. Then, in 1944, the Austrian pediatrician Hans Asperger described a group of adolescents with "autistic behavior combined with good abilities in certain areas of knowledge, a characteristically "creative" attitude to language, an inability to maintain distance in relationships with other people, and disorders in the motor and motor areas" [51, p. 24]. Hans Asperger called such a disorder "autistic psychopathy". At that time, both researchers L. Kanner and G. Asperger described the same condition. The difference in the description of this disorder is that G. Asperger did not note specific anomalies in the development of speech and language comprehension. Even then, researchers noted that the severity of individual symptoms of autism can vary greatly. Currently, "Kanner syndrome" is mainly applied to low-functioning children with autism, and "Asperger syndrome" to high-functioning autistics. In this case, the classification in the literature is given on the basis of such a criterion as the level of intelligence. humor,

S. A. Morozov notes that at present, in Russia and abroad, it is recognized that this pathology was first described by G. [51, p. 24]. At that time, the work of G. E. Sukhareva was not taken into account, therefore, it is believed that in Russia autistic disorder was first described in 1947 by psychiatrist S. S. Mnukhin. He described autistic symptomatology in children associated with organic brain damage. In our country, the problem of autism was initially considered medical, corresponding to the phenomena of the schizophrenia spectrum. However, many researchers, including G. E. Sukhareva in 1955, emphasized that in the treatment of developmental anomalies in childhood, in addition to drug therapy, the child needs correctional and pedagogical work. In this regard, autism was considered a type of mental developmental disorder that requires not only drug treatment, but, first of all, psychological and pedagogical correction. In the 80s, the English psychiatrist of the 20th century Lorna Wing (taking into account the results of her own research and the characteristics of L. Kanner, identified the main signs of autism, which many authors rely on when diagnosing autism. This is

the so-called "Wing triad": qualitative violations in the field of social interaction, including studies in the field of verbal and non-verbal communication; violations of the processes of symbolization (imagination); restricted repetitive and stereotyped patterns of behavior, interests and activities [51, V. 20]. The three symptoms of the disorder should be considered only in close connection with each other. In our opinion, the symptoms included in the "triad" of disorders, as well as the need to identify the main violations in the clinical and psychological structure of a child with ASD, which affect his learning ) cover. Wing 16 and education that should be taken into account when building the correctional process . Qualitative violations in the field of interaction, including violations of the Most autistic children ignore their presence with the active communicative initiative of adults, often adults do not know how to use social, eye contact. Communicative disorders in children's autism are reflected in speech in a peculiar way. Often the first words spoken are not characteristic of the child, often the first phrases "appear" in an emotional state and may never be repeated. The vast majority of autistic children do not use speech at all, using vocalizations, word outlines. It is noted that the correction process should begin with the establishment of interaction, emotional and elementary communication with the interaction of both. We will consider in more detail the disorders in the field of communication and speech development of a child with ASD. Violations of the processes of symbolization (imagination) are the second diagnostic category of the spectrum of mesondrautism. An important condition for the formation of play skills is the ability to imagine. Imagination is the ability to imagine a situation that does not currently exist in reality.

With appropriate education, high-functioning autism studies play behaviors, and this is a very important part of their curriculum, since a child with autism can be taught rules of behavior and adequate communication skills through play. The final diagnostic criterion for autism spectrum disorders is limited repetitive and stereotyped behaviors, interests, and activities. communication in the field of verbal and non-

verbal communication. children are capable of various communication, Many studies have been conducted to determine the nature of stereotypes, repetitive behaviors of children are defined as repetitive, non-functional behaviors and/or forms of activity that manifest themselves in completely different ways. There are many classifications of stereotypes, which can be divided by the reasons for their manifestation:

1. Occur as a result of a violation of the developmental processes of the nervous system. Primitive movements that are characteristic of development in the early stages of ontogenesis, as if "stuck", remain for a long time, possibly for life.
2. "Stereotypes within the framework of catatonic syndrome. Their main differences are high and plastic muscles characteristic dynamics of development, dissociated nature of disorders (catatonic agitation and catatonic stupor)" [51, p. 91].
3. Stereotypes are tone, performing stereotypes are aimed at increasing mental tone through autostimulation associated with the child's specific interests.
4. Stereotypes are exacerbated in conditions of discomfort (sensory, etc.) and disappear when the causes of discomfort are eliminated. Lorna Wing also found that does not arise by chance, that is, autism, first of all, is a syndrome. If the etiology, pathogenesis, nosology of this disease have not yet been determined, then these signs are determined only on the basis of behavioral characteristics, and behind such behavior may be hidden various reasons and mechanisms of their development.

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